



# Doncaster Council

## Agenda

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To all Members of the

# CABINET

**Notice is given that a Meeting of the Cabinet is to be held as follows:**

**Venue:** Virtual Meeting via Microsoft Teams

**Date:** Tuesday, 9th March, 2021

**Time:** 10.00 am

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**The meeting will be held remotely via Microsoft Teams. Members and Officers will be advised on the process to follow to attend the Cabinet meeting. Any members of the public or Press wishing to attend the meeting by teleconference should contact Governance Services on 01302 736716/ 737462/ 736712/ 736723 for further details.**

### **BROADCASTING NOTICE**

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**Damian Allen  
Chief Executive**

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Issued on: Monday, 1 March 2021

**Governance Services Officer for this meeting:**

Amber Torrington  
Tel. 01302 737462

**Doncaster Metropolitan Borough Council**

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## Items

1. Apologies for Absence.
2. To consider the extent, if any, to which the public and press are to be excluded from the meeting.
3. Public Questions and Statements.

**(A period not exceeding 20 minutes for questions and statements from members of the public and Elected Members to the Mayor of Doncaster, Ros Jones. Questions/Statements should relate specifically to an item of business on the agenda and be limited to a maximum of 100 words. As stated within Executive Procedure Rule 3.3 each person will be allowed to submit one question/statement per meeting. A question may only be asked if notice has been given by delivering it by e-mail to the Governance Team no later than 5.00 p.m. on Thursday, 4th March, 2021. Each question or statement must give the name and address of the person submitting it. Questions/Statements should be sent to the Governance Team, Floor 2, Civic Office, Waterdale, Doncaster, DN1 3BU, or by email to [Democratic.Services@doncaster.gov.uk](mailto:Democratic.Services@doncaster.gov.uk)).**

4. Declarations of Interest, if any.
5. Decision Record Forms from the meeting held on 23rd February 2021 for noting (previously circulated).

### **A. Reports where the public and press may not be excluded**

#### **Key Decisions**

- |   |          |
|---|----------|
| 6. Quality Streets - Active Travel and Digital Infrastructure Programme: Doncaster Town Centre. | 1 - 22   |
| 7. All Age Strategy for People with Learning Disabilities and /or Autism (2021 - 2024).         | 23 - 132 |

## **Cabinet Members**

### **Cabinet Responsibility For:**

**Chair – Ros Jones, Mayor of  
Doncaster**

Budget and Policy Framework

**Vice-Chair – Deputy Mayor  
Councillor Glyn Jones**

Housing and Equalities

Councillor Nigel Ball  
Councillor Joe Blackham

Portfolio Holder for Public Health, Leisure and Culture  
Portfolio Holder for Highways, Street Scene and  
Trading Services

Councillor Rachael Blake  
Councillor Nuala Fennelly

Portfolio Holder for Adult Social Care  
Portfolio Holder for Children, Young People and  
Schools.

Councillor Chris McGuinness

Portfolio Holder for Communities, Voluntary Sector  
and the Environment.

Councillor Bill Mordue

Portfolio Holder for Business, Skills and Economic  
Development

Councillor Jane Nightingale

Portfolio Holder for Customer and Corporate  
Services.

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## Doncaster Council

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**Date: 9<sup>th</sup> March 2021**

### **To the Chair and Members of the CABINET**

### **Quality Streets - Active Travel and Digital Infrastructure Programme: Doncaster Town Centre**

<b>Relevant Cabinet Member(s)</b>	<b>Wards Affected</b>	<b>Key Decision</b>
Bill Mordue Cabinet member for Business, Skills and Economic Development	Town Centre	Yes

### **EXECUTIVE SUMMARY**

- 1.1 The government announced a £900 million Getting Building Fund GBF to deliver jobs, skills and infrastructure across the country. This investment is being targeted in areas facing the biggest economic challenges as a result of the pandemic. It is supporting the delivery of shovel-ready infrastructure projects, agreed with regional Mayors and Local Enterprise Partnerships to boost economic growth, and fuel local recovery and jobs.
- 1.2 DMBC considered a range of options, but due to the qualifying criteria and timescales the options were limited. The city region has supported Doncaster's submission to expand and back fill funding short falls on the town centre improvement schemes Quality Streets, already being developed as part of the successful Transforming Cities Fund bid TCF.
- 1.3 Following Sheffield City Region Outline Business Case approval for Transforming Cities Fund in March 2020, SCR asked Doncaster to progress the Getting Building Funding scheme alongside the TCF programme and accelerate straight to Full Business Case due to the very challenging funding spend period. Doncaster has been allocated £5.5million GBF for the

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delivery of this scheme.

- 1.4 Getting Building Fund will contribute to the shortfall in the Transforming Cities Fund to enable the delivery of the full scheme. Combined funding will deliver the full transformational changes to St Sepulchre Gate, Duke Street, Cleveland Street and Wood Street. Appendix A.

Benefits of the scheme include:

- Cycle lanes
  - Highway improvements including single carriageway and road narrowing
  - Public realm improvements
  - Improved bus stops and real time information points
  - Improved connectivity through the Urban Centre for pedestrians and cyclists
  - Installation of ducting to enable digital infrastructure
- 1.5 This report seeks that if the Full Business Case is successful, approval be given to enter into a funding agreement with SCR and subsequently draw down funding for the delivery of Quality Streets- Active Travel and Digital Infrastructure Programme.

## **EXEMPT REPORT**

2. Not exempt

## **RECOMMENDATIONS**

- 3.1 Note the Council has submitted a Full Business Case for Transforming Cities and Getting Build Fund.
- 3.2 The progression to Funding Agreement stage and the subsequent acceptance of funding (subject to the negotiation of acceptable terms and conditions with the grant sponsor).
- 3.3 Cabinet will be asked to delegate to the Director of Economy & Environment, in consultation with the Mayor and the Portfolio holder for Business Skills and Economic Development:

The approval to agree final design of the specific scheme and, if the bid is successful, to negotiating and agreeing the terms and conditions, and the decision to enter into a funding agreement with Sheffield City Region and subsequently drawing down the funding to the Director of Economy & Environment and Section 151 Officer, in consultation with the Mayor.

- 3.4 Removal of the income budget for on-street parking on Duke Street and Wood Street as this parking provision will be removed as part of the scheme (5.11).

## **WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?**

- 4.1 If successful the scheme will improve connectivity for Doncaster residents from the Civic and Cultural Quarter to the Station Forecourt. It will provide

an improved active travel network and safer environment for cyclists and pedestrians.

- 4.2 These improvements will create space for people to feel safe from vehicles and overall improve the public realm of the urban centre and improve the connectivity from the Station Forecourt to the Civic and Cultural Quarter and Bennetthorpe.
- 4.3 The potential improvements in our active travel network could lead to a significant modal shift, leading to air quality benefits.
- 4.4 The TCF Phase 2 programme contains active travel schemes, the delivery of which is linked to the success of 'Get Doncaster Moving'. Physical activity and sport is one of nine transformational programmes within Doncaster Growing Together and will accelerate the progress of Doncaster's 10yr Physical Activity and Sport strategy.
- 4.5 This is reflected within the Get Doncaster Moving programme with Cycling and Walking being 2 of the 5 themes and sharing a project board that will ensure that transformational change is achieved and the potential benefits realised.
- 4.6 Potential interventions funded by Transforming Cities are integral to the walking and cycling themes, providing the platform to achieving the outcome of increased numbers of residents making journeys by active travel means.
- 4.7 Getting Building Fund will contribute to the shortfall in the Transforming Cities Fund to enable the delivery of the full scheme. Combined funding will deliver the full transformational changes to St Sepulchre Gate, Duke Street, Cleveland Street and Wood Street.
- 4.8 Benefits of the scheme include:
  - Cycle lanes
  - Highway improvements including single carriageway and road narrowing
  - Public realm improvements
  - Improved bus stops and real time information points
  - Improved connectivity through the Urban Centre for pedestrians and cyclists
  - Installation of ducting to enable digital infrastructure

## **BACKGROUND**

- 5.1 Following Cabinet Approval to submit outline business case for Transforming Cities Phase 2, Sheffield City Region agreed funding for the active travel scheme, however the reduced fund would not realise the full scheme delivery.
- 5.2 Getting Building Fund investment is targeted in areas facing the biggest economic challenges as a result of the pandemic. Sheffield City Region has been allocated £33.6m from the GBF for a wide-ranging package of projects that will deliver a much-needed boost to the local economy, of which Doncaster has been allocated £5.5million for the delivery of this scheme.

- 5.3 Sheffield City Region have agreed that a combined Full Business Case to be submitted for both funding elements to enable full scheme delivery. This allows TCF to progress straight to Full Business Case (bypassing Outline Business Case).
- 5.4 The Quality Streets - Active Travel and Digital Infrastructure Programme: Doncaster Town Centre Full Business Case was submitted to SCR on 8<sup>th</sup> January 2021 with the MCA approval date of 22<sup>nd</sup> March 2021.
- 5.5 Subject to funding approval the total scheme is £9.45m of which:
- TCF: £3.5m
  - GBD: £5.5m
  - Match funding: £450k
- 5.6 Quality Streets - Active Travel and Digital Infrastructure Programme is a continuation of the recent Quality Streets improvement and enhancement to the urban centre. This scheme provides the opportunity to improve the experience and connectivity with ongoing schemes in the urban centre providing regeneration and green growth to focus on leisure and bespoke shopping experiences. Wood Street, Cleveland Street, Duke Street, and St Sepulchre Gate will benefit from the segregated cycle facilities and improved connectivity from the Station Forecourt to the Civic Cultural Quarter, improve access for cyclists and creating a safer environment with priority returned to cyclists and pedestrians and an environment in which they choose to spend time.
- 5.7 During the scheme delivery, the opportunity to install ducting required for digital infrastructure will be utilised, enabling the roll out by City Fibre and reducing further disruption to the highway in the future.
- 5.8 The scheme will also improve public transport customer experience through the provision of new bus shelters, real time information, and improve reliability of bus times by removing delays and pinch points at current stops through redesign of the highway layout. Reviewing how bus services operate in the centre will ensure passengers will have access to all key areas in the urban centre including the Civic Cultural Quarter, Waterdale and The Colonnades.
- 5.9 The Colonnades which is bordered by Duke Street and Cleveland Street, is currently struggling and it is envisaged that the project will contribute to revitalising the area and ensuring it is not left behind.
- 5.10 In summary the scheme will provide improvements to 15,893m<sup>2</sup> of highway, which includes public realm, highway improvements and bi directional cycle lanes to St Sepulchre Gate, Duke Street, Cleveland Street and Wood Street.
- 5.11 To achieve the desired carriageway design for Duke Street and Wood Street the on-street pay and display parking must be removed, reducing the income generated by this service by approximately £10k per annum. This figure is based on parking income for both streets provided by Regulation and Enforcement. Covid restrictions in the town centre in 2020 saw an income of £7424.05 generated from pay and display parking on both streets from January to December 2020. This report is requesting the associated income budget for parking on these streets is removed.



5.12 On completion the scheme will:

- Redefine the key connectivity routes from the Station Forecourt to the Civic and Cultural Quarter
- Form part of the infrastructure that will interconnect and unlock the potential of other key Urban Centre projects, including Waterdale, CCQ, Danum Library Gallery and Museum and cinema
- Support the aims and objectives of the Urban Centre Masterplan
- Improve the attractiveness of Doncaster as a location in which businesses may consider relocating to
- Improve the experience for visitors, residents, and creating an environment where they wish to stay longer and return more often
- Provide the ducting infrastructure to support City Fibre installation in the urban centre

## OPTIONS CONSIDERED

6. Four options were considered:

6.1 **Option A: Do minimum option (reference case):**

This option will not realise any improvement to the highway or public realm, the only work to be carried out will be maintenance work to the footpath and highway when budget available and when required. The area will also continue to decline.

6.2 **Option B: Deliver scheme to one or two streets only**

This option would deliver the bi-directional cycle lanes and improved public realm to a reduced area. However, it will fail to deliver the connectivity across the urban centre, creating a disjointed environment for cyclists and pedestrians and not redress the balance with vehicles in the urban centre.

6.3 **Option C: Bi-directional cycle lanes only**

This option would deliver the bi-directional cycle route connecting the Station Forecourt to the Civic and Cultural Quarter however there will be no uplift or work to the public realm to enhance and improve the attractiveness of the place for cyclists or pedestrians. The lack of improvement to the place will limit full benefits being reached in terms of numbers. Transforming Cities Fund provides cycle lanes only and the reduced Transforming Cities Fund may not cover the works required to deliver the cycle lanes across the four streets resulting in a disjointed cycling scheme.

6.4 **Option D: (Preferred option) Full Scheme Wood Street, Cleveland Street. Duke Street and St Sepulchre Gate**

Delivery of the full scheme will promote cycling and walking through the town centre in an improved and safer environment, redressing the balance whilst maintaining access for cars in the urban centre. It will also create a more Covid-19 safe space, without the need for additional schemes to meet this need. Delivering the full scheme will provide an improved and safer environment. Delivery of the cycle lane only – identified with red road markings will not improve or make the area feel safe.

Any other option other than this option does not give the finished scheme, as they would leave gaps in the network, give a disjointed scheme and will not realise the full benefits. St Sepulchre Gate would be omitted and a key

opportunity to link the newly improved Station Forecourt to the urban centre and Civic and Cultural Quarter would be lost. Additionally, the improvements to the junction at Duke Street and Cleveland Street and the area between Home Bargains (The Colonnades) and the roundabout would not happen. The scheme has been designed end to end with all the elements and it is not designed to be part completed. Completing part of the scheme only will impact on the usage and benefits which are expected to be gained.

## REASONS FOR RECOMMENDED OPTION

7. The project supports the long-term regeneration and growth of Doncaster's urban centre and the investment will allow Doncaster to improve its network of sustainable travel infrastructure, enabling communities and residents to consider other options for travel, potentially improving their health and wellbeing. Creating an improved public realm environment connecting key areas will improve the experience for visitors, residents, and creating an environment where they wish to stay longer and return more often.

## IMPACT ON THE COUNCIL'S KEY OUTCOMES

8.

	Outcomes	Implications
	<p><b>Doncaster Working:</b> Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future;</p> <ul style="list-style-type: none"> <li>• Better access to good fulfilling work</li> <li>• Doncaster businesses are supported to flourish</li> <li>• Inward Investment</li> </ul>	<p>The Transforming Cities programme has the potential to provide improved sustainable transport access to employment for Doncaster residents.</p> <p>The health benefits to businesses of employees travelling actively to work includes reduced absenteeism and improved productivity.</p>
	<p><b>Doncaster Living:</b> Our vision is for Doncaster's people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time;</p> <ul style="list-style-type: none"> <li>• The town centres are the beating heart of Doncaster</li> <li>• More people can live in a good quality, affordable home</li> <li>• Healthy and Vibrant Communities through Physical Activity and Sport</li> <li>• Everyone takes responsibility for keeping Doncaster Clean</li> <li>• Building on our cultural, artistic and sporting heritage</li> </ul>	<p>Increasing and enhancing our transport network could lead to an increase in residents being active, which contributes to a healthy and vibrant Doncaster.</p> <p>Improving the public realm will create an environment where residents and visitors choose to visit and use this key connection route from Civic and Culture Quarter to the Station Forecourt.</p>

	<p><b>Doncaster Learning:</b> Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling;</p> <ul style="list-style-type: none"> <li>• Every child has life-changing learning experiences within and beyond school</li> <li>• Many more great teachers work in Doncaster Schools that are good or better</li> <li>• Learning in Doncaster prepares young people for the world of work</li> </ul>	None
	<p><b>Doncaster Caring:</b> Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> <li>• Children have the best start in life</li> <li>• Vulnerable families and individuals have support from someone they trust</li> <li>• Older people can live well and independently in their own homes</li> </ul>	None
	<p><b>Connected Council:</b></p> <ul style="list-style-type: none"> <li>• A modern, efficient and flexible workforce</li> <li>• Modern, accessible customer interactions</li> <li>• Operating within our resources and delivering value for money</li> <li>• A co-ordinated, whole person, whole life focus on the needs and aspirations of residents</li> <li>• Building community resilience and self-reliance by connecting community assets and strengths</li> <li>• Working with our partners and residents to provide effective leadership and governance</li> </ul>	We will work together to promote the assets that Doncaster has not only to residents but visitors too.

## RISKS AND ASSUMPTIONS

9. The main risk is the combined Transforming Cities Fund and Getting Building Fund is only partially allocated, this could potentially lead to delivering a reduced scheme.

As with all new infrastructure, green and open spaces it will increase the call on the future routine maintenance and replacement budgets and therefore the Council will need to ensure there is sufficient revenue and whole life replacement resources in the place to maintain the asset for its lifetime.

Loss of SCR funding and reputation should the Council not give approval to accept the funding and enter into funding agreement.

Potential claw-back on outputs should the funding not be spent in line with the purpose for it was awarded. To date, claw back has been expected to be based on "Project Outputs" meaning the product of the works and likely to be described as the delivery of the refurbishment to St Sepulchre Gate, Duke Street, Cleveland Street and Wood Street. This would be considered reasonably within the Council's control to comply with.

The MCA may require claw back to be based on "Project Outcomes", meaning the benefits of the works, such as increased footfall and cyclists, indirect jobs etc. The outcome based claw backs for Quality Streets have yet to be defined by the MCA, and these are not the Council direct control, however we believe the outcomes are likely to be manageable as they will be based on the FBC projections and currently projected longer term to allow the benefits of the project outcomes to be realised.

Changes to the proposed scheme resulting in delays to the proposed start and completion dates.

## **LEGAL IMPLICATIONS [Officer Initials NJD Date...27<sup>th</sup> January 2021.]**

10. Section 1 of the Localism Act 2011 provides the Council with the general power of competency, allowing the Council to do anything which a person is permitted to do.

The Council will be required to enter into legally binding funding agreement which will set out how the monies can be used. Although the terms of that agreement have not yet been finalised, it is likely that they will include certain provisions to deal with match funding, deadlines for delivery and Subsidy (formally known as state aid). Failure to comply with such terms may lead to claw back of funding.

The Council will be required to amend the existing Traffic Regulation Order to revoke the provision of on street parking on Duke Street and Wood Street.

Where a local authority proposes to make or amend a Traffic Regulation Order under the Road Traffic Regulation Act 1984, the Council is required pursuant to the Local Authorities Traffic Orders (procedure) (England and Wales) Regulations 1996 before making the Order, to consider all objections made to the Order and which have not withdrawn.

Further legal advice and assistance will be provided as the project progresses.

## **FINANCIAL IMPLICATIONS [Officer Initials OB Date 27.01.2021.]**

11. The TCF T2 grant originates from the Department for Transport and the GBF originates from the MHCLG with the SCR acting as accountable body for both grants.

A smaller version of this Quality Streets project has already been approved as part of the TCF2 approval process. This approval included the acceptance and use of the £3.5m TCF funding and the contribution of £0.45m match funding. Revenue resources intended to be used as Revenue Contribution to Capital Outlay (RCCO) were approved as part of the 20/21 Revenue Budget Setting report, approved by Full Council on the 5th March 2020. These resources will be used as match funding for this scheme.

It is anticipated that the 2% allocation within the TCF grant for development costs will still be sufficient to cover the costs associated with developing the Full Business Case for this larger scheme. There is no further allocation for development costs within the GBF.

It is anticipated that there may be ongoing revenue costs emerging from the withdrawal of parking provision on two of the streets. First it needs to be established whether or not people would park at nearby council carparks if this parking provision was removed, in which case the loss of income may not be as large as anticipated, if there is a loss at all. If it is agreed that a loss of parking income would definitely arise, the income budget could be removed but ongoing revenue budget would need to be identified to offset this. No budget is identified within this report.

Any increase in future maintenance costs associated with the schemes should be discussed with the services responsible for future maintenance, so the impact on their existing budgets can be assessed e.g. Highways and public open spaces (street scene). Where the maintenance cannot be funded from existing budgets, the additional requirement would need to be highlighted as a pressure as part of the future budget setting process.

It is intended that expenditure will be claimed against the GBF funding before it is claimed against the TCF as the deadline to spend the GBF is 31 March 2022 whereas the deadline to utilise the TCF is 31 March 2023. Experience of similar funding agreements with the SCR suggest that the main risks for the Council will be in relation to claw back for failure to deliver the works, agreed outcomes and incurring spend in line with how SCR profile the grant.

Administration and reporting requirements of SCR funding agreements have also proved to be time consuming, the full costs of which cannot normally be recovered from the grant. The Council will need to ensure that sufficient resources are in place to administer these grant for their duration.

If approved, the scheme would need to be delivered within the resources allocated. Any additional corporate resources required must be agreed with the Section 151 Officer prior to committing expenditure as per financial procedure rules. Financial procedure rules E9 to E13 set out the responsibilities of the Director with regards to external funding. These include ensuring match funding arrangements are in place, ensuring that all funding notified by external bodies is received and properly recorded in the Council's accounts and informing the CFO about any subsequent

modifications to timing and amounts of anticipated funding.

Once the Full Business Case is approved, the scheme would need to be added to the E&E capital programme.

#### **HUMAN RESOURCES IMPLICATIONS [Officer Initials DK Date 17/02/2021]**

12. There are no direct HR Imps in relation to this report, but if in future staff are affected or additional specialist resources are required then further consultation will need to take place with HR.

#### **TECHNOLOGY IMPLICATIONS [Officer Initials...PW... Date...26/01/21.....]**

13. There are no direct ICT implications at this stage. However, ICT will need to feed into the design phases for the proposed scheme to advise in relation to the required infrastructure and/or changes to the Councils private fibre optic network (DPON). Any associated ICT costs would need to be met from the overall scheme budget outlined above.

#### **HEALTH IMPLICATIONS [Officer Initials... CT.....Date 26.1.21.....]**

14. Public Health supports preferred Option D to ensure that people are able to actively travel safely across the areas identified. The recommended improvements link to the Get Doncaster Moving, Walking and Cycling Strategies, which include ambitions to 'Improve the quality of where people walk' and 'Cycling is embedded within all future infrastructure schemes, ensuring a well-connected and safe cycle network that supports a variety of journeys, for work or pleasure'. Creating safe, attractive and convenient environments can encourage residents to walk or cycle to their place of work or shops as well as social cycling thereby improving physical, social and mental wellbeing. Encouraging shorter journeys by walking and cycling can help reduce high levels of road traffic that has a negative impact on air and noise pollution and people choosing to travel actively due to perceived road safety.

#### **EQUALITY IMPLICATIONS [Officer Initials SG Date 25/01/2021]**

15. Decision makers must consider the Council's duties under the Public Sector Equality Duty at s149 of the Equality Act 2010. The duty requires the Council, when exercising its functions, to have "due regard" to the need to eliminate discrimination, harassment and victimisation and other conduct prohibited under the act, and to advance equality of opportunity and foster good relations between those who share a "protected characteristic" and those who do not share that protected characteristic.

An equality, diversity and inclusion due regard statement has been prepared and appended to support this report Appendix B.

#### **CONSULTATION**

- 16.1 Consultation meetings have been held with the Mayor, Town Ward members, Portfolio Holder for Business, Skills and Economic Development and Overview and Scrutiny.
- 16.2 Engagement with internal and external partners has commenced. Consultation and engagement with businesses and residents to comment on and contribute to the final scheme.

## **BACKGROUND PAPERS**

17.

## **GLOSSARY OF ACRONYMS AND ABBREVIATIONS**

E&E: Economy and Environment  
GBF: Getting Building Fund  
MCA: Mayoral Combined Authority  
SCR: Sheffield City Region  
TCF: Transforming Cities Fund  
TCFT2: Transforming Cities Fund Tranche 2

## **REPORT AUTHOR & CONTRIBUTORS**

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**Dan Swaine Director of Economy and Environment**

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**NOTES**

**KEY:**

High quality pedestrian / public realm space. Highly accessible for mobility impaired. Opportunities for hard and soft landscaping, green spaces, trees, seating and gathering areas, public art spaces, children's play zones. High quality street lighting, street furniture and digital infrastructure.

Bi-directional cycleway. High quality surface to complement street scene. Vertical lane segregation and associated tactile surfaces. 3m Wide with priority at junctions and interchanges wherever possible. Linking key arrival and destination points in Doncaster Town Centre.

Vehicle carriageway. Narrow lanes, one ways, remove on street parking, high quality disabled parking places and loading bays to complement street scene. Vehicle is to feel the 'guest' in the otherwise pedestrian / cycle environment.

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Rev.	Revision Details	Rev by	Chk by	Date

Doncaster Council

ECONOMY & ENVIRONMENT  
INVESTMENT & MAJOR PROJECTS

Civic Office  
Waterdale  
Doncaster, DN1 3BU  
Assistant Director: Scott Cardwell

Project

Doncaster Town Centre  
Active Travel and Digital  
Infrastructure Programme

Drawing Title

Quality Streets 2021/22  
Concept Design

Drawn by Paul Carey

Approved by SG

Date Dec 2020

Scales NTS

e-mail paul.carey@doncaster.gov.uk

Telephone 01302 735098

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Drawing No. 29897-C1

Sheet 1 of 1

Stage / Revision

Concept

Duke Street Looking South - Existing

Example - Before

Example - Before

Example of Improved Street Scene

Example - After

Example - After

Concept - Duke St Looking South

Concept - Duke Street Looking North

Drawn by Paul Carey	e-mail paul.carey@doncaster.gov.uk
Approved by SG	Telephone 01302 735098
Date Dec 2020	Fax 01302 735028
Scales NTS	Drawing No. 29897-C1
Sheet 1 of 1	
Stage / Revision	
Concept	



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# **EQUALITY, DIVERSITY AND INCLUSION**

## **DONCASTER METROPLITAN BOROUGH COUNCIL**

### **Due Regard Statement for Quality Streets - Active Travel and Digital Infrastructure Programme: Doncaster Town Centre**

## **Due Regard Statement**

A **Due Regard Statement** (DRS) is the tool for capturing the evidence to demonstrate that due regard has been shown when the council plans and delivers its functions. A Due Regard Statement must be completed for all programmes, projects and changes to service delivery.

- A DRS should be initiated at the beginning of the programme, project or change to inform project planning
- The DRS runs adjacent to the programme, project or change and is reviewed and completed at the relevant points
- Any reports produced need to reference "Due Regard" in the main body of the report and the DRS should be attached as an appendix
- The DRS cannot be fully completed until the programme, project or change is delivered.

1	<b>Name of the 'policy' and briefly describe the activity being considered including aims and expected outcomes. This will help to determine how relevant the 'policy' is to equality.</b>	<p>The Quality Streets Active Travel scheme will provide improved public realm to St Sepulchre Gate, Duke Street, Cleveland St and Wood Street which are identified in the Urban Centre Masterplan and are key to the delivery of the Innovation Quarter.</p> <p>The project includes bi-directional cycle lanes, improved highway and public realm and treesworks to enhance the public realm, changes to traffic flow on Wood Street (from Prince Gate to Cleveland Street)</p> <p>Benefits of the scheme include:</p> <ul style="list-style-type: none"> <li>• Cycle lanes</li> <li>• Highway improvements including single carriageway and road narrowing</li> <li>• Public realm improvements</li> <li>• Improved bus stops and real time information points</li> <li>• Improved connectivity through the Urban Centre for pedestrians and cyclists</li> <li>• Installation of ducting to enable digital infrastructure</li> </ul>
2	<b>Service area responsible for completing this statement.</b>	DMBC Economy and Environment
3	<b>Summary of the information considered across the protected groups.</b>  <b>Service users/residents</b>	<p>The Quality Streets scheme is being undertaken to create a vibrant town centre creating a place where people chose to be and encouraging the evening economy. It is anticipated that the project will have an overall positive impact for all users as it provides wider level footpaths, reducing traffic in the area. Quality Streets is key to the delivery of the Innovation Quarter as identified in the Urban Centre Masteplan.</p> <p>Traffic surveys have been undertaken to establish the level of road use on St Sepulchre Gate, Duke Street, Cleveland Street and Wood Street and manage the impact of changes on the town centre.</p>

<b>Doncaster Workforce</b>	<p>The project includes the removal of on street pay and display parking bays on Duke Street nad Wood Street. The number of designated disabled spaces will be increased across both streets.</p> <p>Whilst it is considered that this scheme will not have any significant impact on a particular group further information on specific groups is given below:</p> <p><b>Age (OAP)</b> The improvement works to the pavements will make this better for OAPs by creating a step free environment with wider footpaths.</p> <p><b>Mobility Groups</b> The project will incorporate step free pavements and pedestrian facilities that will be DDA compliant (eg tactile pavings, level crossings). The project will remove the on street pay and display parking on Duke Street and Wood Street and increase the number of designated disabled parking spaces. The mobility bus drop off points will be combined. . Parking provision will be considered in the annual parking health check.</p> <p><b>Non motorised Users (pedestrian, cycle)</b> This project will provide bi–direcital cycle lanes on St Sepulchre Gate, Duke Street, Cleveland Street and Wood Street providing the connectivity from the Station Forecourt to the Civic and Cultural Quarter. Improved facilities for pedestians include upgraded footpaths and improved crossing points.</p> <p><b>Non car users</b> Change to Cleveland Street will remove the pinch point for buses, provide new bus stops and real time information. Some outbound services will relocate to Waterdale and new bus stops will be provided. St Sepulchre Gate taxi rank will be relocated to the opposite side of the street, making it passenger friendly with access from the footpath. Loading bays will be provided.</p>
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		While works are ongoing bus services will continue and revised routes will be advertised by South Yorkshire Public Transport Executive.
4	<b>Summary of the consultation/engagement activities</b>	<p><i>List all types of consultation that has taken place during the development of this activity. Include on-line consultations, events, meetings with stakeholders, community events, employee consultation exercises etc.</i></p> <p>A range of consultation / engagement activities will be held and include:</p> <ul style="list-style-type: none"> <li>• Design engagement with businesses.</li> <li>• Engagement with licence holders (pubs and clubs).</li> <li>• Hackney carriage licence holders</li> <li>• The Mayor, Portfolio Holders and Town Centre Councillors</li> <li>• Parking Services (removal of parking bays)</li> <li>• Business Doncaster</li> <li>• Waste management – refuse collection</li> <li>• CCTV</li> <li>• South Yorkshire Public Transport Executive</li> <li>• South Yorkshire Police – Road Safety Officer</li> <li>• Town Centre Forum</li> <li>• Engagement with disability groups – The Partially Sighted Society, Sensory Team.</li> </ul> <p>Regular scheme updates will be distributed to businesses and residents directly affected while works are ongoing and a dedicated Quality Streets email box will be set up for the lifetime of the project.</p> <p>The project will have its own communications strategy and a range of media will be used including website, press releases, letter drops, stakeholder meetings and site visits as the project progresses. The contractor will liaise with businesses during the construction stage to ensure limited impact on businesses.</p>

5	<b>Real Consideration:</b>  <b>Summary of what the evidence shows and how has it been used</b>	The project provides improved infrastructure and improved public realm which will be designed in accordance with DMRB and DDA standards improving opportunities and accessibility for all uses. The project does not discriminate against a particular group.
6	<b>Decision Making</b>	<i>Outline how the decision maker has been made aware of due regard considerations.</i>  A project team governance has been created to manage the project:  The project manager is assigned to manage the delivery of the project from inception to completion with regular reporting to the Major Projects Board on project progress. The Major Projects Board disseminate decisions were required.
7	<b>Monitoring and Review</b>	<ul style="list-style-type: none"> <li><i>Please indicate what processes/actions will be put in place to keep this 'activity' under review. For example will progress be monitored/ reported to a board, scrutiny committee, project board etc</i></li> </ul> <p>Regular reports will be made to the Major Projects Board. The works will be completed using a phased approach and updates will be provided to businesses affected. Regular site meetings will be held for the duration of the project.</p>
8	<b>Sign off and approval for publication</b>	<ul style="list-style-type: none"> <li><i>By signing this statement off as complete you are confirming that 'you' have examined sufficient information across all the protected groups and used that information to show due regard to the three aims of the general duty. This has informed the development of the activity.</i></li> <li><i>If this statement accompanies cabinet paper it will be published as part of the cabinet report publication process. Statements accompanying cabinet reports are also published on our website. If this statement is not to be submitted with a cabinet paper</i></li> </ul>



		<i>please maintain a copy for your own records that can be retrieved for internal review and also in case of future challenge.</i>
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## Doncaster Council

### Report

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To the Chair and Members of Cabinet

**Date: 9<sup>th</sup> March 2021**

**REPORT TITLE: All Age Strategy for People with Learning Disabilities and /or Autism (2021 - 2024)**

<b>Relevant Cabinet Member(s)</b>	<b>Wards Affected</b>	<b>Key Decision</b>
Cllr Rachel Blake/Nuala Fennelly	All	Yes

### EXECUTIVE SUMMARY

1. The purpose of this report is to seek agreement to launch Doncaster's All Age Strategy for People with Learning Disability and / or Autism 2021-2024. The report also highlights progress made in implementing key actions to date.
2. The strategy was developed and refreshed in partnership with NHS Doncaster CCG, representatives of the Voluntary, Community and Faith sector including Autism Plus and Choice for All Doncaster (ChAD), people with lived experience, their families and carers and staff who work in the respective areas relating to the Strategic priorities.
3. The strategy addresses key priorities as identified by Doncaster people with lived experience of Learning Disability and / or Autism. The strategy is also informed by national guidance, policy and emerging evidence.
4. The impact of COVID-19 has been significant for society as a whole. For many people with a Learning Disability and/or Autism and their families and carers, COVID-19 presents an even greater challenge, from social restrictions, greater caring responsibilities with less support, and the emerging evidence of increased risks from COVID-19 faced by those with either Learning Disability or Autism.
5. Through the engagement processes, people with lived experience, their families and carers identified areas of work that will make a positive improvement to their lived experience and expressed outcomes, and identified areas of greatest importance. Stakeholders from all partner organisations were engaged and

agreed the priorities set, with plans informed by underpinning evidence, national policy and guidance.

6. The 5 key priority areas identified by people with lived experience as most important for development are
  - a. Diagnosis of Autism
  - b. Education and Inclusion
  - c. Employment.
  - d. Carers and Short Breaks
  - e. Housing and support

Three cross cutting themes are also being addressed across plans:

- f. Health Inequalities
- g. Young People in Transitions
- h. Transforming Care

7. Key national policy and guidance, and the emerging evidence that informs the strategy and plans are referenced below.
8. Both the Learning Disability Partnership Board and the Autism Partnership Board have provided oversight of the emerging plans and their implementation, providing challenge and support where needed. Each are co-chaired by a Doncaster person with lived experience, and help to hold both the Council and key partners to account for delivering improvements in the health and wellbeing of local people.
9. The strategy refresh addresses the emergence of COVID-19 during 2020, and recognises the inequitable impact the pandemic is having on people with Learning Disability and Autism, and from Black and Minority Ethnic (BAME) groups. Building on existing approaches, the Strategy outlines plans with key stakeholders and partners to reduce the disproportionate impact for these groups of people.

## **EXEMPT REPORT**

This report should be considered in Public.

## **RECOMMENDATIONS**

It is recommended that:

- Cabinet agrees the strategy and the identified priorities
- Cabinet notes the progress made to date in actions taken

## **WHAT DOES THIS MEAN FOR THE PEOPLE OF DONCASTER?**

10. Implementation of the strategy will enable more people with a learning disability, and more people who are autistic, to be included fully in Doncaster life, and to experience more of the life chances open to others.

11. More people will be supported to access their own home, having the choice of where they live and who they live with.
12. More people will have the support they need to access, maintain and develop in their work, and will have the appropriate help and support to access universal health and wellbeing to enable them to live their best life.
13. More people will have access to a timely diagnosis and be provided with the support they need post-diagnosis.
14. Universal services and communities will have more awareness of learning disability and autism so they can accept people for who they are and make reasonable adjustments to enable people to access activities and become part of community networks.
15. More people with learning disabilities and / or autism will experience care and support that is personalised, meets their needs and choices, and is based in their own communities, within their own networks.
16. Even people with the most complex needs and vulnerabilities will have access to the same opportunities as other citizens and should expect organisations to work together more effectively to support them in their lives.
17. The key principles within the strategy align to the Children and Young People's Plan and support the key outcomes of Safe, Achieve, Equality, and Happy and Healthy.

## BACKGROUND

### Refresh of the Strategy

18. During 2018/19, Doncaster Council and NHS Doncaster CCG began work alongside people with lived experience on an All Age Strategy for People with Learning Disabilities and Autism. The agreed vision statement for the strategy is **“we believe that children, young people and adults with a learning disability and/or autism have the right to the same opportunity as anyone else to live satisfying and valued lives, and to be treated with dignity and respect. They should have a home within their community, be able to develop and maintain relationships, and get the support they need to live healthy, safe and rewarding lives.”**
19. The agreed principles for the strategy are that people with learning disabilities and/or autistic people should:
  - Have access to a timely diagnosis in line with national guidance
  - Have a safe, happy and healthy childhood, accepted for who they are, supported to have self- worth and to develop skills and talents
  - Be encouraged to hope for the same things in life as other citizens-work, family life, relationships, own home
  - Be safe in their community and free from the risk of discrimination, hate crime and abuse

- Should live in a family home or their own home with people they chose to live with unless there are exceptional circumstances why this can't happen
  - Have access to a good education and learning throughout life
  - Aspire/hope to have a paid job and be supported to achieve this
  - Be supported by family carers/relatives whose own needs, rights and views have been fully considered and are supported in their caring role
  - Have equal access to good health care and be supported to live healthy lives
  - Have highly personalised support, which is built up around people's strengths, their own networks of support and in their local community
  - Be supported to access universal and early support services, where their needs are understood, they are accepted for who they are and reasonable adjustments are made
  - Have the information they need to access social care and health services and universal services
  - Have a planned and smooth transition from child to adult life
  - Have a fulfilling and healthy later life with the same opportunities as other older people
  - Expect health and social care to work together with others to make the best of resources, working hard to achieve fully personalised support
  - Have their views and wishes in the centre of planning and shaping support
20. Following engagement and consultation with people with lived experience, five priority work streams were established, reflecting the key priorities agreed with all stakeholders;
- a. Diagnosis of Autism
  - b. Education and Inclusion
  - c. Employment.
  - d. Carers and Short Breaks
  - e. Housing and support
21. In addition, three cross cutting themes which reflect key concerns of people with Lived Experience were also prioritised, and to be considered within all work-streams;
- a. Health Inequalities
  - b. Young People in Transitions
  - c. Transforming Care
22. The launch of this strategy was planned for early 2020 but had to be deferred because of the huge amount of work required to respond to the Covid emergency. A significant proportion of this work was in support of people with a learning disability and autistic people so that they received the information, advice and support they needed to keep themselves safe. This is referenced later in the report.
23. Over past 18 months, significant work has been progressed, and these areas remain priorities within the refreshed strategy. The Strategy document provides a

brief 'You Said, We Did, Next Steps' overview for each of the five areas, with plans being regularly updated and revised as the work progresses. Significant progress has also been made to deliver against each of the 3 cross cutting themes, as each of these areas are considered in the 5 work plans, with brief updates also available within the Strategy Refresh Document and next steps identified.

24. Highlighted achievements include:

a. **Diagnosis of Autism**

In March 2020, due to COVID-19, The Autism Diagnosis Service closed temporarily to ensure it was COVID-19 safe. The service reopened in July 2020, assessing as many people as before COVID-19. A plan (Business case) developed by Rotherham, Doncaster and South Humber NHS Foundation Trust (RDaSH) to reduce the diagnosis waiting list will be considered by NHS Doncaster CCG in February 2021.

b. **Employment**

The Autism Plus Employment Support service is now offered on-line to help more people access the service during the pandemic, and those who struggle to get to the office. Mapping the opportunities and gaps in Employment support is underway and will inform plans to deliver improvements.

c. **Education**

The 'Graduated Approach' to meeting need was launched in schools in 2020, and aims to reduce barriers and put in place effective special educational provision to meet children's needs. The Bader Academy special school opened in September 2020 for children and young people with Communication and Interaction Difficulties.

d. **Carers and Short Breaks**

A Short Breaks needs assessment was completed, with work now progressing to review and develop In-House respite services. Work is progressing to expand the short breaks offer provided through the Shared Lives Service. A series of focus groups, and a survey developed by the Carers Working Groups about what people want and need from Short Breaks has been undertaken, and the final report is due imminently.

e. **Housing and Support**

A Strategic Housing and Support Needs Assessment for people with Learning Disability has been undertaken across Doncaster and South Yorkshire, and forms the basis of the emerging Housing and Support plans. A supported living scheme at Askern is in development with completion planned for Spring 2022. The developments take account of people's needs and preferences and support access to their local communities, networks and relationships.

f. **Health Inequalities**

A regularly updated Health Inequalities Action plan is in place reflecting changing needs and evidence. Learning from the Learning Disability Mortality Review (LeDeR) is embedded into the plan, including the delivery of training to health and care staff based on the learning to-date. The Plan includes increasing the number of people who access GP Annual Health Checks, which is being extended to those over the age of 14 years.

g. **Transforming Care Programme**

During the past 4 years, the number of people from Doncaster in locked rehabilitation, assessment and treatment units or secure hospital has reduced by 75%.

#### **h. Transitions**

Young people in transition to Adulthood have been identified as a priority group within the Housing and Support, Employment and Short Breaks work-streams.

25. The strategy has been refreshed to take account of revised and updated national policy and guidance relating to people with learning disability and autism, progress made so far in the implementation of the strategy's work plans, and the emerging evidence relating to COVID-19 pandemic on people with learning disability, autism and people from black and minority ethnic groups.
26. Regular updates against progress are provided to and discussed at both the Learning Disability Partnership Board and the Autism Partnership Board.

#### **Strategic Priorities**

27. During the development of the strategy, a vision statement and 16 principles were agreed with stakeholders, which describe the values, approaches and outcomes that are important to those who use services.
28. The Vision and Principles are aligned with the Doncaster Borough Strategy, the Doncaster Place Plan, and with the work-stream objectives and work plans.
29. The Vision Statement and Principles developed with people with lived experience are outlined in the Strategy Refresh document.
30. Evidence of the impact of COVID-19 on people with Learning Disability, Autism, and those from Black and Minority ethnic communities is stark. Reports from Public Health England<sup>1 2</sup> in November 2020 identified that people with learning disability and / or autism, and from BAME backgrounds are at significantly higher risk of mortality from COVID than the wider community.
31. Specific and targeted work is in development to address the health inequalities faced by key groups and will be embedded into all delivery plans over the coming weeks and months.
32. During engagement, the needs of autistic people, those with complex needs, and older people were also identified in broadest terms. These specific groups, along with young people in transitions are key groups whose needs are being addressed within the delivery plans.

#### **National Policy, guidance and emerging evidence.**

33. The Care Act (2014) describes roles and responsibilities of statutory organisations in the care and support of the people that it serves. Engagement and involvement of stakeholders is needed to ensure the needs and outcomes of local population is understood, and ensure the challenges facing organisations to

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<sup>1</sup> PH England Nov 2020 Press Release People with learning disabilities had higher death rate from COVID-19.

[www.gov.uk](http://www.gov.uk)

<sup>2</sup> PH England 2020: Beyond the data: Understanding the impact of COVID-19 on BAME groups

[www.gov.uk](http://www.gov.uk)



promote quality and sustainability are also understood.

34. Health inequalities experienced by people with learning disabilities and autism (LD&A) has been brought into sharp focus through the emergence of COVID-19. There is a range of factors that impact on people with of LD&A that mean they are up to 3.6 times greater risk of dying from the disease than the general population. (Public Health England 2020). Housing, access to information, timely medical care, and pre-existing health conditions are some of the issues the strategy and plans need to address to reduce this significant inequality for this group of people.
35. Similarly, people from Black, Asian and Minority Ethnic (BAME) groups are at significantly higher risk of mortality from COVID-19 than the wider population in general, and white British population in particular. Rates differ between ethnic groups, with men from black ethnic groups at greatest risk, which differs from previous years where black and Asian group's all-cause mortality was lowest.
36. The strategy provides focus on the needs and experiences of people from BAME backgrounds. A plan will be developed to understand the specific groups impacted, and the actions needed to address the risks, working with and driven by the affected communities, in partnership with the Minorities Partnership Group and colleagues in Public Health.
37. Understanding and addressing the risks faced by people by COVID-19 is crucial for all work plans across all priority areas and groups. Work is ongoing to ensure all plans are reviewed in light of emerging evidence, national guidelines, and best practice, with impact being monitored through regular and frequent Public Health, and multiagency forums including the Doncaster LD Quality Cell.
38. The National Transforming Care Programme has focussed on people living in secure hospitals/rehabilitation units, or at risk of hospital admission and has set very clear targets for people to be resettled into community settings. Progress has been made to support people into their own homes with appropriate support to meet their needs; with plans in place to move more people into specialist housing and support in 2021/22.
39. The Children and Young People's Plan (2017- 2020) (CYPP) sets out our ambition to be the most child friendly borough in the country, ensuring the voice of children and young people is included in all we do. We made a commitment to review its impact on an annual basis and the views of children and young people have been the foundation to these assessments.
40. The SEND Strategy sets out the priority areas to be addressed that which aim to ensure all children with Special Educational Needs have their needs met and any inequalities are being addressed.
41. Building the right support and associated national service model (2015) (LGA, ADASS, NHSE) heralds that people with LD&A should expect, as people without a learning disability or autism expect, to live in their own homes, to develop and maintain positive relationships and to get the support they need to be healthy, safe and an active part of society.

42. Personalisation is a key concept to be realised within the LD&A Strategy delivery. Making It Real (TLAP 2018) describes a framework and a set of statements describing what good, citizen-focussed, personalised care looks like from the point of view of people themselves. Through the ongoing partnership working, delivery of the strategy will continue to embed personalisation in the support offers available for people, to enable them to live their best life.
43. Carers (UK) Caring behind closed doors: six months on - The continued impact of the coronavirus (COVID-19) pandemic on unpaid carers, identifies the challenge that they face, as more carers are now providing more care than a year ago, as services closed and the needs of the person they care for have changed as a consequence of the pandemic. 79% of carers reported they have either not had a break or have had insufficient breaks from their caring responsibilities.
44. The Shared Lives provider is working to expand its offers across short breaks. The Provider has secured additional funding to support the expansion plan to recruit additional carers, and make successful placements. A strategic review of the Shared Lives model is also underway to ensure that the Doncaster offer provides the best opportunities for local people.
45. NHS Plan (2019) makes a commitment to provide more resources to support people in their communities, improve diagnosis waiting times and the NHS employing more people with learning disabilities or autism.
46. The Autism Act (2009) placed a duty on Government to produce a National Strategy for adults with autism, which was first produced in 2010 along with statutory guidance. Statutory duties arising from this Act, access to a diagnosis, raising awareness of autism, access to an assessment and services, and support into employment.
47. The National Autism Strategy (2015) is due to be revised and will include children in the next edition. Plans arising from this strategy will be reviewed once the new national Autism Strategy is published.

### **Strategic Needs Assessment- Highlights**

48. There are an estimated 7,700 people living with learning disabilities in Doncaster of whom 5,600 are adults and 2,100 are children / young people.
49. 1,354 people out of the 7,700 living in Doncaster are considered to have a severe learning disability.
50. As not all cases of Autism are diagnosed rates are estimated. Current estimates suggest that about 1% - 1.1% of the population have a form of Autism. Estimates for Doncaster suggest there are 3,089 autistic people in Doncaster, of whom 646 are under the age of 18.
51. 602 children in Doncaster between the ages of 5 – 17 years old with an EHCP have a diagnosis of Autism.
52. Nationally each year, more children are diagnosed with Autism, and in Doncaster

diagnosis rates increased from 80 children in 2016/17 to 343 in 2018/19. COVID-19 has significantly impacted on speed of diagnosis. Commissioners and providers are actively working together to resolve current challenges and increase the rates of diagnosis across Doncaster.

### **Demand for Future Services**

53. Development of the strategy identified potential demand and pressure areas for services until 2024:
- a) An ageing population with increasing numbers of older people living with learning disability and / or autism
  - b) Increasing number of younger people with complex health and care needs
  - c) Carers providing greater levels of care, who need better information, advice and support, particularly to take a break and attend to their own needs
  - d) Young people with autism reaching adulthood and needing a plan and support to prepare for adult life
  - e) Significant numbers of people currently living at home with ageing carers.
  - f) Increasing need for support and greater access to health and wellbeing services

### **The Emergence of Covid-19**

54. The emergence of COVID-19 in early 2020 has had significant impact on the lives of Doncaster people, including both autistic people and those with a learning disability. The Council and NHS partners have prioritised keeping people safe, for example:
- Establishing a weekly meeting to keep track of issues affecting Learning Disability and Autism and taking prompt action
  - This has included ensuring access to Covid testing and professional NHS support on infection prevention and control in care and support settings
  - The Council also took the discretionary decision to ensure government grant to support infection, prevention and control measures was diverted to Supported Living and community settings supporting people with a learning disability and autistic people when national government policy at the time was almost entirely focused on older people and care homes
55. The Council restarted access to day support and residential breaks as soon as the government allowed this after the first lockdown. These have been running ever since in a Covid-secure way.
56. For children and young people, during the first lockdown the short breaks team made weekly safe and well call to all families accessing targeted support. During subsequent lockdown periods, the frequency of calls made to families were agreed depending on where the young person was attending school, and where families still wished the team to make calls to them.
57. Short breaks have provided additional 1:1 support to seven families with young people who are shielding and have not been able to access their usual residential support, or are at home full time as lone carers.
58. In the first lockdown, the SEND service worked closely with schools and settings where children and young people with EHCP's attended, to ensure a risk

assessment had been undertaken to deem if a child should be attending school.

59. The SEND team worked with parents to broker a school place or additional time in school. Welfare calls were made for those children and young people with an EHCP who were not on a school role. This ensured regular contact with families, to discuss any issues, which arose due to Covid, and be signposted to the relevant agency if required. As well as continuing ongoing casework.
60. Key groups of people with a learning disability have been included in national government definition of Clinically Extremely Vulnerable and this has created a further protection to Doncaster people in terms of ensuring access to information and support.
61. The Council and partners have also developed a greater emphasis on on-line interaction to reduce isolation. For many people this has been a welcome lifeline and for others it has been actively preferable in terms of the way they like to engage. However the significant reduction in physical contact with the outside world will have reduced the confidence and skills of many people. There will need to be considerable focus on this once Covid-19 risks have reduced.
62. Emerging evidence of the impact of COVID-19 on people with Learning Disability and / or Autism, and people from BAME groups is startling. Further work will be undertaken in partnership with communities with Public Health, NHS Doncaster CCG and Doncaster Council to identify areas of concern and implement plans aimed at reducing risks where possible. Included within this will be ensuring people have timely access to Covid vaccination. There has been considerable national challenge to current government prioritisation of access to vaccination, not only for people with a learning disability but also family carers.
63. Commissioners and providers will need to continue to consider the longer-term impact of COVID-19 especially for people with learning disability and / or Autism, and those from BAME backgrounds, and adjust planning accordingly, to best meet their needs.

## **OPTIONS CONSIDERED**

64. The following options were considered:

- a) **Do nothing.**

If the strategy refresh was not progressed, the plans would risk being delivered against old data, and not take account of revised national and local strategy, guidance and best practice, including COVID-19 and its impact on identified groups. In addition, the Strategy would not have a formal launch.

- b) **Refresh and formally launch the strategy**

Refreshing the strategy provides Team Doncaster the opportunity to

- a. Launch the strategy across the Borough, providing opportunities for more people to get involved in shaping how the strategy is delivered

- b. Celebrate progress that has been made in the delivery so far.
- c. Ensure emerging issues and best practice are embedded in all developments.

## REASONS FOR RECOMMENDED OPTION

65. This strategy refresh provides Doncaster Council and NHS Doncaster CCG with assurance that positive progress has been made on the delivery of the Strategic Plans. The “all age” approach ensures improvement in the experience of people in a life transition and embeds aspiration for equal citizenship from an early age.
66. The plans align with the Doncaster Place Plan, are supported by the Joint Commissioning Strategy, and revised in light of emerging evidence (for example the Strategic Housing Needs Assessment) and regular challenge and update from people with lived experience through the Learning Disability and Partnership Boards.
67. Launching the strategy will provide the opportunity for partners to note the progress made so far, celebrate success and continue to deliver the plans to meet the needs of local people.

## IMPACT ON THE COUNCIL’S KEY OUTCOMES

	Outcomes	Implications
	<p><b>Doncaster Working:</b> Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future;</p> <ul style="list-style-type: none"> <li>• Better access to good fulfilling work</li> <li>• Doncaster businesses are supported to flourish</li> <li>• Inward Investment</li> </ul>	<p>Employment is one of the key priorities for delivery, supporting more people with learning disabilities, autism or both into work. Work is underway to identify key opportunities, ensuring that local schemes are more joined up and people have access to the support they need, to access and maintain employment.</p>
	<p><b>Doncaster Living:</b> Our vision is for Doncaster’s people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time;</p> <ul style="list-style-type: none"> <li>• The town centres are the beating heart of Doncaster</li> <li>• More people can live in a good quality, affordable home</li> <li>• Healthy and Vibrant Communities through Physical Activity and Sport</li> <li>• Everyone takes responsibility for keeping Doncaster Clean</li> <li>• Building on our cultural, artistic and sporting heritage</li> </ul>	<p>These proposals will ensure that people are more active members of their community and that they live in affordable homes as tenants rather than in a residential care setting.</p> <p>Care and support is aimed at supporting more people to access community based opportunities, from where they live, where and how they receive their care and support.</p> <p>People will be able to participate more fully in what Doncaster has to offer including sport and culture.</p>
	<p><b>Doncaster Learning:</b> Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling;</p> <ul style="list-style-type: none"> <li>• Every child has life-changing learning experiences within and beyond school</li> </ul>	<p>These proposals will enable people to have more choice about how they spend their day and have more fulfilling lives with opportunities for greater levels of independence, learning and employment.</p>

	<ul style="list-style-type: none"> <li>• Many more great teachers work in Doncaster Schools that are good or better</li> <li>• Learning in Doncaster prepares young people for the world of work</li> </ul>	
	<p><b>Doncaster Caring:</b> Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> <li>• Children have the best start in life</li> <li>• Vulnerable families and individuals have support from someone they trust</li> <li>• Older people can live well and independently in their own homes</li> </ul>	<p>The all age strategy aims for equal citizenship embedded at an early stage and that the needs of older people with learning disabilities, autism or both have a stronger focus and that they are able to access the same services as other older people.</p> <p>People with the most complex needs and vulnerabilities are a priority within the strategy to ensure they have the same opportunities.</p>
	<p><b>Connected Council:</b></p> <ul style="list-style-type: none"> <li>• A modern, efficient and flexible workforce</li> <li>• Modern, accessible customer interactions</li> <li>• Operating within our resources and delivering value for money</li> <li>• A co-ordinated, whole person, whole life focus on the needs and aspirations of residents</li> <li>• Building community resilience and self-reliance by connecting community assets and strengths</li> <li>• Working with our partners and residents to provide effective leadership and governance</li> </ul>	<p>The strategy is developed and delivered in partnership between people with lived experience, statutory and non- statutory partners, with shared planning and monitoring arrangements in place.</p> <p>Links are being developed through locality commissioning and underpinned by the Joint Commissioning Strategy and delivery plan, which aims to provide greater value for money, and a coordinated, whole person approach.</p> <p>Developing the workforce by raising awareness of learning disability and autism and a more joined up approach to training are integral to the strategy and its delivery.</p>

## RISKS AND ASSUMPTIONS

68. Ensuring that support is improved based on the principles of equitable access to community and universal services, reasonable adjustments, and evidence based developments will ensure that services offer best value for local people and the Doncaster Pound. However there is still a risk that public services will not be effectively funded to deliver improvements as quickly or as robustly as local people need them.
69. There is a risk that quality of data will continue to be problematic and hinder effective joint planning. This has been identified as a priority area within the strategy, to identify the gaps, reasons why the data is essential for planning and actions to improve the overall quality and reliability of information.
70. The strategy provides the impetus for the Council to ensure it is meeting its statutory duties in respect of the Autism Act 2009 and can demonstrate continuous improvement through the biennial Autism Self-Assessment Framework. There is a risk if the strategy is not robustly implemented that there will be gaps in meeting statutory duties and complying with national strategy.

## LEGAL IMPLICATIONS [Officer Initials HP Date 5/2/21]

71. The Autism Act 2009 created a statutory duty for the development by central government of a national strategy for meeting the needs of adults with autism, and statutory guidance to local authorities on the implementation of the strategy. The 2009 Act states that the guidance should be treated as guidance issued under section 7 of the Local Authority Social Services Act 1970, which requires local authorities in exercising their social services functions, to follow the guidance issued by Secretary of State. The strategy is compliant with the statutory guidance issued by the Secretary of State.

#### **FINANCIAL IMPLICATIONS [Officer Initials PW Date 08/02/21]**

72. It is estimated that the Council and CCG currently spend around £62m on adult services/support specifically provided for people with learning disabilities, autism or both, the Council around £31m and the CCG over £31m. A more detailed breakdown of this spend is provided in Table 3, of section 8, in the Strategy Document).
73. Currently 43% of the total adult budget spent on residential care, and a further 33% on supported accommodation.
74. Relatively small amounts of funding are spent on short breaks to support people living within their family home or Day Opportunities and 6% of the total spend is allocated via direct payments. Through delivery of the strategy there is a need to improve understanding of the kinds of support being provided via direct payments.
75. A breakdown of children's education related expenditure for 2020/21, funded from the Dedicated Schools Grant (DSG) High Needs Block spend is provided in Table 4, of section 8, in the Strategy Document.
76. There are no financial implications which can currently be quantified arising from implementation of the strategy.
77. There may be financial implications during delivery of the strategy if service reconfiguration or development is proposed; any such financial implications will need to be considered at the time in accordance with seeking relevant approvals

#### **HUMAN RESOURCES IMPLICATIONS [AT] Date 7<sup>th</sup> February 2021**

78. A priority within the strategy is workforce development and in particular the development of a multi-agency plan for autism awareness training across health and social care and with other key partners.

#### **TECHNOLOGY IMPLICATIONS [Officer Initials PW Date 05/02/21]**

79. There are no specific technology implications in relation to this report. However, there may be implications arising from ensuring appropriate data for planning and reporting. It is also understood that the use of assistive technology to promote independence will be a feature of delivery of the strategy. Any requirement for new, enhanced or replacement technology to support the implementation of the strategy would need to be considered by the Technology Governance Board.

## **HEALTH IMPLICATIONS [Officer Initials JK. Date 08/02/21]**

80. People with learning disabilities and/or autism experience poorer health outcomes than the wider population. The Strategy includes a Health Inequalities plan, which aims to improve the health outcomes for people with Learning Disability and / or Autism through a series of interventions, including access to Annual Health Checks and National Cancer Screening programmes for people with Learning Disability and / or Autism.
81. The aims of the Learning Disability Mortality Review (LeDeR) are to support improvements in the quality of health and social care service delivery for people with learning disabilities and to help reduce premature mortality and health inequalities for people with learning disabilities. The Health Inequalities plan includes the learning from LeDeR and is regularly revised and updated in light of emerging evidence and recommendations.
82. Emergence of COVID-19 has highlighted the inequalities in health outcomes for both people with Learning Disability and Autism, and people from Black Asian and Minority Ethnic Groups. Both broad groups are several times more likely than the wider population to die from COVID-19. Further focussed work is in planning with colleagues and the Minorities Partnership Group to identify the groups at greater risk, work with partners and identified communities to work together to shape the work to be done, understand the barriers, and to reduce risks where possible.
83. National drivers and local programmes of work have mostly addressed the needs of people with learning disabilities and yet there is growing evidence that people with autism also experience higher rates about mental health issues and the incidence of suicide. Delivery of the strategy will ensure that people with autism have parity with people with learning disabilities in respect of local initiatives to improve health and wellbeing.
84. Delivery of the strategy should also ensure that there is improved joint planning for people with the most complex needs, including complex health needs, and that services are fit for purpose to meet their needs

## **EQUALITY IMPLICATIONS**

85. A Due Regard Statement has been completed alongside the refresh of the strategy, and attached as Appendix 2. Decision makers must consider the Council's duties under the Public Sector Equality Duty at s149 of the Equality Act 2010. The duty requires the Council, when exercising its functions, to have 'due regard' to the need to eliminate discrimination, harassment and victimization; and other conduct prohibited under the act. In addition, to advance equality of opportunity and foster good relations between those who share a 'protected characteristic' and those who do not share that protected characteristic.
86. The focus of the All Age Learning Disability and Autism Strategy is to support people of all ages with learning disabilities, autism or both to have opportunities in life that are equitable with the wider community. The Strategy aims to ensure that people with Learning Disability and/or Autism have access to services and



support which take their unique needs and strengths fully into account and meet any specific needs.

87. A comprehensive strategic needs assessment has been completed to understand population needs, performance and gaps, and priorities have been developed based on this information and feedback from a range of stakeholders including people who use services and their families.
88. A comprehensive Communications and Engagement plan is in development, which aims to keep carers and people with learning disability and / or Autism informed of progress, and support them to get involved in the delivery of the plans. The plan will reflect the engagement that is already in place, through the Autism and Learning Disability Partnership Boards, and the Carer Oversight and Carer Action groups, with further work being planned to support people who wish to get involved, especially those from less represented groups. Specific engagement will be planned for people from BAME backgrounds to support developments that specifically address the inequalities identified.

## **CONSULTATION**

89. The Council and CCG commissioned Speak-Up and Inclusion North to plan and facilitate an independent engagement process, which generated a vast amount of information on what is working, what is not working and what needs to change; this information was used to determine the key principles and priorities within the strategy.
90. The specific engagement process to support development of this strategy was undertaken in three stages, from September 2018 to January 2019. This entailed co-production of engagement materials, engagement with people with learning disabilities, autism or both and their families and service providers, and analysis of the data. There were four planning sessions, with many changes made to the materials during that process.
91. Engagement Sessions were held with a total of 123 people attending the sessions, including young people and adults with learning disabilities, autism or both, family carers and support workers. There was also an online questionnaire-one for people with learning disabilities, autism or both, one for family carers, and one for care/support workers. 145 people completed the online questionnaires -78 people with learning disabilities, autism or both, 45 family carers and 18 support workers. It is possible that as many as 268 people engaged during this stage, although some people who attended the events may also have completed the questionnaire.
92. Themes of Education, Housing, Health and Employment were used to structure the engagement but people were given the opportunity to discuss other areas of importance to them. There is a comprehensive report from engagement which is embedded into the strategy with a dedicated section in the strategy on engagement (section 3).
93. There was positive feedback from engagement, with young people, adults and relatives able to describe good experiences of school, friendships and the social care and health services they had received. From the first online questionnaire,

the majority of respondents (66%) said they received the help they required at school and college, 75% said they had received a health check in the past year and 56% said they had a choice about who they live with. The message was however that where people have not had a positive experience, some individuals and families continue to struggle with the negative consequences of those experiences.

94. Some people shared their negative experiences of residential school, teachers and other professionals who don't understand autism, including lack of awareness amongst mental health professionals and the criminal justice system and problems in mainstream school. We heard about a lack of aspiration and support for people to find work, even though they want to work, and long diagnosis waiting times and lack of support following diagnosis, despite local improvement in this area. Recent examples were also given of poor transition planning for young people with complex needs, creating increased anxiety and uncertainty about the future.
95. Many of the issues raised during the first stage of engagement are issues that Doncaster already knows it needs to improve on, and/or may already be working on, and they are also reflected in the priorities for delivery of the vision and key principles.
96. The second stage of engagement included face to face sessions with people who use services and their families and an online questionnaire. The sessions were structured to seek views and agreement where possible on the key principles and proposed priorities for implementation of the strategy. The online questionnaire focussed mainly on the vision underpinning the strategy and the priorities.
97. In total 53 people attended the sessions and 61 people completed the online questionnaire. People who use services and their carers mostly attended the sessions whereas professionals, organisations and carers mostly completed the online questionnaire.
98. During engagement, people were asked if they wanted to be involved in work-streams to deliver the strategy and there was a positive response. A data base of responses is being established to ensure ongoing engagement to influence delivery.
99. During 2020 the Autism and Learning Disability Partnership Boards Terms of Reference were reviewed and revised. The Boards oversee the delivery of the strategy, the plans and their progress; and provide challenge where needed to support delivery of the Strategy aims and objectives. Both Boards have a strong representation of people with lived experience.

## **BACKGROUND PAPERS**

None

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## **Attachments:**

Appendix 1. All Age Learning Disability and Autism Strategy 2021 / 24  
Appendix 2. Due Regard Statement for LD&A Strategy

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## **Doncaster's All Age Learning Disability and Autism Strategy 2021- 2024**

### **Foreword**



**Raymond Humphries - Choice for All Doncaster (CHAD)**

I have been happy to be involved from the start of the Learning Disability and Autism Strategy, where we visited lots of services including day services and college, asking the views and opinions of people about what was important to them.

I personally feel it is very important for people to have a voice about what is good, not so good and have the opportunity to suggest any changes they feel will help them in the future. This information needed to come from the people, as they are the experts by experience.

The strategy will be there for everyone to view and make sure people's voices have been heard.



**Councillor Rachael Blake, Chair of the Health and Wellbeing  
Board, Doncaster Council**

I couldn't agree more with Raymond's comments in his foreword. This strategy is for people living in Doncaster who have a learning disability, for people who are autistic and for family and friends involved in their lives who provide support where it is needed. The strategy and the actions within it are meaningless if they are not fully informed by the views of the people we are here to serve.

The people we are here to serve aren't defined by any diagnosis they have or by any services they receive. They are equal citizens with rights in every aspect of Doncaster life and who already make a powerful contribution to our Borough. Our strategy in a nutshell is to emphasise these rights and to provide more of the opportunities that are available to others who live, study and work in Doncaster.

The last year has been a difficult one and Covid has affected a great many things. However I am pleased to see progress already reported against the priorities set by the Doncaster people who worked with Council and NHS leads on the strategy. There is so much more to do though. The strategy sets out our agreed priorities for the next three years and we will work with Doncaster people with a learning disability, autistic people and family carers every step of the way to ensure the words in this strategy continue to be accompanied by actions.



**Dr David Crichton – GP, Vice- Chair of the Health and Wellbeing Board, Clinical Chair of NHS Doncaster CCG**

The Coronavirus pandemic has highlighted more than ever the requirement for a more focused approach to look at the needs of people with Learning Disability and Autism. This development of a joint health and care strategy for Doncaster is vitally important. It confirms a commitment to diagnose individuals in a timely fashion, holistically assessed for care, with an ultimate goal of allowing people to lead to a fulfilling and healthy life.

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## **1. Introduction**

Doncaster's All Age Learning Disability and Autism Strategy 2021-2024 was jointly developed by Doncaster Council and NHS Doncaster CCG, in partnership with statutory and non-statutory partners from across Doncaster, and people with lived experience of Learning Disability and / or Autism during 2018/2019.

Since the Strategy was developed and the priorities defined, five key work-streams have been set up to develop plans and progress key activities to address the five priorities, and three key cross cutting themes. The Doncaster Learning Disability and Autism Partnership Boards respectively have provided regular monitoring and challenge of the delivery, to ensure the plans deliver what people with lived experience need, want and expect from them.

The partnership is making progress in delivery of the plans, and this document aims to provide an update of the context in which the Strategy is being delivered, a review of the progress being made, and outline the next steps for each of the work-stream areas.

## **2. Outcome from Engagement Activities**

In development of the Strategy, Doncaster Council and NHS Doncaster CCG commissioned SpeakUp and Inclusion North, to plan and facilitate engagement exercises to gain the views, experience and preferences people with lived experience to inform the development of the strategic plans.

As part of the process, people with lived experience agreed a Vision Statement to describe the aim of the strategy and its delivery plans, with 16 underlying principles, which formed the foundation of the Strategy development.

### **2.1. Vision**

During the development of the Strategy, people with lived experience agreed to adopt the vision statement from the Transforming Care Programme, as the overarching vision for this programme:

“We believe that children, young people and adults with a learning disability and/or autism have the right to the same opportunity as anyone else to live satisfying and valued lives, and to be treated with dignity and respect. They should have a home within their community, be able to develop and maintain relationships, and get the support they need to live healthy, safe and rewarding lives.”<sup>1</sup> (Transforming Care 2015)

### **2.2. Key Principles**

In Doncaster, we will strive to ensure that people with learning disabilities and/or autism should:

- 1 Have access to a timely diagnosis in line with national guidance
- 2 Have a safe, happy and healthy childhood, accepted for who they are, supported to have self- worth and to develop skills and talents
- 3 Be encouraged to hope for the same things in life as other citizens-work, family life, relationships, own home

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<sup>1</sup> NHSE (2015) <https://www.england.nhs.uk/wp-content/uploads/2015/10/service-model-291015.pdf>



- 4 Be safe in their community and free from the risk of discrimination, hate crime and abuse
- 5 Should live in a family home or their own home with people they chose to live with unless there are exceptional circumstances why this can't happen
- 6 Have access to a good education and learning throughout life
- 7 Aspire/hope to have a paid job and be supported to achieve this
- 8 Be supported by family carers/relatives whose own needs, rights and views have been fully considered and are supported in their caring role
- 9 Have equal access to good health care and be supported to live healthy lives
- 10 Have highly personalised support, which is built up around people's strengths, their own networks of support and in their local community
- 11 Be supported to access universal and early support services, where their needs are understood, they are accepted for who they are and reasonable adjustments are made
- 12 Have the information they need to access social care and health services and universal services
- 13 Have a planned and smooth transition from child to adult life
- 14 Have a fulfilling and healthy later life with the same opportunities as other older people
- 15 Expect health and social care to work together with others to make the best of resources, working hard to achieve fully personalised support
- 16 Have their views and wishes in the centre of planning and shaping support

The Vision and Principles are central to the plans developed to deliver the priorities identified within the strategy.

### **2.3. Priorities for Doncaster**

Taking all the information from engagement, national and local policies and initiatives as outlined above, 16 areas of work to improve services, support and life opportunities, were identified. To ensure that progress is made on the key priorities, people with lived experience were asked to prioritise the areas that will have the biggest impact. Five areas were identified:

- a. Diagnosis of Autism
- b. Education and Inclusion
- c. Employment
- d. Needs of Carers and Short Breaks
- e. Housing and Support

A further three areas of high importance were identified which need to be addressed by each of the work areas identified above:

- a. Health Inequalities
- b. Young people in Transitions
- c. Transforming Care Programme (supporting people to live their best life in the community)

COVID-19 and its impact on people with LD&A and from Black Asian and minority ethnic groups will be added to the Health Inequalities plan, with an aim to reduce the impact and promote health and wellness for these groups of people.

During 2020, significant progress was made against each priority, as plans were developed and actions taken. Section 3 below, provides a summary of the key messages people shared with us, the key actions taken so far, and the immediate next steps being taken to move plans on.

The summaries are taken from the existing plans that are in place to drive forward some big changes. The plans are regularly reviewed and updated, as information and guidance change, but the focus remains on the priorities people told us were important to them.

#### **2.4. Remaining Priorities – How They are Being Addressed.**

The Strategy and subsequent delivery plans recognise the five areas as key priorities along with the three cross-cutting themes. Of the remaining eight work areas, three relate to client groups whose needs are addressed within the existing plans (older people, people with autism and people with complex needs).

Short Breaks is incorporated into the Family Carers priority due to the natural linkages and overlaps, as is the Carer Strategy refresh. Day Opportunities in part is addressed via the Family Carers and Short Breaks work and within Education and Employment.

Formal work on Early Help, Prevention and Health & Wellbeing is yet to start, significant work to address Early Help Prevention and Health and Wellbeing are being addressed elsewhere across the Council, for example through Communities and Localities.

Links across the Council and other partners exist and continue to develop to ensure that all opportunities to progress access and representation for People with learning Disability and / or Autism are made.

Following agreement of the strategy refresh, it is planned to undertake a stocktake of all plans, further identification of opportunities across the system, and alignment with existing system wide developments. This will enable a refreshed, prioritised and timetabled programme of work to be defined.

### 3. What we have done so far

#### 3.1. Diagnosis of Autism

The Autism Self-Assessment Framework undertaken in 2018 identified that waiting times for assessment was longer than reported in 2016 and appear to be increasing beyond the 18 weeks target.

The engagement exercises identified the same issues that people are waiting longer times for assessment. People with lived experience, families and carers confirmed that for most people, a confirmed diagnosis is very important to them as it can help access the support in all areas of life, but that waiting times can be too long.

Further work needs to be undertaken to ensure that diagnostic pathways are robust and work well for all, and an individualised post diagnosis support is offered.

You Said	We Did	Our Next Steps
“Getting a diagnosis is really important, because this can support people in all areas of their life”.	Currently 91% of children are diagnosed within 18 weeks.  We aim to further improve the waiting times for diagnosis of Autism so that more children are diagnosed within 18 weeks.  Over the past year, NHS Doncaster CCG with Rotherham, Doncaster and South Humber NHS Foundation Trust (RDASH) have been working together look at ways to improve diagnosis of Autism for Adults.	For Children Ensuring that children and young people on the autism, attention deficit disorder and other neurodevelopmental pathways have their needs identified and met in a consistently timely manner and post diagnosis support is a focus for the future
“It is important to get the right information and support in a way that works best for you, during and after diagnosis”	This involved partners working together to develop and agree an action plan <sup>2</sup> which included the development of clear and consistent Diagnosis pathways, with post diagnosis support.	For Adults: Once RDASH plans are approved by NHS Doncaster CCG, RDASH and the CCG will start to put their plans in place, to move towards reducing waiting times:
“It is important to get a diagnosis close to home, and not to have to wait a long time for a diagnosis”		1. NHS Doncaster CCG to consider the proposed plans in February 2021.

<sup>2</sup>Doncaster Council and Doncaster CCG (2020) Doncaster Autism Delivery Plan.

	<p>The emergence of the COVID-19 pandemic means it has been difficult to implement the changes and see more people in a reasonable timeframe. RDaSH was able to provide a limited Autism Diagnosis Service until June 2020.</p> <p>Since July 2020 the Autism Diagnosis Service has reopened fully and seeing as many people as before. Work is ongoing to reduce the waiting list.</p> <p>RDaSH has now developed a plan, which describes what they need to make the improvements to pathways to diagnosis, which has been sent to NHS Doncaster CCG, and will be considered by the CCG in February 2021.</p>	<ol style="list-style-type: none"> <li>2. Work through how to deliver the plans by June 2021</li> <li>3. Should additional workforce be required, the recruitment will be completed by September 2021</li> <li>4. Diagnosis training will be completed by November 2021</li> <li>5. The waiting list for Adult Autism diagnosis to be within NICE guidance - date to be confirmed.</li> </ol>
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### 3.2. Education and Inclusion

Education and Inclusion were identified as a key priority by many families during the engagement exercises. People were concerned that there is not enough provision for children with a learning disability and/or autism in Doncaster, and that more is needed to support teachers, parents and children with lived experience of learning disability and autism with stronger links to employment.

Young people in the Borough want universal access to services and opportunities across the Borough, better information sharing between partners, and improvements in how we communicate with them; this includes information on services and events available to them.

You Said	We Did	Our Next Steps
Teachers in schools don't always understand the needs of children with learning disabilities, autism or both	<p>Children and Young People's services launched the local 'Graduated Approach' to meeting need. The Graduated Approach makes sure that teachers identify and remove barriers to learning that children experience, and put in place effective special educational provision in order to meet their needs.</p> <p>Pathways in place to support employability and life skills for young people with severe and moderate LD; and Post 19 progression, integrates support with CALDT to support transition out of Education.</p> <p>In order to support children and young people throughout the pandemic, there has been a focus on providing positive activities over the school holidays. This has focused on face to face and virtual activities and has supported emotional health and wellbeing. Work has been undertaken to ensure all these activities are inclusive, with some focused exclusively for children and young people with SEND.</p>	<p>In early 2021, to ensure that the graduated response to meeting special educational and disability needs is delivered coherently and consistently and where possible locally.</p> <p>Ensuring that Doncaster's secondary schools provide curricula and teaching that effectively meet the needs of students who have SEND so that they make good progress and are well prepared for their next stage in education and future employment</p> <p>Whist still in the consultation phase, the 2030 Education and Skills Strategy will be a crucial strategic driver in ensuring we have <b>an inclusive education system</b>. A key cross cutting principle of this work is equitable and inclusive learning, as well as a focus on best start, skills and pathways and a model for post 16 education.</p>
Further work needs to happen within mainstream schools to ensure all staff have the knowledge and skills to support people with learning disabilities, autism or both within education. There needs to be an emphasis on making reasonable adjustments that can support children and young people to achieve.		
There needs to be more careers advice and help into work		
People needed to support to develop skills and independence		
More after school activities		

	<p>In September 2020, The Bader Academy, a new special school for children and young people with Communication and Interaction Difficulties, opened in Doncaster. The school aims to meet the needs of children and young people aged 5-19 years with an Education, Health &amp; Care Plan and a primary diagnosis of Communication &amp; Interaction Difficulties, primarily High Functioning Autism and Asperger's, with related Social Emotional and Mental Health Needs.</p> <p>The curriculum delivered will ensure that all children and young people attending have a flexible, personalised education that helps them achieve their potential, not just focusing on education but employment and independence.</p> <p>A strategy group has been set up specifically to plan for the needs of young people who are moving from children's to adult services and employment. The group is making sure that there are strong links between the education and employment strands of the SEND programme</p>	
Better transport to help children stay local		
Residential school is not good for some children		
There needs to be better links between education and employment, with bespoke employment advice and greater work experience opportunities for young people to access across Doncaster.		
There needs to be a greater focus on functional skills and supporting children and young people to gain these skills		

### 3.3. Employment

Being able to secure, maintain and develop in employment is an important aspiration for people. To be able to contribute and feel valued is central to health and wellbeing. People who participated in the engagement exercises ranked this area very highly.

While there are local schemes in place, many people feel they are sometimes difficult to understand, or are not joined up. In addition, some employers may have limited understanding or awareness of learning disability and autism.

The Adult Social Care Outcomes Framework (ASCOF) requires Local Authorities to report on the proportion of adults with a learning disability in paid employment. From an identified cohort of 793 working age people with learning disabilities during the year 2019/20, 12.5% were in some kind of paid employment. Doncaster's performance at that time was 11<sup>th</sup> highest in England and highest within the Yorkshire and Humber region.

We have no clear information on the number of people with autism (who do not have a learning disability) in paid employment. We know however, from national information that numbers do not compare favourably to the general population; the National Autistic Society reports that:

- Only 16% of autistic adults in the UK are in full-time paid employment, and only 32% are in some kind of paid work
- Only 10% of autistic adults receive employment support, 53% say they want it.

You Said	We Did	Our Next Steps
Employers need to understand learning disability and autism and how they can make reasonable adjustments to help people sustain their employment	There are significant links between the Education and Inclusion plan (which addresses the needs of young people reaching their full potential in both education and employment) and the Employment Plan, which has a greater focus on Adults, and increasing the available opportunities for Adults and Young people transitioning into adulthood and employment market.  We have started to identify and map out all of the schemes, opportunities and projects provided by companies across Doncaster	Make sure that the Children and Young People's Employment Plan, Education, and Inclusion Plans are all working together.
Doncaster Council and Doncaster CCG need to take the lead on employing individuals with learning disabilities, autism or both.		Once the mapping exercise is complete, we will develop a list of all the opportunities that can be shared with people.
There need to be greater opportunities available to people to move into work should people wish to do this so that individuals are not volunteering for life.		We will be working with people with lived experience to list where there are gaps in support services so plans can be made to meet unmet support needs.

There needs to be bespoke employment support for people with learning disabilities, autism or both to support people into work	that will help people with learning disability or Autism to enter the workforce.	We will make links to the Your Life Doncaster Website to make the information available to all, and make sure it meets the needs of people with Learning Disability and Autism.  Doncaster Council and NHS Doncaster CCG to work with partners to look at opportunities to develop internships/ vacancies and volunteering opportunities
The culture needs to change to ensure that there is aspiration to work from a young age and this is embedded in transition and support planning.	We are mapping out the employment support services available to people with learning disability and Autism.  Several Proposals are being developed to progress access to employment options, including development of internships at Doncaster Council and Doncaster CCG	
All people should be supported to make an economic contribution to Doncaster as this brings benefits in terms of social, cultural and health rewards.	The Autism Plus Employment Support service is now offered on-line to help more people access the service during the pandemic, and those who struggle to get to the office.	
More supported employment opportunities.		
There needs to be better links between education and employment, with bespoke employment advice and greater work experience opportunities for young people to access across Doncaster.  Aspirations of children and young people should be raised with there being an expectation that children and young people with learning disabilities, autism or both will move from education into work or continue further education at university		



3.4. Carers and Short Breaks

Unpaid or Family Carers play a vital role in maintaining the health and wellbeing of those they care for. Carers have the statutory right to an assessment that addresses carers' well-being, mental and physical health. If the carer has eligible needs, a support plan will be developed to meet their needs. Adult carers can access support through the Doncaster Carer Reach-Out Service commissioned by Doncaster Metropolitan Borough Council. Young or sibling carers can receive help from Doncaster Young Carers Service.

Short Breaks (sometimes called respite care) support Carers to take a break from their demanding role and responsibilities whilst the person/people they care for is looked after in an environment that is safe and comfortable for them. Respite can be provided in a residential care service, an overnight stay within a Shared Lives family household, or a break arranged with another carer or family member. For many Carers, Short Breaks involve overnight stays; however, for some Carers a break during the day might be appropriate for them.

Our aim for Carers and Short Breaks is to ensure Carers are provided with a range of equitable and flexible short breaks opportunities that meet their needs and the needs of the person they care for.

We are committed to:

- Ensuring family carers are equal partners in care
- Valuing family carers expertise, insight and experience and we actively promote this
- Work with family carers whenever we are planning or making changes
- Supporting families and carers well to enable them to maintain and uphold their vital role in caring for their family members who have a learning disability
- Ensuring our short breaks offer is clear and accessible
- Working together with family carers to help us understand gaps in support and to plan
- Making sure that carers have the opportunity to access personal budgets giving much more choice around how they can support their loved one.

You Said	We Did	Our Next Steps
Carers deserve a voice	Carers are embedded within Learning Disability Partnership Board and the Autism Partnership Board, which drives the carer agenda and seeking service development and improvement.	Once the results from the Carers questionnaire have been received, they will be reviewed by the Carers Operating Group, to make recommendations to the Short Breaks Work-stream to ensure the plan includes the expressed views and needs of carers.
Carers would like to be involved		
We want choice, flexibility and availability of Short Breaks that works for my family and me.		

	<p>Carers Action Group is now in place, and co-chaired by carers. It is a forum specifically for carers, and reports into the Carers Strategic Oversight Group (co-chaired by Carers) to share ideas, and feedback on what needs to improve for carers in Doncaster.</p> <p>Carers supporting family members with LD&amp;A were actively involved in the development of a survey for carers to get their views and feedback about short break respite services on offer in Doncaster</p> <p>Working with partners including the Minorities Partnership Board to take forward positive actions to increase representation of BAME communities within the Carers and Short Breaks work stream.</p> <p>Ensured that Carers are actively involved with commissioning of carer services, including review of the Short Breaks work stream, actively engaged with CETR processes in Doncaster.</p> <p>Review has been completed of the Short Breaks services, and development of the service is now underway.</p> <p>Strategic Review of Shared Lives is underway, that will inform the best way to develop the service to meet the growing demand for community based day opportunities, short breaks and long-term placements in Doncaster.</p>	<p>Completion of the strategic review of Shared Lives and take forward specific actions for the future development of the service.</p> <p>Undertake an Equality Audit within services and identify how services could be more responsive to the specific needs of individual communities.</p>
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### 3.5. Housing and Support

The overarching aim of the Housing plan is to make sure that there is a suitable range of accommodation and support for people with Learning Disabilities and/or Autism. Following the engagement exercises an action plan was developed, which included the following objectives:

- a. People with learning disabilities, autism or both should be supported to live in a home that meets their needs and choices.
- b. People should be supported to have relationships and friendships so people live the life they choose with the right support.
- c. There needs to be more focus on transition planning

You Said	We Did	Our Next Steps
Having a home of your own and being able to choose who you live with is important	<p>We looked at the housing and support needs of people with learning disability and Autism for the next 10 years, including adults who are currently living with family carers, and young people who will transition into Adult services; and prioritised these groups in this year's planning.</p> <p>Identified all the different types of housing and support options that should be available for people with learning disability and / or Autism.</p> <p>We checked with local services to make sure the information that was collected about the needs of people for the next 3 years is right.</p> <p>We have planned a new development of flats in Askern for supported living for people with learning disability and autism that will be available in Spring 2022.</p> <p>We have started to identify those in transitions to talk to them about their choices</p>	<p>Put in place the arrangements needed to match landlords and housing to individuals that meets their specific needs and choices.</p> <p>Put in place plans that will overcome the barriers that people are experiencing in accessing general housing and support.</p> <p>Match people who choose to live at Askern with the people they want to live with and the available properties and support them to prepare for the move with the right support.</p>
It is important to have staff with the right skills and training to support you		
It is important to have different options about where you can live - Shared Lives should be a real option		
It is important that plans are developed with young people about where they might want to live in the future When you have an assessment you are asked if you are happy about where you live and who you live with		
You get good support to have a relationship and have friendships		

	<p>and preferences about what they need, and where they would like to live.</p> <p>Work is underway to make it easier for people to access the type of accommodation they need and choose, and in the place, they would like to live.</p> <p>We have started to look at the barriers that people experience when accessing general housing and support.</p> <p>We have been working with Supported Living Providers over the past year to increase the use of technology (e.g. use of video calling) to help people maintain contact with friends and family during the pandemic, and encourage visits and activities to help people maintain safe contact when restrictions have allowed.</p>	
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#### **4. Cross Cutting work plans.**

Three further priorities for Doncaster identified by people with lived experience, and driven by national policy are identified below, and may need to be addressed by each of the work-streams described above. These are called 'cross cutting themes'.

An example of this, developing short breaks offers, needs to take into account how COVID-19 secure new placements are when placements are being considered. Another area is the Housing and Support plans need to consider the needs of Young People in Transitions as part of the planning, and those in the Transforming Care may need close health monitoring.

##### **4.1. Health inequalities**

People with a learning disability have poorer physical and mental health the wider community. The pandemic has made this situation even harder for communities to maintain their health and wellness and for people with LD&A and those from BAME backgrounds, this inequality is even more apparent.

There needs to be a greater understanding of learning disability and autism amongst all health and social care professionals with consistency of approach and reasonable adjustments; and family carers need to be identified and supported in delivery of health interventions.

Training should meet national standards and include findings from LeDeR\* and other reviews. Individuals with lived experience should be involved in the development of this training and where possible in its delivery.

Health and social care services need to be joined up and information shared appropriately. This should link to priorities in the NHS Long Term Plan and Doncaster Joint Commissioning Strategy

The Health Inequalities work aim and objectives

**“We will improve health outcomes and reduce health inequalities”**

##### **Key objectives:**

- **Annual health checks**
  - Task and Finish group set up to focus on increasing uptake and quality of Learning Disability Enhanced Health in Care Homes Framework Implementation ongoing
- **LeDeR (Learning Disability Mortality Review) sub group**
  - Implementing learning from national reviews
- **Flagging system introduced at DBHFT**
  - Ensuring people with learning disabilities who are admitted to hospital have access to support from the Secondary Care Liaison Nurse.
- **Improved discharge pathways**
  - LD&A Quality Cell - partnership working across Health and Social Care.
- **Cancer Awareness**
  - networking professional relationships with Health Action Teams and the South Yorkshire Cancer Alliance

#### 4.1.1. COVID-19

The Identification of COVID-19 as a significant risk to those with Learning Disability, Autism, and those from BAME backgrounds has alerted health and care organisations that action is needed to understand the risks and, with the affected groups, develop targeted plans to reduce or manage risks.

Data released<sup>3</sup> in November 2020 shows the devastating impact of the pandemic, with the rate of people with a learning disability dying from COVID-19 estimated to be 3 to 4 times the rate in the general population.

During 2020, Doncaster Council, NHS Doncaster CCG, RDaSH, and Doncaster Royal Infirmary, set up a daily meeting to develop guidance, implement practices and protocols for local NHS, Council and commissioned services. The meeting aimed to make sure people receiving services were kept safe, that hospital discharges were safe and monitor for any outbreaks to make sure the right support was in place as quickly as possible.

#### 4.2. Regional Transforming Care Programme (2016-19)

Doncaster is part of the South Yorkshire and North Lincolnshire Transforming Care Partnership (TCP). The TCP has developed our area plan to reduce our reliance on in-patient specialist beds for people with learning disability. The plan is written in response to *Building The Right Support* and the National Service Model, which sets out the national vision to transform models of care and support for people with learning disability and autism.

The plan includes:

- a. A robust programme of Care and Treatment Reviews for adults and Care, Education and Treatment Reviews for children
- b. Developing and investing in intensive community support and forensic outreach
- c. Dynamic risk support register which include multidisciplinary members from health, social care and police
- d. Addressing Health inequalities
- e. Transitions
- f. Housing and skilled support through the Enhanced Supported Living Framework

**“We will do everything possible to prevent people being admitted to secure hospital and to resettle those still in hospital”**

- a. Meet NHS E/I inpatient trajectories
- b. Implementation of Forensic Outreach Liaison Service
- c. Implementation and review of Enhanced Community Framework
- d. Review C&YP pathways and transitions
- e. Evaluation of crisis and intensive support team

Over the past 4 years, the number of people from Doncaster in locked rehabilitation, assessment and treatment units or secure hospital has reduced by 75%. More work is being

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<sup>3</sup> PHE (2020): PH England Nov 2020 COVID 19 deaths of people identified as having learning disabilities: summary. Gov.uk

PH England Nov 2020 Press Release People with learning disabilities had higher death rate from COVID-19. Gov.uk

PH England 2020: Beyond the data: Understanding the impact of COVID-19 on BAME groups [www.gov.uk](http://www.gov.uk)

done to increase this number further to enable them to live in the community in their own homes.

The Children and Young People's (CYP) Proactive Monitoring & Support (PM&S) group has reviewed and monitored children and young people who are at risk of concerns that may escalate into the CETR process.

The PM&S group has enabled multiagency partnership to work effectively together as a means of ensuring that CYP receive proactive care, early intervention and support that prevents their situation from deteriorating. The fundamental aim is to improve childhood experiences.

For those CYP that are in hospital, the group reviews any discharge planning as a means of reducing any potential risk within the community and to prevent further hospital admission. The PM&S group provides clear accountability and focus that will support case managers in risk assessment and care planning.

- There were no TCP CYP admissions into Tier 4 Mental Health Services during the period 2018 / 2019
- A proactive approach has resulted in a reduction of responsive CETRs

#### **4.3. Transitions**

The aim of transitions is

**“To improve the experience of young people preparing for adulthood with a timely and seamless transition into adulthood”.**

#### **Key outcomes:**

- Ensure Transitions are addressed in the key work-streams
  - Education and Inclusion – links between Education and Employment explicit within the plans. A Transition Strategy is in place.
  - Employment – supported to overcome barriers to education and work towards entering employment
  - Short Breaks – Transitions identified as a key group in need of appropriate short breaks
  - Housing and Support – identified as one of 3 priority groups
  - Transforming Care – a key priority within the housing work stream to divert from hospital or progress into supported living.

Carers have told us that the aspiration to work with the family and young person from a young age needs to be embedded in transition and support planning.

Within education, a transition strategy is now in place with direction provided by the multi-disciplinary steering group. Similar work has also been undertaken in health services. Transitions planning starts in year 9 and covers Employment, Independent Living, Being Healthy and Friends, Relationships and Community.

### **5. Context**

Doncaster's All Age Learning Disability and Autism Strategy has been developed in the context of other key national and local policies, which inform the way in which the plans are developed and put in place. National and local plans are focussed on ensuring people are supported in the best way and to reach their health and wellness potential.

The strategy has been developed and led by people with lived experience, and reflects the national and local priorities, including (but not limited to) the key plans outlined below:

### **5.1. Doncaster Borough Strategy**

The Doncaster Borough Strategy is due to be launched in 2021, and will build on the successes of the Doncaster Growing Together Plan in delivering transformation in the well-being of Doncaster people and places over the next 10 years.

The Doncaster Borough Strategy will focus on the local quality of life issues residents have identified through 'Doncaster Talks' and also the global shared challenges like the climate change and biodiversity crisis. Delivery of these plans will enable the creation of quality jobs, improving education and skills, tackling inequalities and supporting culture and creativity, and will enhance the lives of all Doncaster, including those with Learning Disability and / or Autism.

Through the development of the Learning Disability and Autism Strategy, people with lived experience, families and carers also told us that those issues raised in the Doncaster Talks, including quality employment and education and skills are some of the issues that matter most to them too.

The Learning Disability and Autism Strategy has been developed in Partnership with NHS Doncaster CCG, in the context of the Place Plan, which was refreshed in 2019, and underpinned by the development of the Doncaster Joint Commissioning Plan.

### **5.2. Health and Wellbeing Strategy (2016-21)**

A key principle within the Health and Wellbeing (H&WB) strategy is that all Doncaster residents will be able to achieve their full potential in employment, education, care and life chances. This aligns well to the vision within this document for people with learning disabilities and/or autism. The overarching aims of the strategy are to prevent disease, disability and harm, and sustain health and wellbeing through a first class health and care system.

### **5.3. Doncaster Place Plan**

The vision of the Place Plan is that "...care and support will be tailored to community strengths to help Doncaster residents maximise their independence, health and wellbeing. Doncaster residents will have access to excellent community and hospital based services when needed..."<sup>4</sup>

The Place Plan 2019 refresh provides clarity about Doncaster's plan to prioritise, develop and deliver health and social care as an Integrated Care Partnership. The plan clearly describes moving towards a focus on people as opposed to services. This means that instead of looking at where care is delivered, the partners are thinking about local communities and their needs.

The approach and vision described in the Place Plan links well with the vision agreed by people with Lived Experience in the development of the LD&A strategy, which was adopted from the Transforming Care National Service Model:

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<sup>4</sup> Doncaster Partnership (2019) Doncaster Place Plan Refresh 2019 – 2022: [www.Doncaster.gov.uk](http://www.Doncaster.gov.uk)



“We believe that children, young people and adults with a learning disability and/or autism have the right to the same opportunity as anyone else to live satisfying and valued lives, and to be treated with dignity and respect. They should have a home within their community, be able to develop and maintain relationships, and get the support they need to live healthy, safe and rewarding lives<sup>5</sup>.”

The Place Plan is being delivered through three life stages of Starting Well, Living Well and Ageing Well. Meeting the needs of people of all ages with Learning Disability and Autism is a key focus of the Place Plan and is driven through Living Well Delivery plans, and spans the three life stages as identified.

#### **5.4. Joint Commissioning Plan**

To support the delivery of the Place Plan, the Strategic Partners developed and agreed the Joint Commissioning Strategy<sup>6</sup>. The Joint Commissioning Strategy sits across both health and social care, including Public Health, for adults and children. It captures the services commissioned by both Doncaster Council and NHS Doncaster CCG, with a particular focus on the areas where we will jointly commission. Commissioners and providers agreed to plan and deliver services in a more joined up way for a number of areas, including Learning Disability and Autism. The joint approach enables Commissioners to coordinate commissioning of services, reducing risk of duplication, and ensuring that gaps in services are more easily identified and addressed. Most importantly, joint commissioning aims to ensure that people who use services, experience a more joined up and holistic approach to their care and support.

#### **5.5. The Children and Young People’s Plan (CYPP) (2017-20) and Impact Report 2018 and 2019.**

The Doncaster Children and Young People’s Plan (2017- 2020) sets out our ambition to be the most child friendly borough in the country. We have made a commitment to review its impact on an annual basis and the views of children and young people have been the foundation to these assessments.

The CYPP ensures the voices of children and young people is included in all we do; ensuring all children and young people have the opportunity to influence the services they access and the support they receive was central to plan, including children and young people with SEND.

#### **5.6. SEND Strategy**

The SEND Strategy sets out a vision for children who have special educational needs and disabilities (SEND) and details a number of imperatives, which drive the ambition for children to achieve fulfilling lives. The timeliness, identification and assessment of special educational need, and the effectiveness and efficiency of collaborative planning, involves the right people at the right time in the delivery and review of the impact of this support.

#### **5.7. Regional Transforming Care Programme (2016-19)**

Doncaster is part of the South Yorkshire and North Lincolnshire Transforming Care Partnership (TCP). The TCP has developed our area plan to reduce our reliance on in-patient specialist beds for people with learning disability. The plan was written in response to *Building*

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<sup>5</sup> NHSE (2015) <https://www.england.nhs.uk/wp-content/uploads/2015/10/service-model-291015.pdf>

<sup>6</sup> Doncaster Council & NHS Doncaster (2019) Doncaster Joint Commissioning Strategy [www.doncaster.gov.uk](http://www.doncaster.gov.uk)

*the Right Support*<sup>7</sup> and the National Service Model<sup>8</sup>, which sets out the national vision to transform models of care and support for people with learning disability and autism.

The plan includes:

- A robust programme of Care and Treatment Reviews for adults and Care, Education and Treatment Reviews for children
- Developing and investing in intensive community support and forensic outreach
- Dynamic risk support register which include multidisciplinary members from health, social care and police
- Addressing Health inequalities
- Transitions
- Housing and skilled support through the Enhanced Supported Living Framework

## **5.8. Housing and REACH Standards, (2019)**

The REACH<sup>9</sup> standards describe nine voluntary standards to help explore what a good life would be for people with learning disability and / or autism and how to make this happen. The principles of 'supported living' have always been about supporting people with a learning disability and/or autism (and others) to live a life of their choice with the right support.

## **5.9. Making It Real (TLAP 2018)**

Personalisation is a key concept to be realised within the LD&A Strategy delivery. Making It Real<sup>10</sup> describes a framework and a set of statements describing what good, citizen-focussed, personalised care looks like from the point of view of people themselves.

Through the ongoing review of delivery plans, the strategy aims to embed personalisation including choice, care and support planning, support to access, and use personal budgets, across all priority deliverables.

# **6. Understanding the Needs of People with Learning Disability and / or Autism in Doncaster (See Also Annex 1)**

## **6.1. Age Profile**

The population of Doncaster continues to grow at a slightly lower rate than Yorkshire and the Humber and is predicted to grow by a further 1.2% by 2030.

There is predicted to be an increase in all age groups from 55 years and above, which needs to be considered in the development of all health and care services, and recognising there is a reduction in the rate of growth for some of the younger groups.

Services will increasingly need to address the ageing profile of people they support, for example, housing offers will need to address the future needs of tenants which will change over time, and recognise the increase in number of older people who will require appropriate housing.

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<sup>7</sup> NHSE (2015) <https://www.england.nhs.uk/wp-content/uploads/2015/10/ld-nat-imp-plan-oct15.pdf>

<sup>8</sup> NHSE (2015) <https://www.england.nhs.uk/wp-content/uploads/2015/10/service-model-291015.pdf>

<sup>9</sup> Paradigm (2017) <https://paradigm-uk.org/what-we-do/reach-support-for-living/>

<sup>10</sup> TLAP (2018) <https://www.thinklocalactpersonal.org.uk/makingitreal/>

## **6.2. Ethnic Diversity**

The ethnic profile of Doncaster demonstrates an increase in the number of people from Black, Asian and minority ethnic backgrounds. Emerging information describes the health inequalities faced by people from BAME backgrounds in the context of COVID-19, (described in more detail below) and that health inequality varies within different ethnic groups. Currently, nearly 9% of Doncaster residents identify as non-White British, and this proportion is expected to increase.

Greater focus is needed to understand which groups are most affected by health inequalities and COVID-19 in particular. We will work with communities to understand the cultural needs, and inequalities they face, and how they can be addressed.

## **6.3. Data Issues**

National and local data describing people with Learning Disability, Autism or both is incomplete and compiled from various sources. (People's needs are recorded as a 'Primary Support Need, and does not consistently record where people have more than one need).

The estimated number of people with moderate or severe learning disability in Doncaster is in line with the growth in the general population. Services to meet the needs of this group of people will need to continue to grow in order to meet their needs.

The National Autistic Society says 'estimates of the number of people with autism spectrum disorders (ASD) who also have a learning disability vary considerably, and it is not possible to give an accurate figure. The Foundation for People with Learning Disabilities<sup>11</sup> however, suggest that between 60% - 70% of people with Autism also have a learning disability. Most of the people diagnosed with Autism are men (1.8% of the population, women 0.2%).

## **6.4. Needs of people with Autism**

The National Autistic Society says about the definition of Autism:

"The definition of autism has changed over the decades and may continue to change. Some people feel the spectrum is too broad, as people with autism can experience a wide variety of support needs, from 24/7 support needs to those who find supermarket lights too bright. Autistic people and their families with different support needs share many of the same challenges, whether that's getting enough support from mental health, education and social care services or being misunderstood by people close to them"<sup>12</sup>.

Doncaster residents are experiencing long waiting times for autism diagnosis and access to post diagnosis support. Plans are in place to improve access to both over the coming months and described below.

The LD&A strategy was developed jointly for people with Autism and learning disability, in recognition of the distinct needs of both groups, and recognition that many people with Autism also have a learning disability. It is recognised that issues affecting people with Autism in particular, may require additional or focussed actions. For this reason, a separate action plan, that mirrors the key actions from the wider Strategy plan has been developed

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<sup>11</sup> Foundation for People with Learning Disabilities 2020: Learning disability statistics: autism <https://www.learningdisabilities.org.uk/learning-disabilities/help-information/statistics/learning-disability-statistics-/187690>

<sup>12</sup> National Autism Society 2020: What is Autism? <https://www.autism.org.uk/advice-and-guidance/what-is-autism>

and includes actions specifically for people with Autism, for example, development of peer support networks. The Autism Partnership Board oversees the Autism plan.

#### **6.4.1. Autism Self-Assessment Framework (SAF)**

The Autism SAF is a national requirement for local health and care economies to complete, and is usually conducted on a biennial basis. The last SAF was completed in 2018. At the time, the plans relating to Autism were reviewed in the context of the 2018 SAF outcomes.

The planned SAF for 2020 has been postponed and will be reviewed when the report is published.

#### **6.5. Needs of Children and Young People**

During engagement exercises, families and carers identified a range of issues children and young people faced. The engagement exercises confirmed that people "...want to make sure that people with learning disabilities, autism or both have access to a good education in mainstream and special schools and those who are home schooled. We want to make sure young people get the support they need in school or at home to do this and that teachers understand the needs of pupils with learning disabilities, autism or both..."<sup>13</sup>

In 2019 a SEND Inspection identified a range of strengths and areas for development which were set out by the joint OFSTED/CQC inspection team. The areas for development included focus on Transitions. Some children and young people do not receive high-quality support at key transition points, and families report a wide variation in how much support they receive and how effective it is. Sometimes, preparation for transition between schools does not begin early enough or in a fully joined-up way.

A transition strategy is in place and aims to address the issues identified at review.

There continues to be a steady increase in the requests for statutory assessment and currently the Local Authority maintains 2247 EHCPs a 20% increase since 2019.

#### **6.6. People and Employment**

People with a learning disability and / or Autism are less likely to have a job than the general population<sup>14</sup>. Currently 6% of adults with a learning disability known to their local authority in England are in paid work.

Doncaster people with Learning Disability and/ or Autism describe that they need support to access and maintain employment, and want opportunities for real employment. There need to be greater opportunities available to people to move into work should people wish to do this so that individuals are not volunteering for life<sup>15</sup>.

Thirteen principles were agreed by the partners in the development of the Employment plans, which describe the outcomes that are needed to make the plans a reality for people with lived experience and include (but not limited to)

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<sup>13</sup> SpeakUp Advocacy (2019) Engagement Report

<sup>14</sup> Mencap (2021) Employment Research and Statistics. <https://www.mencap.org.uk/learning-disability-explained/research-and-statistics/employment-research-and-statistics>

<sup>15</sup> Speakup Advocacy (2019) Engagement Report.

- a. Local employment services should be Joined up and there should be a clear picture of what is available, both specialist and generic
- b. There will be an understanding of the barriers people face accessing and keeping employment and the gaps in services and support
- c. People should have information about services and how to access them
- d. People should have support to understand the benefits system and how this impacts on employment
- e. Doncaster Council and NHS Doncaster CCG will lead by example in employing people with learning disabilities, autism or both and this will include ensuring that recruitment policies are appropriate
- f. There will be a clear pathway through school and from school into vocational training and work opportunities

Plans are in place and being progressed by partners to scope the opportunities available to people The information gathered will be shared on the YourLife Doncaster website, and used to identify where gaps exist to inform future planning.

## **6.7. Carers Needs**

Doncaster's first All Age Joint Strategy for people with learning disabilities and people with autism considers the current national and local picture together with what is important to people and their family carers.

### **6.7.1. Family Carers**

Unpaid or Family Carers play a vital role in maintaining the health and wellbeing of those they care for. Carers have the statutory right to an assessment; this assessment looks at carers' well-being, mental and physical health. If the carer has eligible needs, a support plan will be developed with them. Adult carers can access support through the Doncaster Carer Reach-Out Service commissioned by Doncaster Council. Young or sibling carers can receive help from Doncaster Young Carers Service.

Carers in Doncaster said they wanted to have their voice heard, and help shape the development of services available to them – particularly Short Breaks (Respite Services).

### **6.7.2. Carer Groups and Representation**

The Carers Oversight Group and the Carers Working Group are working to increase their membership and representation, and understand the issues that matter to Carers.

The Carers Working Group developed a survey for carers seeking views about Short Breaks. The survey closed January 2021, and the responses are analysed to inform next steps.

Findings of the survey and report will be considered the Carers groups and the Short Breaks Work-stream to develop improvement plans. Early reports issues that matter to Carers include:

- a. Availability of different types of provision, including being able to book in advance to be able to take a holiday
- b. More information about options, what is available for people

### **6.7.3. Short Breaks**

Short Breaks (sometimes called respite care) supports parents and carers to take a break from their demanding role and responsibilities whilst the person/people they care for is looked after in an environment that is safe and comfortable for them. Short breaks can be offered in a residential care service, an overnight stay with in a Shared Lives family household, or a break arranged with another carer or family member.

Our aim for Carers and Short Breaks is to ensure parents and carers are provided with a range of equitable and flexible short breaks opportunities that meets their needs and the needs of the person they care for.

#### **6.7.3.1. Children and Young People Short Breaks**

For children, young people and their families, Doncaster provides a universal and targeted offer delivered through Doncaster Council's voluntary register of children and young people with a disability, the Together Information Exchange (TIE).

The targeted offer is for children and young people with complex needs, who meet set criteria.

Throughout the pandemic, the SEND service has worked closely with schools and settings where children and young people with EHCP's attended to ensure a risk assessment had been undertaken to deem if a child should be attending school. In addition, the team worked with parents to broker a school place or additional time in school.

Welfare calls were undertaken for those children and young people with an EHCP who were not on a school role. This ensured regular contact with families, to discuss any issues, which arose due to Covid, and be signposted to the relevant agency if required.

### **6.8. Housing and Support**

A long term Housing Needs Assessment was undertaken in 2020, to help understand the sort of housing and support needs people with LD&A in Doncaster have. A comprehensive report has been published that confirms the needs of groups of people for the next 10 years.

To address the needs, the Council's guiding principle is that the general housing stock should be as accessible and flexible as possible, to allow the vast majority of people to continue to live in their existing homes and communities. To support this the Council needs to:

- a. plan and invest in aids, adaptations and new technologies which support independent living
- b. be clear about how wrap around support is provided to individuals and families including floating support, domiciliary care, more innovative models like Shared Lives, and also access to education, skills, employment opportunities
- c. make the best use of the existing specialist housing in the borough

Some people will need purpose built accommodation, especially those with severe learning disability and / or Autism, with additional needs.

The assessment confirmed that young people transitioning into Adult care and those living with older carers are two priority groups with housing and support needs over the next 5 years. Work is ongoing with individuals to identify their needs and choices; and with landlords and developers to make sure the appropriate housing offers are available within the context of the Councils Housing Strategy refresh and Place Plan.

## **7. COVID-19**

The emergence of COVID-19 during 2020 has been devastating for many people, businesses, schools and families as society adjusts to manage and live with the impact of the pandemic. For many people living with Learning Disability and Autism, the impact has been profound.

Over the past few months, it has become clear that people with LD&A are at much greater risk of death from COVID-19 than the general population. Based on information collated by the Learning Disability Mortality Review (LeDeR), deaths of people with learning disability or Autism are more than 3.6 times higher than the general population<sup>16</sup>. Some researchers believe the rate in spring 2020 it was as high as 6 times higher<sup>17</sup>. Underlying health concerns and environment are some of the contributing factors to the difference in rates.

### **7.1. Adults with Lived experience**

People with a Learning Disability and / or Autism face greater challenges than most in experiencing and dealing with the impact of COVID-19. From social distancing, mask wearing and communication, and the impact of lockdown restrictions on seeing and maintaining relationships with family and friends, the challenges have been significant for many people. Sensory issues have made mask wearing very difficult for some, and for those living in shared accommodation, maintaining social distancing is very hard, especially while managing infection prevention and control.

Providers of residential and supported living services for LD&A have continued to work hard to keep the virus out of homes and care settings however, where outbreaks in residential settings have happened nationally, the consequences for many have been devastating.

Doncaster health and care providers have worked closely together to make sure that people living in Supported Living Services and residential care have been kept as safe as possible during the pandemic.

### **7.2. Children and Young People**

The implication of COVID-19 on school closures has the potential to have a longer term impact on the educational outcomes for children and young people with SEND. During the first lockdown very few children attended school, however during the latest lockdown, children and young people with Education, Health and Care Plans have been encouraged to attend school to minimise the disruption to their learning and ensure greater gaps in attainment and outcomes do not emerge.

### **7.3. People from Black, Asian and Minority Ethnic Groups (BAME)**

The inequality faced by people from BAME Groups in relation to COVID-19<sup>18</sup> is becoming more apparent and is widely reported by Public Health England. A PHE review “Beyond the data: Understanding the impact of COVID-19 on BAME groups” found that the highest age standardised diagnosis rates of COVID-19 per 100,000 population were in people of Black ethnic groups (486 in females and 649 in males) and the lowest were in people of White ethnic groups (220 in females and 224 in males).

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<sup>16</sup> PH England Nov 2020 COVID 19 deaths of people identified as having learning disabilities: summary. Gov.uk

<sup>17</sup> PH England Nov 2020 Press Release People with learning disabilities had higher death rate from COVID-19. Gov.uk

<sup>18</sup> PH England 2020: Beyond the data: Understanding the impact of COVID-19 on BAME groups [www.gov.uk](https://www.gov.uk/government/publications/beyond-the-data-understanding-the-impact-of-covid-19-on-bame-groups)



People from BAME backgrounds and those with Learning Disability and / or Autism are at greater risk from COVID-19 disease than the wider population<sup>19</sup>. It is a key aim of the Doncaster Partners to identify those at greatest risk, and working with communities, develop and implement plans to address those issues and reduce risks for the groups or individuals where possible.

#### **7.4. Vaccination Programme**

The Vaccine roll out programme will offer a significant protection for people with Learning Disability and / or Autism.

For many people, taking the vaccine will also be a challenge. Fear of needles, the potential need for some to have a Mental Capacity Assessment or being able to make an informed decision in the context of the impact on their own health and those around them will need to be addressed. Further work is needed to understand the issues affecting people with LD&A, to ensure we can plan support and care to reduce risks where possible, balanced with living a good life.

Development and implementation of the plans continue to be refreshed and updated to take account of emerging risks and Government guidance. The Doncaster health and care system has put in place robust systems and processes, to proactively manage the risks, and respond to rapidly changing circumstances and guidance in managing the Doncaster COVID-19 response.

#### **7.5. Carers**

During the pandemic, it has become clear that carers are providing more care than they were 6 months ago<sup>20</sup>. There are several reasons for the increase, and include the needs of the cared for person increasing and/or due to local services reducing or closing during lockdowns. Locally, some carers have expressed their exhaustion as they continued to care for their family member during lockdown and while services were closed, for example, day services.

During COVID-19 pandemic, Carers Doncaster partners have worked hard to ensure that services provided are COVID-19 secure, and services have reopened where possible, providing a level of respite that was not available during the initial lockdown phase.

### **8. Doncaster Learning Disability and Autism Finances**

The Doncaster Health and Care Partnership and partners are committed to making the best use of the resources available to support Doncaster citizens. The Joint Commissioning Strategy outlines the commitment of both partners to

- a) Make best use of the Doncaster pound
- b) Avoid duplication
- c) Improve individual experience
- d) Improve individual and community outcomes
- e) Develop our workforce
- f) Maintain health and wellbeing

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<sup>19</sup> PH England 2020: Beyond the data: Understanding the impact of COVID-19 on BAME groups [www.gov.uk](http://www.gov.uk)

<sup>20</sup> Carers UK (Oct 2020) Caring behind closed doors: six months on - The continued impact of the coronavirus (COVID-19) pandemic on unpaid carers [www.CarersUK](http://www.CarersUK)



The tables 1 and 2 below summarise the number of people who receive care from the Council, the CCG or both and the services that people use.

**Table 1. Adults Receiving Social Care/CCG funded support**

<b>Group of people</b>	<b>People with Learning Disabilities</b>	<b>People with Autism</b>
Known to social care and health- adults and older people	1,053 (as at 19.01.21) 260 receive health funding*	200 social care (some will be counted in LD figure)
People fully CHC funded	117	Not known
People in receipt of a direct payment (social care)	302 (As at 26.01.21) personal health budget=24	76 (As at 26.01.21) (62 reporting as having LD and ASD, and are included in the LD figures)
Personal Health Budget	12 fully funded, 12 joint health and care funded.	Not known

\*based on people using social care services with a housing need 2018 and CCG fully funded- people living at home with families (latter needs verification)

**Table 2. The Services that people use**

<b>Service</b>	<b>People with LD</b>	<b>People with Autism</b>
The Council's In House Day Services (SMILE)	Service closed during Covid Lockdown periods  348 as at Dec. 2019 (340 with a primary support need of LD 2 with autism only 6 older people with LD from Smile Service info December 2019)	A number of people with autism as a secondary need attend
Diamond Centre RDaSH (previously known as Solar Centre)	Closed Mar – Sept 2020. Dec 2020 - 22 attendees. The services offers specialist services for people with complex health and care needs.	A number of people with autism as a secondary need attend
Short Breaks (respite care) residential Council provided	107 in 2019/20 148 in 2018/19 Plus a small number of people using private residential services	Includes 7% of people with LD who also have autism
Services purchased through direct payments Personal Health	199 < 65 years 17older people	60
Personal health budgets	24	Not known
Health and wellbeing/community services.	No information is currently available	No information available currently – need to work with communities to understand

		demand more, and impact of the LD&A plans to increase contact in communities.
Shared Lives-short breaks/day opportunities	Too small numbers – risk GDPR breach.	Too small numbers – risk GDPR breach
Home Care	108 (Long Term Primary Support reason LD, from 17.01.21 Dashboard)  CCC-9 – don't know what this is	Some people with Autism will be included in the LD figure
Advocacy (2018/19)	355 (Voiceability)	45

### 8.1. Finance Summary

**Table 3. Expenditure by Care Type 2020/21 Forecast Outturn**

Service	DMBC	CCG	Total
Residential Care	£5.97	£20.7m	£26.67m
Hospital Care/Specialist Placement	£0.0m	£3.1m	£3.1m
Supported Accommodation	£17.68	£2.9m	£20.58m
Day Services	£2.0m	£0.1m	£2.1m
Short Breaks	£0.78m	£0.5m	£1.28m
Direct Payments	£2.88m	£0.8m	£3.68m
Home Care	£0.76m	£0.4m	£1.16m
Extra Care Housing Support	£0.05m	£0.0m	£0.05m
Community Nursing	-	£2.5m	2.5m
Community Social Work (CALDT and Area Teams)	£0.99m	£0.0m	£0.99m
Primary Care Local Enhanced Service	£0.0m	£0.2m	£0.2m
TOTAL	£31.11m	£31.1m	£62.21m

\*Excludes costs associated with transport and autism diagnostic service and 'other'.

- 43% of the total CCG budget health and care budget is spent on residential care
- The minimum weekly cost of residential care is £535.
- Current spend on short breaks to support people living within their family home remains relatively low (excluding costs of short breaks and day opportunities arranged through direct payments)
- £2.1million is spent on day services.

'The joint commissioning strategy through its governance structure continues to review funding and reflect the future direction of travel, aligned to key principles within this document. This will involve consultation with people who use services and their families whether some services should be reconfigured.

**Table 4. Revenue Monitoring 2020/21 Quarter 3 (Updated) High Needs Block**

Service	DSG Budget for Year	Quarter 3 Projection	Projected DSG Variance

	£'000	£'000	£'000
<b>HIGH NEEDS BLOCK DSG</b>			
Mainstream EHCP Top Up funding	5,500	5,651	151
Special Schools - ISB	6,111	6,111	0
PRUs Incl. Mulberry Unit	2,879	2,884	5
North Bridge Enterprise College	947	947	0
Primary Outreach	388	425	37
Additional Resource Centre's	18	18	0
Big Picture Learning	803	726	(77)
Secondary Outreach	106	106	0
Children's Specialist Equipment	25	25	0
Specialist Post 16 Institutions	1,483	2,335	852
Post 16 FE Colleges	388	562	174
Pupils Educated Out Of Area - LA SEN	4,415	5,496	1,081
Pupils Educated Out Of Area - LA CWD	744	1,262	518
Pupils Educated Out Of Area - DCST	3,184	3,675	491
Specialist AP provision	499	673	174
Other LA recoupment	200	501	301
ASD Schools Support	664	664	0
HI Schools Support	826	741	(85)
VI Schools Support	318	314	(4)
Pre-School Inclusion - Portage/SEN	933	892	(41)
Learning & Behaviour Support Service	353	353	0
Pupils Educated At Home	91	91	0
Independent Behaviour Provision (Tops Team)	133	133	0
Contributions to Centrally Retained & De-delegated Budgets	98	98	0
High Needs Contingency/Unallocated	(269)	(657)	(388)
<b>HIGH NEEDS BLOCK Sub-total</b>	<b>30,837</b>	<b>34,026</b>	<b>3,189</b>

## **9. Information and data sharing**

Access to information and data to underpin planning continues to be a challenge, especially in relation the supporting people with Autism.

The development of the joint Doncaster Council and NHS Doncaster CCG Commissioning Strategy describes the ambition of working together, including sharing of information. Significant progress is made on developing shared data sets, and further work is ongoing to address the gaps where this is possible.

## **10. Development of clear outcomes and Key Performance Indicators (KPIs)**

Each of the five priority work-streams and the cross cutting themes have developed plans and started to make progress in delivering against the defined actions. Some of the actions already include KPIs, for example, delivery of Annual Health Checks, uptake of Cancer Screening and the existing ASCOF (Adult Social Care Outcomes Framework) standards for employment and housing.

Further work is needed to define the outcomes for each of the work-streams aims and objectives, and the measures needed to make sure progress is being made against them. Further development of KPIs, robust use of existing measures to monitor progress is being planned, with the development of a dashboard to present and monitor progress.

Health and Social Care colleagues are committed to joint working and sharing information through the delivery of the Living Well Plans (where the Learning Disability and Autism plans report to) and development of the systems needed to do this is ongoing.

### **10.1. Coronavirus (COVID-19) 2020**

“It may seem premature to consider the impacts of COVID-19 but the sooner the impacts are assessed and the lessons are learnt the sooner and more effectively Doncaster people, families, communities, businesses, schools and institutions can plan for a more prosperous future. There will be government reports and inquiries in due course but this report starts to provide a Doncaster perspective on the pandemic. There are other perspectives and they too need to be heard”<sup>21</sup>.

The impact of COVID-19 on people with Learning Disability and Autism, and those from BAME backgrounds is significant. Further understanding of the impact and which groups and settings are at greatest risk is needed of what this means for the people of Doncaster. Plans are being developed with Public Health, local communities and services.

## **11. Communication and Engagement**

Engagement with people with lived experience has been a central principle in the development, planning and delivery of the Strategy and this Refresh.

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<sup>21</sup> Doncaster DPH (2021) Appendix to Director of Public Health Annual Report 2020.

As work is moving more into delivery, and the identification of risks for people with LD&A and those from BAME backgrounds, further engagement work and regular communications about the strategy, programme of work and opportunities to get involved is needed.

A key element of the CYPP is to ensure the voices of children and young people are included in all we do, ensuring all children and young people have the opportunity to influence the services they access and the support they receive.

A Communications and Engagement plan is in development that spans the breadth of work and the communities the plans involve. The plan is building on the communication and engagement work that is currently underway, and will make a commitment to;

- a. Delivering regular updates to the wider community by Newsletter
- b. Sharing information about ways for more people to get involved at all levels of the strategy development and implementation.
- c. Targeting particular groups who are currently under-represented to seek views, and keep informed of the work and progress or challenges.
- d. Working with people with lived experience of all ages to make sure that engagement and communications are accessible and meaningful for them.

## **12. Monitoring and Governance**

Development and implementation of the Strategy and plans is overseen and challenged by the Learning Disability and Autism Partnership Boards respectively.

Quarterly reports against each of the delivery plans are submitted through the Living Well Delivery Plan for monitoring by both Doncaster Council and NHS Doncaster CCG. It is anticipated that this will continue.

## Doncaster's All Age Learning Disability and Autism Strategy (2021-2024)

### Annex 1 - Understanding the Care and Health Needs of People with Learning Disability and / or Autism in Doncaster 2021- 2024

#### 1. Doncaster Population By Age

The Doncaster Council State of the Borough in 2019<sup>22</sup>, described the number of people living in the borough as 310,542, an increase of 3.2% since 2010. This rate of increase is lower than elsewhere in Yorkshire and the Humber, and expected to expand by a further 1.2% by 2030.

Compared to the England average, it is estimated that Doncaster has a smaller proportion of adults aged 20 to 44 but has a higher proportion of people aged 45-69 and above (ONS, 2016). The largest growth is seen in people aged 65-74, and a reduction in growth of those aged 25-34. Growth rates of children and teenagers, and the number of people aged 70 and above, are similar to national trends

**Table 1 Proportion of the population by Age group compared to England.**

Age Range	Doncaster pop %	England pop %
0-19	23.6	24
20-44	31.1	33.5
45-69	32.6	30.1
Above 70	12.8	12.3

**Table 2 Estimated Percentage change between 2017 and 2030 (ONS, 2016).**

Age band	2017 pop	2030 pop	% change
0-14	55,069	52,064	-5.45%
15-24	33,203	34,478	+3.84%
25-34	40,705	34,977	-14.07%
35-44	36,462	40,360	+10.69%
45-54	43,214	36,471	-15.60%
55-64	38,845	39,013	+0.43%
65-74	31,995	37,210	+16.29%
75+	25,857	36,506	+41.18%

An increase in all age groups from 55 years and above is expected to continue. This increase in the age profile will have implications for health and social care services, as the oldest group in the population expands, and the younger group see a lower rate of increase.

Services will increasingly need to address the ageing profile of people they support, for example, future housing offers will need to address the future needs of tenants, which will change over time.

<sup>22</sup> Doncaster Council (2019): Doncaster Council – State of the Borough. [www.doncaster.gov.uk](http://www.doncaster.gov.uk)

## 2. Doncaster Population by Ethnicity

Areas across Doncaster with significant Black and Minority Ethnic populations include Balby (16%), Belle Vue (26%), Bennethorpe (18%), Hexthorpe (24%), Hyde Park (46%), Intake (16%), Lower Wheatley (37%), Town Moor (20%), and Wheatley Park (20%).

There is a wide range of cultural and ethnic groups within the Doncaster BAME community.

In 2001 the population in Doncaster was 96.5% White British, which reduced to 91.8% in the 2011 Census, indicating that the diversity in the borough is increasing, and is expected to continue to increase.

Greater focus is needed on working with communities to understand the cultural needs, choices, and inequalities, and build these into the emerging service developments and especially to address the health inequalities that people from Black and Minority groups, with Learning disability and / or Autism experience.

## 3. Doncaster Population with a Learning Disability or Autism

National and local data describing people with Learning Disability, Autism or both is incomplete and compiled from various sources. (People's needs are recorded as a 'Primary Support Need, and does not consistently record where people have more than one need).

Table 1 describes estimates of the number of people living with Learning Disability or Autism in the UK and Doncaster.

The data for Children is incomplete, and estimates based on Children and Young People for whom Doncaster LA maintains their Education, Health & Care Plan

**Table 1**

**Estimated numbers of people living with Learning Disability or Autism 2019**

Indicator	People with Learning Disabilities	People with Autism
National Prevalence (all age)	1.5m – 1.6m based on 66m UK population 350,000 with SLD	700,000-726,000 based on 1 and 1.1% of the population
National Population in England (over 18 years)	1.05m (2020 prediction) predicted to rise to 1.16m by 2040`	438,334 (2020 prediction)  Predicted to increase to 488,184 by 2040
Doncaster Population (all age)	7,722	3,089 based on 1%
Doncaster Population (Over 18 years)	5,784(2020 prediction) (1,198 with MSLD)  Predicted to increase to 6,362 by 2040	2,446 (2020 estimated)  Predicted to increase to 2,709 by 2040
5-17 years (with ECHP) School census 2020	169 Moderate LD 97 Severe LD	602
People (18-64) whose behaviour presents a severe challenge	Predicted 84 LD in 2020 No local information	No local information

Those on proactive support register	32 adults (12 on heightened monitoring) 56 children* (18 with heightened monitoring)	No breakdown available
Expected changes in population-nationally predicted	Adults (18-64) very little change predicted to 2040. However, 65+ predicted to increase by 36% by 2040.	Adults (18-64) 2.7% increase predicted by 2040. 65+ predicted to increase by 37% by 2040.

\*Proactive Support Register-children -is much broader than the Transforming Care definition as includes all children in 52 week residential placements.

### 3.1. People with Moderate or Severe Learning Disability

People with moderate or severe learning disability may also be living with other complex health and care needs, and often require a range of services specifically developed to meet their particular needs. Table 2 describes the number of people estimated to be in those groups.

The estimated number of people with moderate or severe learning disability in Doncaster is in line with the growth in the general population. Services to meet the needs of this group of people will need to continue to grow in order to meet their needs.

**Table 2 People predicted to have a moderate or severe learning disability, and likely to be in receipt of services, by age in Doncaster<sup>23</sup>**

Age	2020	2025	2030
18-64	1,026	1,037	1,049
65+	172	187	204
Total population	1,198	1,223	1,254

Around 1,269 people with moderate or severe learning disabilities locally are over 65 years, and 568 people with autism<sup>24</sup>. In line with the general population, it is anticipated there will be a continued increase in the number of older people with Autism, which services and commissioners will need to address in future planning.

### 3.2. People with Autistic Spectrum Disorder

Table 3 below describes the number of men and women with a diagnosis of Autistic Spectrum Disorder in Doncaster. As is seen in the national figures, there are 6 times more men diagnosed with autism than women.

**Table 3. People predicted to have autistic spectrum disorders, by age and gender, projected to 2040 in Doncaster**

	2020	2025	2030
Males predicted to have autistic spectrum disorders in Doncaster			
18-64	1,694	1,701	1,712

<sup>23</sup> POPPI (2021): Estimate <https://www.poppi.org.uk/index.php>

<sup>24</sup> POPPI (2021) <https://www.poppi.org.uk/index.php>



65+	502	556	619
Females predicted to have autistic spectrum disorders in Doncaster			
18-64	184	184	184
65+	66	71	78
Total Population	2,446	2,512	2,593

It is understood that about 1.0 - 1.1% of adults in England live with Autism, (Based on using the Autism Diagnostic Observation Schedule). Most of those people are men (1.8%) with only 0.2% women meeting the criteria.

The National Autistic Society say that 'estimates of the number of people with autism spectrum disorders (ASD) who also have a learning disability, vary considerably, and it is not possible to give an accurate figure.

Some people with ASD may never come to the attention of services as having special needs, because they have learned strategies to overcome any difficulties with communication and social interaction and found fulfilling employment that suits their particular talents. Other people with ASD may not have a learning disability but need support from services, because the challenges their Autism presents can make social interaction, education and working more difficult than for other people in the community.

### 3.2.1. Referrals to Autism Service

The number of referrals into the Autism Service provided by RDASH has fallen this year, largely due to the impact of COVID-19 and the service closure during the lockdown period. (2020/21 figures are to Feb 2021).

**Table 4 Number of people referred to the Autism Service year on year.**

Referral Count	Unique Patient Count	Team	Year
226	201	DONCASTER AUTISM SPECTRUM DISORDER TEAM	2018/2019
262	214	DONCASTER AUTISM SPECTRUM DISORDER TEAM	2019/2020
164	136	DONCASTER AUTISM SPECTRUM DISORDER TEAM	2020/2021

In line with expected growth, referral rates into the service are continuing to increase. A range of diagnoses has been recorded following assessment and includes:

- Autistic disorder
- Rett's syndrome
- Asperger's syndrome,
- Pervasive developmental disorder,
- Atypical autism
- Others.

The drop in number of referrals to the Doncaster ASD team for 2020/21 is reflective of the service closure due to the pandemic during the first half of the year, and more people are waiting for an assessment for diagnosis.

## **4. Headlines Summary**

### **4.1. Adults - Learning Disability**

- a) 1.05 million adults in England are estimated to have a learning disability (2020 England population projections)
- b) In total, approximately 5,800 adults in Doncaster have a learning disability and 1,269 of them are over 65 years old
- c) 1,200 adults have moderate or severe learning disabilities and 172 are over 65 years old
- d) 108 people with learning disability (primary support reason) receive home care (as at 17.01.21)
- e) 910 individuals have an open service with Primary Support Reason LD, 85 of which also have a recorded health condition of Autism
- f) Of these 910 individuals, 91.6% are of White British ethnicity
- g) 41 people with Learning Disabilities and Autism meet social care eligibility criteria

### **4.2. Adults - Autism**

- a) 440,000 adults in England are estimated to have autistic spectrum disorders
- b) It is estimated that up to 70% people with Autism, also have a learning disability.
- c) Approximately 2,500 adults in Doncaster have autism and 568 of them are over 65 years old
- d) 160 people with Autism meet social care eligibility criteria

### **4.3. Children and young people**

By 2024, 72 young people with and EHCP and supported by children's social care (has an Open Referral) will reach 18 years with a range of needs. (Some numbers of cases has been removed from each category as they are low and risk identifying individuals):

- a. 23 children with EHCP due to Social, emotional and mental health issues
- b. 17 children with EHCP due to Autism Spectrum Disorder
- c. 10 children with EHCP due to Severe Learning difficulties
- d. v children with EHCP due to Mild Learning difficulties
- e. w children with EHCP due to Profound and multiple learning Disability
- f. x children with EHCP due to Physical Disability
- g. y children with EHCP due to Hearing Impairment
- h. z children with EHCP due to Attention Deficit Hyperactivity Disorder

There are 45 children open to Children's Social Care with learning Disabilities or Autism Spectrum Disorder recorded who will turn 18 years old by 31/03/2024 in receipt of services from

- a. Children's' Disability Service
- b. Occupational Therapy Team
- c. Looked After Children
- d. Approximately 11.4% of all looked after children have a learning disability and/or autistic spectrum disorder (59 children in total)

Waiting times for a diagnosis of autism for children have vastly improved:

- a. 100% within 18 weeks of first face to face contact for under 5's

- b. More than 90% for over 5's. (This is from the point of referral to Autism Team).

#### 4.3.1. Looked After Children

- a) There are 27 looked after children who will reach 18 years by 2024
- b) Approximately 6% of all looked after children have a learning disability and/or autistic spectrum disorder
- c) There are 346 children with an Education, Health and Care Plan due to a moderate or severe learning disability or autistic spectrum disorder who will reach the age of 18 by 2024 (based on those aged 14 & above at the 2020 School Census)

#### 4.3.2. Children in Transitions

**Table 5. Young People with Learning Disabilities Transitioning to Adult Services up to 2030**

Age (as at 2020)	8	9	10	11	12	13	14	15	16	17
Doncaster	60	39	62	74	61	62	80	68	57	62

**Table 6. Young People with Autism as at 2020**

	Year 10	Year 11	Year 12	Year 13
Doncaster	71	82	40	37

Children in transitions include those living at home, and those in Looked After services.

This group of people require support as they move from Children and Young People's Services, education and home environments, and into adulthood, employment, and their own home environment. For young people this can be a very unsettling time, and for those with Learning Disability and / or Autism has additional stressors, as every part of their lives can change.

Young People in Transitions is identified as a cross cutting theme within the Strategy, to ensure that developments in services specifically address the needs of this group of people, from housing to employment support.

## 5. Health, Learning Disability and Autism

People with a learning disability and / or Autism have worse health outcomes the wider population, and are more likely to experience a number of health conditions<sup>25</sup>.

"Women with a learning disability in England have an average life expectancy of 65, GP data from NHS Digital have shown—18 years lower than those without, which is worse than for

<sup>25</sup> Mencap (2020) Health Inequalities <https://www.mencap.org.uk/learning-disability-explained/research-and-statistics/health/health-inequalities>

men. Men with a learning disability had an average life expectancy of 66 in 2017-18, compared with 80 in men without a recorded disability<sup>26</sup>.

Patients with learning disabilities also had lower rates of cancer screening, most notably in cervical screening for women: only 31% had smear tests, compared with 73.2% of those without a learning disability.

### **5.1. Annual Health Checks with the GP**

An annual health check helps you stay well by talking about your health and finding any problems early, so you get the right care<sup>27</sup>.

GP Practices are required to keep registers of people with learning disabilities and to offer annual health checks to people aged 14 years and above. GP practices and primary care networks are working towards improving the accuracy of people on their learning disability registers. Information currently available shows:

- a. The number of people registered with a GP as of December 2020 is 1964. The peer group average for comparison is 1720<sup>28</sup>
- b. There has been an increase in the number of annual health checks completed. Since 2014/15 there has been an increase of 310 annual health completed on an annual basis. The percentage has decreased by from 53.8% to 44.4% showing work is required to improve the coverage of annual health checks<sup>29</sup>.
- c. Health checks are not currently offered routinely to people with autism.

Improving access to health checks for people with Learning Disability and / or Autism is a key aim of the Health inequality action plan.

### **5.2. Health Screening**

As of December 2020 over the rolling year, people with learning disabilities living in Doncaster accessed the national Cancer Screening Programmes<sup>30</sup> as detailed below.

- a. Bowel screening attendance at around 73.3%. (Doncaster c 65%)
- b. Breast screening 41.6% (Doncaster c63%)
- c. Cervical screening 48.8%. (Doncaster c74%)
- d. Data not available for the number of people with autism who access screening.

While there is some good news in the uptake of screening, there is more to be done to ensure that all people who are eligible for the cancer-screening programme are encouraged and able to attend. Health colleagues are working with the regional health action teams to address the issues and barriers that exist for people with Learning Disability and / or Autism, and is included in the health inequalities action plan.

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<sup>26</sup> BMJ (2019) People with learning disabilities have lower life expectancy and cancer screening rates <https://www.bmj.com/content/364/bmj.l404#:~:text=People%20with%20learning%20disabilities%20have%20lower%20life%20expectancy%20and%20cancer%20screening%20rates,-BMJ%202019%3B%20364&text=The%20inequality%20is%20greater%20in,men%20without%20a%20recorded%20disability.>

<sup>27</sup> NHS 2020: Annual Health Checks – Learning Disability. <https://www.nhs.uk/conditions/learning-disabilities/annual-health-checks/>

<sup>28</sup> source GP practice registers December 2020

<sup>29</sup> <https://www.poppi.org.uk/index.php>, NHS Outcomes Framework, Doncaster GP registers (2020)

<sup>30</sup> NHS Doncaster CCG 2021: LD Health checks Dashboard

### **5.3. Learning Disability Mortality Review Programme (LeDeR)**

The LeDeR Programme is the first national programme of its kind aimed at making improvements to the lives of people with learning disabilities and addressing the factors that lead to health inequalities and premature death.

Health and care services are reviewing deaths of people with Learning Disability and Autism to learn from them and improve the standard and quality of health promotion and care and support. People with learning disabilities, their families and carers have been central to developing and delivering the programme. Several priority care areas have been identified so far:

- Constipation,
- Epilepsy and Seizure management,
- Sepsis,
- Dysphagia (Difficulty swallowing)
- Positioning

Learning from the LeDeR programme is built into the Health Inequalities Plan.

The Integrated Care System is developing training and awareness sessions to improve outcomes identified in local LeDeR reports and will focus on the priority areas identified for Doncaster through the current reviews.

### **5.4. COVID-19**

Public Health England estimates that people with Learning Disability and / or Autism are at more than 3.6 times more risk of dying from COVID-19 than the wider population<sup>31</sup>. In response to this finding, LeDeR through NHS Improvement has published their guidelines<sup>32</sup> for reducing the risks to this group of people.

People from Black Asian and Minority Ethnic (BAME) groups are also identified as being at greater risk from COVID-19. Recent evidence is that some BAME groups are not taking up the vaccine when offered. Plans are in development to work with Public Health and BAME representatives to address the health inequalities and improve the outcomes for the at risk groups within the Learning Disability and Autism community.

### **5.5. Carers**

Nationally, 64% of carers have reported they have not been able to take any breaks from their caring role during the pandemic. 19% advised they have not been able to take as many breaks as they felt they needed. Overall, 79% of Carers advised they had either not taken any or been able to take sufficient breaks.

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<sup>31</sup> <https://www.gov.uk/government/publications/covid-19-deaths-of-people-with-learning-disabilities>

<sup>32</sup> NHSI (2020): (LeDeR) programme Action from learning: deaths of people with a learning disability from COVID-19. <https://www.england.nhs.uk/publication/action-from-learning/>

Development of short breaks for carers was identified as a priority during the engagement exercises, and work is already underway to expand the offer for carers. The emergence of COVID-19 has made this more challenging, but also, more important than ever.

As the population ages, increasing numbers of older people will have caring responsibilities for family members.

## 5.6. People's Accommodation and Support Needs

In 2020, a Strategic Needs Assessment for the next 10 years housing and support needs for people across all ages with Learning Disability and / or Autism was commissioned across the South Yorkshire and Bassetlaw Integrated Care System.

In January 2021, the Councils Care Management system identified that 1,053 have a recorded accommodation status breakdown as shown in Table 7 below.

**Table 7. Accommodation Status of people on the Care Management System**

Acute / Long Stay Health Care Residential or Hospital	6
Adult Placement Scheme	20
Appvd Resid for Offenders Released or on Probation	1
Extra Care/Other/Sheltered Housing	5
Other Temporary Accommodation	6
Owner Occupier / Shared Ownership Scheme	19
Placed in temporary Accommodation by LA	5
Prison / Young Offenders / Detention Centre	1
Registered Care Home	115
Registered Nursing Home	5
Rough Sleeper / Squatting	1
Settled Mainstream Housing with Family/Friends	393
Staying with Family/Friends as a Short Term Guest	9
Supported Accom / Lodgings / Group Home	345
Tenant	91
Tenant - Private Landlord	31

Review of the Strategic Needs Assessment identified that young people in transitions and those living at home with their carers are two of the priority groups whose housing and support needs are significant and increasingly urgent. The Council currently has 38 new units being developed that will be available in spring 2022.

The Strategic Housing Needs Assessment identified opportunities and gaps in the existing housing and support provision.

In line with the Council's Housing Strategy Refresh<sup>33</sup> (2020) the Housing and Support plan aims to ensure that people will be supported to live in homes that meet their assessed

<sup>33</sup> Doncaster Council (2021): Doncaster Housing Strategy 2021 – 2025.  
<https://www.doncaster.gov.uk/services/housing/our-housing-strategy-2015-2025>

needs, in their local communities. Housing and support options will be based on individual assessed needs, and will include

- d. General housing with adaptations and new technologies which support independent living
- e. Include the support needed by individuals
- f. May include purpose built specialist housing where this is needed and based on assessed need
- g. Include a wide range of accommodation and support from general housing with floating support, extra care, supported living, shared lives, and where needed, residential care services.

Through the engagement exercises, people with lived experience said where they live is important, as is whom they live with. Maintaining relationships with families, friends and partners are essential. Housing and support options are being developed that ensure that people are able to live in their communities, and provide choice about who they live with.





# **EQUALITY, DIVERSITY AND INCLUSION**

## **DONCASTER METROPLITAN BOROUGH COUNCIL**

### **Due Regard Statement**

### **Doncaster's All Age Learning Disability and Autism Strategy (2021-2024)**

How to show due regard to the equality duty in how we develop our work and in our decision making.

## Due Regard Statement

A **Due Regard Statement** (DRS) is the tool for capturing the evidence to demonstrate that due regard has been shown when the council plans and delivers its functions. A Due Regard Statement must be completed for all programmes, projects and changes to service delivery.

- A DRS should be initiated at the beginning of the programme, project or change to inform project planning
- The DRS runs adjacent to the programme, project or change and is reviewed and completed at the relevant points
- Any reports produced need to reference “Due Regard” in the main body of the report and the DRS should be attached as an appendix
- The DRS cannot be fully completed until the programme, project or change is delivered.

1	<p><b>Name of the 'policy' and briefly describe the activity being considered including aims and expected outcomes. This will help to determine how relevant the 'policy' is to equality.</b></p>	<p><b>Doncaster's All Age Learning Disability and Autism Strategy (2021-2024)</b></p> <p>The strategy aims to support people of all ages with a learning disability and/or autism to live their best life, and have the same opportunities as everyone else living in Doncaster.</p> <p>The vision statement of the strategy, which was agreed through the engagement process is that,</p> <p>"We believe that children, young people and adults with a learning disability and/or autism have the right to the same opportunity as anyone else to live satisfying and valued lives, and to be treated with dignity and respect. They should have a home within their community, be able to develop and maintain relationships, and get the support they need to live healthy, safe and rewarding lives".</p> <p>This strategy will identify priorities in terms of addressing the areas for action outlined in the national strategies whilst being mindful of the key principles that have been identified in the strategic plans of partners in Doncaster. The principles that will be addressed include;</p> <ol style="list-style-type: none"> <li>1. Have access to a timely diagnosis in line with national guidance</li> <li>2. Have a safe, happy and healthy childhood, accepted for who they are, supported to have self-worth and to develop skills and talents</li> <li>3. Be encouraged to hope for the same things in life as other citizens-work, family life, relationships, own home</li> <li>4. Be safe in their community and free from the risk of discrimination, hate crime and abuse</li> <li>5. Should live in a family home or their own home with people they chose to live with unless there are exceptional circumstances why this can't happen</li> <li>6. Have access to a good education and learning throughout life</li> <li>7. Aspire/hope to have a paid job and be supported to achieve this</li> <li>8. Be supported by family carers/relatives whose own needs, rights and views have been fully considered and are supported in their caring role</li> <li>9. Have equal access to good health care and be supported to live healthy lives</li> </ol>
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		<p>10. Have highly personalised support, which is built up around people's strengths, their own networks of support and in their local community</p> <p>11. Be supported to access universal and early support services, where their needs are understood, they are accepted for who they are and reasonable adjustments are made</p> <p>12. Have the information they need to access social care and health services and universal services</p> <p>13. Have a planned and smooth transition from child to adult life</p> <p>14. Have a fulfilling and healthy later life with the same opportunities as other older people</p> <p>15. Expect health and social care to work together with others to make the best of resources, working hard to achieve fully personalised support</p> <p>16. Have their views and wishes in the centre of planning and shaping support</p>
<b>2</b>	<b>Service area responsible for completing this statement.</b>	<p>Strategic Commissioning</p> <p>Public Health, Leisure and Strategic Commissioning</p>
<b>3</b>	<p><b>Summary of the information considered across the protected groups.</b></p> <p><b>Service users/residents</b></p> <p><b>Doncaster Workforce</b></p>	<p>Data and information from a wide range of sources has been used to understand the needs of people with a Learning Disability and/or Autism and their family/carers in Doncaster.</p> <p>Population demographics, including age profiles, ethnicity, and incidence of learning disability and/or Autism have been considered, with expected growth rates to 2030 included and the implications considered.</p> <p>Detail of this information is provided in:</p> <p><b>Annex 1 – Doncaster All Age Learning Disability &amp; Autism Strategy (2021)</b></p>



LD&A Annex 1.docx

References are included in the strategy refresh document.

Formulation of the strategy considered national strategy and policy where this is relevant, local policy and strategies, and emerging evidence for each of the workstreams and plans.

With regard to health plans, ongoing learning is reflected within the plans, which are regularly updated in light of new evidence.

Education and inclusion plans are reviewed and updated in line with SEND inspections, and national review / updates of SEND Strategy and priorities. Data to support the 6 priorities (detailed below) is currently being explored to enable decision-making and next steps, with detail referenced in the SEND Programme Due Regard Statement.

As the COVID-19 pandemic progresses, emerging evidence of the impact on people with LD&A, and those from BAME communities is regularly reviewed to inform and support development of local plans, building on existing good practice developed since the start of the pandemic. A focussed approach is planned to explore the risks and mitigations for specific groups, e.g people from BAME, and those living in shared accommodation.

Initial engagement with people with lived experience was framed around known areas of concern. The outcomes are detailed in the engagement section below.

References in the main LD&A strategy document include those listed below:

- a) Engagement Report for the Doncaster All Age Learning Disability & Autism Strategy, Speak Up Advocacy (2019)
- b) Doncaster Place Plan Refresh (2019-2022), Doncaster Partnership (2019)

	<ul style="list-style-type: none"> <li>c) Doncaster Joint Commissioning Strategy, Doncaster Council &amp; Doncaster CCG (2019)</li> <li>d) Appendix to Director of Public Health Annual Report 2020, Doncaster Council (2020)</li> <li>e) Housing Needs Assessment: Future need for accommodation with support 2020-2030, South Yorkshire and Bassetlaw Integrated Care System (2020)</li> <li>f) Doncaster Council Due Regard Statement for Implementation of the SEND Strategy.</li> <li>g) Projecting Adult Needs and Service Information (PANSI) 2021 <a href="https://www.pansi.org.uk/">https://www.pansi.org.uk/</a></li> <li>h) Service Model for Commissioners, NHSE, ADASS, LGA (2015) <a href="https://www.england.nhs.uk/wp-content/uploads/2015/10/service-model-291015.pdf">https://www.england.nhs.uk/wp-content/uploads/2015/10/service-model-291015.pdf</a></li> <li>i) Building the Right Support, NHSE, ADASS, LGA (2015) <a href="https://www.england.nhs.uk/wp-content/uploads/2015/10/ld-nat-imp-plan-oct15.pdf">https://www.england.nhs.uk/wp-content/uploads/2015/10/ld-nat-imp-plan-oct15.pdf</a></li> <li>j) REACH Standards, Paradigm (2017) ) <a href="https://paradigm-uk.org/what-we-do/reach-support-for-living/">https://paradigm-uk.org/what-we-do/reach-support-for-living/</a></li> <li>k) Making it Real, TLAP (2018) <a href="https://www.thinklocalactpersonal.org.uk/makingitreal/">https://www.thinklocalactpersonal.org.uk/makingitreal/</a></li> <li>l) Foundation for People with Learning Disabilities: Learning Disability Statistics: Autism (2021) <a href="https://www.learningdisabilities.org.uk/learning-disabilities/help-information/statistics/learning-disability-statistics-/187690">https://www.learningdisabilities.org.uk/learning-disabilities/help-information/statistics/learning-disability-statistics-/187690</a></li> <li>m) What is Autism?, National Autism Society (2020) <a href="https://www.autism.org.uk/advice-and-guidance/what-is-autism">https://www.autism.org.uk/advice-and-guidance/what-is-autism</a></li> <li>n) Employment Research and Statistic, Mencap (2021) . <a href="https://www.mencap.org.uk/learning-disability-explained/research-and-statistics/employment-research-and-statistics">https://www.mencap.org.uk/learning-disability-explained/research-and-statistics/employment-research-and-statistics</a></li> <li>o) Caring Behind Closed Doors, Carers UK (2020) <a href="https://www.carersuk.org/images/News_and_campaigns/Caring_Behind_Closed_Doors_Oct20.pdf">https://www.carersuk.org/images/News_and_campaigns/Caring_Behind_Closed_Doors_Oct20.pdf</a></li> <li>p) PH England Nov 2020 COVID 19 deaths of people identified as having learning disabilities: summary. <a href="http://www.Gov.uk">www.Gov.uk</a></li> <li>q) PH England Nov 2020 Press Release People with learning disabilities had higher death rate from COVID-19. <a href="http://www.Gov.uk">www.Gov.uk</a></li> </ul>
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		<p>r) PH England 2020: Beyond the data: Understanding the impact of COVID-19 on BAME groups <a href="http://www.gov.uk">www.gov.uk</a></p> <p>s) Data collected by the Council's Policy, Insight and Change team regarding Doncaster's health and social care services for people with a learning disability and/or autism.</p>
4	<b>Summary of the consultation/engagement activities</b>	<p>In August 2018 The Adult, Health and Wellbeing Directorate agreed a business case for the Co-production and Engagement plan for people with a learning disability, autism or both. Speak Up and Inclusion North were commissioned to deliver this, which involved engagement with users of services who have a learning disability and/or autism, their carers and professionals.</p> <p>This work was undertaken in the following stages:</p> <ul style="list-style-type: none"> <li>• <b>Stage 1 September 2018 – November 2018:</b> Co-production of the materials for the engagement strategy, working with key partners and Experts by Experience from Choice for All Doncaster (ChAD), Doncaster Parent Voice, Family Carers, Doncaster Clinical Commissioning Group and the Strategy and Performance Unit within Doncaster Council.</li> <li>• <b>Stage 2 November 2018 - January 2019:</b> Engagement with people with learning disabilities, autism or both, family carers and staff, who shared their views on what's working well, what's not working and what needs to change in the future to ensure better services and better life opportunities.</li> <li>• <b>Engagement Sessions:</b> 12 Engagement Sessions were held with a total of 123 people attending. The sessions were attended by people with learning disabilities, autism or both; family carers and members of staff.</li> <li>• <b>Online Questionnaire:</b> Three questionnaires were created (one for people with learning disabilities, autism or both; one for family carers; one for members of staff). 145 people completed the online questionnaires (78 people with learning disabilities, autism or both; 45 family carers; 18 members of staff).</li> </ul> <p>The engagement was shaped around the four Doncaster Growing Together themes; Learning, Working, Living and Caring which translated into Education, Employment, Housing and Health; with people also given the opportunity to tell us about any other issues of importance to them.</p>

	<p>The materials used for this engagement were of Easy Read design and the sessions were spread across the Borough in a variety of settings, including Community locations, SMILE day services, Doncaster College etc. in order to include a cross section of the population, with reasonable adjustments being made to ensure accessibility and comfort for attendees during the sessions. Paper copies of the survey were also made available and a number were distributed to some of the venues where engagement sessions were held.</p> <p>During May 2019 two further face to face engagement sessions were held, providing people with the opportunity to tell us what they thought of the draft plan, particularly around whether the key principles and priorities are right. The initial engagement had identified 16 priority areas of work, with this further engagement asking people to vote for their top priorities.</p> <p>In addition to the engagement events we created an online questionnaire. In total we heard from 114 people; 53 People came to the events and 61 people had their say via the online questionnaire.</p> <p>The top 5 priority areas identified were</p> <ul style="list-style-type: none"> <li>• Diagnosis of Autism</li> <li>• Education and Inclusion</li> <li>• Employment</li> <li>• Family Carers</li> <li>• Housing and Support</li> </ul> <p>3 further areas of high importance were identified as cross-cutting themes that will be embedded and addressed by the 5 priority areas above:</p> <ul style="list-style-type: none"> <li>• Health Inequalities</li> <li>• Young People in Transitions (into Adult services)</li> <li>• Transforming Care Programme</li> </ul> <p>In addition to the above, CYP is consulting on the local Graduated Approach Nov 20- Feb 21. The webpage for the Graduated Approach has now gone live for consultation. It has been stressed in all training sessions that this is still under construction and undergoing an internal review.</p>
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	<p>The LD&amp;A Strategy and subsequent delivery plans recognise the 5 areas as the main key priorities along with the 3 cross-cutting themes. Of the remaining 8 work areas, 3 relate to client groups whose needs are addressed within the existing plans (older people, people with autism and people with complex needs). Short Breaks has already been incorporated into the Family Carers priority due to the natural linkages and overlaps, as is the Carer Strategy refresh. Day Opportunities in part is addressed via the Family Carers and Short Breaks work and within Education and Employment.</p> <p>Formal work on Early Help, Prevention and Health &amp; Wellbeing is yet to start however we will be reviewing where these areas are being addressed within other Council service areas e.g. Communities and Localities. This, along with regular engagement with local people and their representatives, will enable us to identify gaps in services and provision for people with a learning disability and/or autism.</p> <p>Following Cabinet agreement of the strategy, we plan to undertake a stocktake of progress so far, the existing plans, opportunities across the system to drive forward the learning disability and autism agenda, and develop a refreshed, timetabled programme of work, including data and information requirements (which incidently is one the remaining areas of work). As part of this programme of work we will also consider workforce development.</p> <p>In 2019, Members from the Health and Adult Social Care and Children and Young People Scrutiny Panels undertook three fact-finding meetings to contribute to the work being undertaken on the Strategy. This involved Members considering statistical information and work undertaken to date as well as attending the Learning Disability Partnehip Board and met with Carers and people with learning disabilities and autism. The panels made the following recommendations, which were sent as a letter to the Mayor:</p> <ol style="list-style-type: none"> <li>1. Investigate whether the Council could provide Supported Internships for people with learning disabilities and autism.</li> <li>2. Review the "Your Life Doncaster" system alongside people with learning disabilities or autism, who do not have a carer or immediate support.</li> </ol>
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	<ol style="list-style-type: none"> <li>3. Ensure that people with learning disabilities and autism have a single pathway of support developed.</li> <li>4. Highlight within the Strategy the frequency and severity of learning disability amongst people within the prison sector.</li> <li>5. Give consideration to writing to the Department for Work and Pensions asking for the requirement of people with a permanent disability, not to have to be reassessed on an annual basis when claiming PIP (Personal Independent Payment), but to make the award for a longer period.</li> <li>6. Ask service users what difference the Strategy has made to them specifically when applying for support, benefits, medical assistance and employment, once the Strategy has been agreed and embedded.</li> </ol> <p>Following this letter to the Mayor, the recommendations made by Scrutiny Panel were acknowledged and accepted by Councillor Blake.</p> <p>In 2021, Strategic Commissioning have been asked to produce a report, detailing how the recommendations have been addressed, ready for the 18<sup>th</sup> March Scrutiny Panel.</p> <p>People with learning disabilities and/or autism and their family/carers will continue to be engaged, checking in regularly to ensure all priorities are being considered and progressed appropriately.</p> <p>Both the Learning Disability Partnership Board and the Autism Partnership Board have continued to be updated about the progress being made on the priorities within the Strategy. The Boards have approved of the action plans proposed, have been able to pose questions of Officers and have been able to inform and influence work streams. The Partnership Boards have memberships made of local people with lived experience, family carers, Voluntary and Charity groups, professionals and other key stakeholders.</p> <p>Strategic Commissioners attend the Carers Action Group and Carers Strategic Oversight Group. For the Carers Action Group in particular, Carers (including those who were involved in the original engagement for the strategy) will be kept informed about progress and updates regarding</p>
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		<p>the priority areas. Carers will also be asked how they might want to be involved in the ongoing development and review of the strategy.</p> <p>In January 2021, Strategic Commissioning attended the Minorities Partnership Group to discuss the strategy and priority areas, and emerging inequalities specifically related to COVID-19. The Group advised the need to work more closely with communities to shape the work format moving forward. Agreed next actions will be to identify the communities most affected by COVID-19, understand the barriers these communities face when using or accessing services, and how this has been impacted by the COVID-19 pandemic to enable plans to be developed.</p> <p>As part of the strategy refresh, we will be developing and implementing a communication and engagement plan, ensuring people in Doncaster are kept informed and updated, and are able to get involved in the strategy.</p> <p><b>25<sup>th</sup> Feb 2021</b></p> <p>An Easy Read version of the Strategy has been developed, to increase access to more people. The Easy Read was developed by colleagues from Strategic Commissioning, Adult Social Care, and a person with lived experience. Inclusion North further developed the document, which was shared with people with lived experience who currently use services.</p> <p>Feedback from these groups was used to finalise the Easy Read document, a summary document and video, which will be placed on the Council's website Learning Disability and Autism pages.</p>
<b>5</b>	<p><b>Real Consideration:</b></p> <p><b>Summary of what the evidence shows and how has it been used</b></p>	<p><b>Population</b></p> <p>Doncaster has an estimated population of 7,700 people with a learning disability and around 3000 people with autism. The 2011 Census identified that 8.2% of the population was from the Black, Asian and Minority Ethnic (BAME) community and determines that the population is expected to grow by c1.2% by 2030.</p> <p>The growth rate will need to inform the development of services for people with LD&amp;A, and also recognise the ageing population, in the development of strategic planning, for example, Housing solutions to be 'future-proofed' to meet individuals changing needs.</p>

	<p>The number of Children under the age of 14 is expected to reduce by 5.45% over the next 10 years, while the number of people over the age of 75 years is expected to grow by more than 40%. In addition, the numbers of people diagnosed with Autism are increasing year on year. The impact of these growth rates will need to be factored into services now, and those in development for long term needs.</p> <p><b>Learning Disability and Autism specific needs</b></p> <p>The needs of people with LD and/or Autism are both addressed within the strategy, with recognition there are similarities and disparities between the broad groups, and that people's needs are often described in more than one group. Services and provision will be developed that need the broad needs of each group, e.g. employment support, housing needs; in addition to the individual needs each person has that takes account of age, level and complexity of need. The Needs Assessment provides additional information e.g. about how many people have complex needs, the proportion of people with Autism with or without learning disability. Individual, personalised assessment and care are therefore central principles applied to the development and delivery of provision.</p> <p><b>People from a Black, Asian &amp; Minority Ethnic background</b></p> <p>Based on the figures above, it is estimated that there are approximately 900 people in Doncaster from a BAME background and have a learning disability, autism or both, and that this number is also increasing. Further work with communities and public health is needed to understand the barriers and challenges that BAME communities may face when accessing services in Doncaster, and the changes that are needed to ensure their needs are met.</p> <p>Communications and engagement plans also need to reflect that people from BAME background have a representative voice and are involved within the development of the strategy plans and implementation, ensuring plans and responses are effective and appropriate to meet wide ranging needs and requirements.</p> <p><b>COVID-19</b></p> <p>Evidence from NHS England (referenced in Annex 1 – Doncaster All Age Learning Disability &amp; Autism Strategy) highlights that people with a learning disability and/or autism are a 3.6 times</p>
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	<p>more risk from dying of COVID-19 than the wider population. People from BAME groups are also identified at being at greater risk from COVID-19. It is unclear at this point what the combined risk is for people from a BAME background who also have a learning disability and/or autism.</p> <p>The refresh of the strategy has enabled us to consider the evidence and emerging health inequalities faced by people with learning disabilities and/or autism due to COVID-19, and exploring how health inequalities can be approached and addressed are now reflected and embedded into actions plans moving forward.</p> <p><b>Children and Young People</b></p> <p>The numbers of Children and Young People in Doncaster is expected to reduce over the next 10 years, although it appears the number of people (all ages) diagnosed with Autism appears to be increasing. The number of children with EHCP continues to increase year on year across Doncaster. Further information and data is needed to understand this possible disparity</p> <p>Evidence and narrative about the needs of CYP across each of the workstreams are included within the Understanding Needs section of the strategy, and included within Annex 1 attached. CYP, including Looked after children in transitions are key priority for housing and support, which is reflected in the Housing and Support plans; and within the Transforming Care programme.</p> <p>Progress of the Education and Inclusion and Employment plans are driven through the SEND programme , and described in the Education and Inclusion, and Employment summaries within the Learning Disability and Autism Strategy Document.</p> <p>The summaries reflect the SEND plans and the 6 Areas of Priority, which aim to ensure all children with Special Educational Needs have their needs met and any inequalities are being addressed.</p> <p><b>Priority 1</b> - To ensure that the graduated response to meeting special educational and disability needs is delivered coherently and consistently:</p>
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	<p><b>Priority 2</b> - Making sure that children and young people (CYP) with SEND with social emotional and mental health (SEMH) needs have their needs identified and met effectively in a timely manner so they can engage and make good progress, particularly in mainstream settings.</p> <p><b>Priority 3</b> - Ensuring that children and young people on the autism, attention deficit and other neurodevelopmental pathways have their needs identified and met in a consistently timely manner ASD.</p> <p><b>Priority 4:</b> Ensuring that Doncaster's secondary schools provide curricula and teaching that effectively meet the needs of students who have SEND so that they make good progress and are well prepared for their next stage in education and future employment</p> <p><b>Priority 5</b> -Improving pathways in employment for young people who have SEND so they are able to access suitable sustainable employment or supported employment</p> <p><b>Priority 6</b> - Improving the use of information to inform strategic planning and joint commissioning. The SEND priorities also align with the priorities agreed by people with lived experience during the initial engagement exercises listed above.</p> <p><b>Carers</b> National evidence and local Carer experience clearly determines that carers are providing more care now than even a year ago, with less access to support and respite than available before COVID-19. While services have opened where possible offering COVID-19 secure services, Carers have less access and choice of the services available to them. The Carer and Short breaks workstream plans aim to address these challenges.</p> <p><b>Overview and Scrutiny</b> Many of the recommendations by Members at Scrutiny Panel reflected the views and priorities of people with lived experienced identified during consultation and the actions as embedded within the strategy. Other recommendations are out of scope of the Strategy and reflect other work that is being progressed by partners.</p> <p>Responses to the recommendations are detailed in the report to the Overview and Scrutiny Panel dated 18<sup>th</sup> March 2021. &lt;insert link or citation&gt; ATTACH FOLLOWING MEETING</p>
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6	<b>Decision Making</b>	<p>An overview of the analysis and use of data associated with protected groups has been included in the strategy, the subsequent actions plans and next steps, and is included throughout the evidence base.</p> <p>A reference has been made to the Due Regard Statement within the Learning Disability/Autism Strategy Cabinet Report for 09th March 2021 ensuring Cabinet are fully aware of the steps taken so far and the plans to be implemented going forward to ensure that due regard is taken of the Equality Duty.</p>
7	<b>Monitoring and Review</b>	<p>A programme management approach will facilitate a safe, best practice introduction of new services prior to or alongside the rationalisation of existing services. The Due Regard Statement is a live document and as such should be regularly reviewed, revised and updated to ensure that due regard is taken at all points whilst the project is being implemented. The senior manager identified to sponsor the project will have overall responsibility for the due regard of service users. This manager will continuously monitor, through the care management team and commissioning managers assigned to the project the needs of service users and the services that have been deployed or commissioned to meet these needs.</p> <p>Progress against the Learning Disability/Autism Strategy will be assessed via ongoing monitoring of the Delivery Plans, which will be overseen by the respective Partnership Boards, the Carers Action Group, Carers Strategic Oversight Group and the Minorities Partnership Group. This process will ensure that Due Regard continues to be reviewed by people with lived experience, family/carers and key stakeholders. Progress is also reported through the Living Well Delivery Plan reporting system on Pentana and operational delivery is covered under the council's standard performance management framework.</p>
8	<b>Sign off and approval for publication</b>	<ul style="list-style-type: none"> <li><i>By signing this statement off as complete you are confirming that 'you' have examined sufficient information across all the protected groups and used that information to show due regard to the three aims of the general duty. This has informed the development of the activity.</i></li> </ul>

	<ul style="list-style-type: none"> <li><i>If this statement accompanies cabinet paper it will be published as part of the cabinet report publication process. Statements accompanying cabinet reports are also published on our website. If this statement is not to be submitted with a cabinet paper please maintain a copy for your own records that can be retrieved for internal review and also in case of future challenge.</i></li> </ul>
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Last updated: 24<sup>th</sup> February 2020, Andrew Buxton, Commissioning Officer, Strategic Commissioning





Doncaster  
Council



Doncaster  
Clinical Commissioning Group

# **Doncaster's All Age BIG Plan for People with Learning Disabilities and Autism (2021 – 2024)**




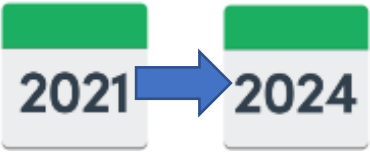
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## What is this information about?

	<p>This information is about the BIG plans that Doncaster Council, Doncaster Clinical Commissioning Group, people with a learning disability and/or autism and their families, community and voluntary groups have worked together on.</p>
	<p>Doncaster's BIG Plan will support the following people:</p> <ul style="list-style-type: none"> <li>✓ People with a learning disability</li> <li>✓ People with autism</li> <li>✓ People with a learning disability and autism.</li> </ul>
	<p>The people the BIG plan will support might:</p> <ul style="list-style-type: none"> <li>✓ Live with family</li> <li>✓ Live in supported living</li> <li>✓ Live in a care setting</li> <li>✓ Live on their own</li> </ul>
	<p>The BIG Plan aims to make sure people with a learning disability and/or autism live the best life they can and have the same opportunities as everyone else living in Doncaster.</p>

	<p>Doncaster's BIG Plan is for people of all ages:</p> <ul style="list-style-type: none"> <li>✓ Children</li> <li>✓ Young People</li> <li>✓ Adults</li> <li>✓ Older People</li> </ul>
	<p>The BIG Plan is for the 3 years between 2021 and 2024.</p>

## What people told us was important to them

  <p>Doncaster Council</p>  <p>Doncaster Clinical Commissioning Group</p> 	<p>People with a learning disability, autism and their families and carers helped to develop this BIG Plan with:</p> <ul style="list-style-type: none"> <li>• <b>Doncaster Council</b></li> <li>• <b>Doncaster NHS Clinical Commissioning Group</b></li> <li>• <b>Community groups</b></li> </ul>
	<p>People with a learning disability, autism and their families and carers were asked what is important to them.</p>
 	<p>Some people attended events organised by Speak Up and Inclusion North.</p> <p>Some people filled in questionnaires online.</p>



From the events held and the questionnaires returned, people told us that the following 5 things were the most important:



**1. Finding about whether someone is Autistic (Diagnosis)**



**2. Education and inclusion**



**3. Employment**



**4. Carers and short breaks**



**5. Housing and support**







There were other areas we needed to think about as well as the top 5 important things.




These were:

- ✓ **Health inequalities - making health services more equal**
- ✓ **Moving from children's services to adult services**
- ✓ **Transforming care – making care better.**



## Finding out whether someone is autistic (Diagnosis)






	<p>Some people are waiting too long to find out if they are autistic.</p>
	<p>No-one should wait longer than 18 weeks to find out if they are autistic.</p>
	<p>Finding out whether you are autistic will help to get you the right support.</p>
	<p><b>You told us ...</b></p> <ul style="list-style-type: none"> <li>✓ Finding out whether someone has autism is very important.</li> <li>✓ Having the right information is important.</li> <li>✓ Having the right support is important</li> <li>✓ You should not have to wait a long time.</li> <li>✓ Finding out whether you are autistic should be done close to home.</li> </ul>








	<p><b>What we have done...</b></p> <p>We have a plan to make better the way people find out if they are autistic.</p>
	<p>The plan also will help people to get the right support after finding out they are autistic.</p>
	<p><b>Our next steps.....</b></p> <p>We will be putting in place better plans for people to people find out whether they are autistic.</p>

## Education and Inclusion

	<p>Families are worried that people with a learning disability and/or autism might not get the right education or learning opportunities.</p>
	<p><b>You told us.....</b></p> <ul style="list-style-type: none"> <li>✓ Teachers need to understand the needs of children with a learning disability and/or autism.</li> <li>✓ More careers advice is needed to help people get a job.</li> <li>✓ More support to develop skills to become more independent.</li> <li>✓ More after school activities</li> <li>✓ Better transport to help children stay local.</li> <li>✓ Residential school is not good for some children</li> </ul>

	<p><b>What we have done...</b></p> <p>Doncaster's Children and Young People's services are working with teachers.</p> <p>This will help make children's experience of special schools better.</p>
	<p>Young people are being supported to have better employment and life skills as they grow up.</p>
	<p>There is a new special school for children and young people in Doncaster.</p> <p>The school is called <b>The Bader Academy</b></p>
	<p><b>Next steps...</b></p> <p>We will continue to make education better for people with a learning disability and/or autism.</p>
	<p>We want to make sure everyone gets a good education and help them to have a good future.</p>

## Employment





	<p>Having a job is important for people with a learning disability and/or autism.</p>
	<p>Sometimes it can be hard for people with a learning disability and/or autism to get the right support to get a job.</p>
  <p>Doncaster Council</p> 	<p><b>You told us...</b></p> <ul style="list-style-type: none"> <li>✓ Employers need to make reasonable adjustments to help people with a learning disability and/or autism get and keep a job.</li> <li>✓ A <b>reasonable adjustment</b> is a change that can be made so that people with a learning disability and/or autism can have the same opportunities as anyone else.</li> <li>✓ Both Doncaster Council and Doncaster Clinical Commissioning Group should employ more people with a learning disability and/or autism.</li> </ul>






	<p>✓ There needs to be more opportunities for people to get a job if they want one.</p>
	<p><b>What we have done...</b></p> <p>We have started a list of employment support in Doncaster.</p>
  Doncaster Council  Doncaster Clinical Commissioning Group	<p>We are looking at what opportunities there are for people with a learning disability and/or autism to work at <b>Doncaster Council</b> and <b>Doncaster Clinical Commissioning Group</b>.</p>
 	<p><b>Autism Plus</b> is now offering employment support online so that people can get support during COVID 19 pandemic.</p>
	<p><b>Next steps...</b></p> <p>Once our list of employment support is ready, we will share this with people.</p>






We are also asking people what other employment support they might need.

## Carers and short breaks







	<p>Some people with a learning disability and/or autism live with their family carers in the family home.</p>
	<p>Having a short break from a caring role helps carers.</p> <p>Usually, it is a planned break and not because of an emergency.</p>
	<p>Short breaks can give carers a rest to help them continue to be a carer.</p>
	<p><b>You told us.....</b></p> <ul style="list-style-type: none"> <li>✓ Carers wanted to be listened to.</li> <li>✓ Carers would like to be involved in work to make services better.</li> <li>✓ Carers said they would like to have <ul style="list-style-type: none"> <li>➤ <b>Choice</b></li> <li>➤ <b>Flexibility</b></li> <li>➤ <b>Availability</b></li> </ul> about short breaks.</li> </ul>






	<p><b>What we have done...</b></p> <p>Carers are represented at the Learning Disability Partnership Board and the Autism Partnership Board.</p>
	<p>Carers have more groups where they are listened to.</p>
	<p>Carers have helped to make a questionnaire about short breaks in Doncaster.</p>
	<p>Carers are involved in making services in Doncaster better for people with a learning disability and/or autism.</p>
	<p><b>Shared Lives</b> is a local service where people can stay with a family for a short time to give their family carer a break.</p> <p>We are looking at <b>Shared Lives</b> in Doncaster to make sure more people can use this service.</p>



	<p><b>Next steps...</b></p> <p>We will listen to Carers to make short breaks better in Doncaster.</p>
	<p>We will make sure the <b>Shared Lives</b> service can be used by more people.</p>
	<p>We will make sure services meet the needs of different groups and communities.</p>


## Housing and support

	<p>People with a learning disability and/or autism should have the right housing and support to meet their needs.</p>
	<p>People should be supported to have relationships and friends.</p>
	<p>We need to think about how we plan for Children when they move to Adult Services.</p>
  	<p><b>You told us...</b></p> <ul style="list-style-type: none"> <li>✓ Choosing where and who you live with is important.</li> <li>✓ Staff need to have the right skills and training to support you.</li> <li>✓ It is important to have choices and options about housing and support.</li> <li>✓ Young people should tell us where they would like to live in the future.</li> </ul>

	<ul style="list-style-type: none"> <li>✓ Young people should be asked if they are happy about where they live and who they live with during any assessment.</li> <li>✓ You should get good support to have relationships and friendships.</li> </ul>
	<p><b>What we have done...</b></p> <p>We have found out what housing and support people will need in the next 10 years.</p>
<p><b>2021 → 2031</b></p> 	<p>We have new supported living flats in Askern that will be ready in 2022.</p>
	<p>We have started to speak to young people about where they would like to live in the future.</p>
	<p>We have been working with Supported Living Providers to increase the use of technology.</p>

	<p><b>Next steps...</b></p> <p>We will work with Landlords to make sure we have the right housing for people.</p>
	<p>We will help people to access Council Housing.</p>
	<p>We will help people who want to live in Askern to move into the new supported living flats when they are ready.</p>


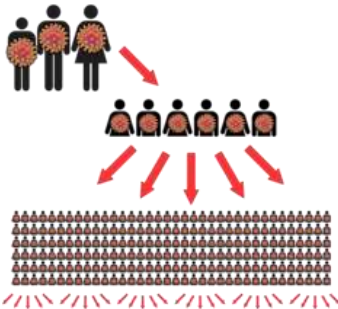

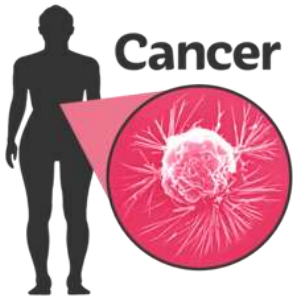

## The Learning Disability and Mortality Review (LeDeR)

	<p>The Learning Disabilities Death Review Programme is also known as LeDeR.</p>
	<p>The LeDeR Programme is trying to improve care and medical treatment so that people with a learning disability live longer and healthier lives.</p>
	<p>When people with a learning disability die, the LeDeR team check to see if things could have been done better for them.</p>
	<p><b>Next steps.....</b></p> <p>It is important for us to understand why people with a learning disability have died.</p>
	<p>This will help us to make services and health care better for the future</p>



People with learning disabilities will then enjoy long, happy and healthier lives.

## Coronavirus (COVID 19)

	<p>Coronavirus (COVID 19) is an illness that can make people feel poorly.</p>
	<p>Coronavirus (COVID 19) can be passed very easily from person to person.</p>
	<p>Some people with a learning disability are more likely to get more poorly than other people.</p>
	<p>This is even more likely if they have other health problems.</p>
	<p><b>Next steps.....</b></p> <p>We want to understand how we can help protect people with a learning disability or autism from Coronavirus (COVID 19).</p>







We want to make sure people with a learning disability and/or autism have the right information about Coronavirus and know how to keep themselves safe and healthy.













## Keeping in touch




 A woman and a man are shaking hands. Behind them is a white board with the word 'Plan' at the top. Below the word are three checkboxes; the first one is checked with a green mark.	<p>Some people have asked to be kept up to date, with the work we are doing.</p>
 A man is sitting and reading a newspaper.	<p>We are making plans about the best way for Doncaster Council to give you regular updates.</p>
 A man is looking through a magnifying glass.	<p>We also want to look at the ways for more people to be involved in our work and to tell us what they think.</p>

## What do these words mean





<p><b>The “All Age Plan”</b></p>	<p>The <b>All Age</b> plan in Doncaster is for all people of any age in Doncaster with learning disabilities and/or autism.</p>
<p>• <b>Children</b></p> 	<p>When the plan talks about children it is talking about 0-18 years old.</p>
<p>• <b>Young People</b></p> 	<p>When the plan talks about young people it is talking about people between the ages of 0-25 years old. (if they are in education).</p>
<p>• <b>Adults</b></p> 	<p>When the plan talks about Adults, this may mean people between 18 and 65 years of age (if they are not in education at 18).</p>
<p>• <b>Older people</b></p> 	<p>When the plan talks about older people it means people over 65 years of age.</p>

<p><b>Autistic People</b></p> 	<p>People who think and see the world in a different way.</p>
<p><b>People with a Learning disability</b></p> 	<p>This is when people find it hard to learn new things – and may need support in daily activities.</p>
<p><b>Health inequalities</b></p> 	<p>This is when health services are not provided to people with a learning disability and/or autism and they don't get the same equal treatment as other people.</p>
<p><b>Transition</b></p> 	<p>This is when a young person moves into adult services</p>
<p><b>Transforming Care</b></p> 	<p>How national organisations are working together to improve services for people with learning disabilities or on the autism spectrum and who is responsible for what.</p>

<p><b>Diagnosis</b></p> 	<p>Finding out about how our bodies are working.</p>
<p><b>Reasonable Adjustments</b></p> 	<p>A reasonable adjustment is a change that can be made so that people with a learning disability and/or autism can have the same opportunities as anyone else.</p>
<p><b>Family Carers</b></p> 	<p>Family Carers are members of the same family who may support someone with a learning disability and/or autism like Mum, Dad or Aunty or Uncle.</p>
<p><b>Carers</b></p> 	<p>Carers are usually paid for the support they provide someone with a learning disability and/or autism</p>
<p><b>Learning Disability Partnership Board</b></p> 	<p>Most local areas have a learning disability partnership Board. They are made up of people with a learning disability, family carers and other organisations – they make big decisions.</p>

	<p>You can find more about Doncaster's by contacting Julia King.</p>
<p><b>Autism Partnership Board</b></p> 	<p>Most local areas have a learning autism partnership Board. They are made up of people with autism, family carers and other organisations – they make big decisions.</p> <p>You can find more about Doncaster's by contacting Julia King.</p>
<p><b>Shared Lives</b></p>  	<p>Shared Lives offers people with a learning disability and/or autism the chance to live with an ordinary family. Sometimes for a short break and sometimes as a family home.</p>

## How to find out more

	<p>If you would like to find out more about Doncaster's All Age BIG Plan for People with Learning Disabilities and Autism you can contact:</p> <p><b>Julia King</b> who is a <b>Commissioning Manager</b> at <b>Doncaster Council</b></p>
	<p>If you want to contact by telephone, you can ring us on <b>01302 737316</b></p>
	<p>Or you can send an email to <b>julia.king@doncaster.gov.uk</b></p>
	<p>Or you can write to:</p> <p><b>Julia King</b> <b>Strategic Commissioning</b> <b>Public Health, Leisure and Strategic</b> <b>Commissioning</b> <b>Doncaster Council</b> <b>Civic Office</b> <b>Waterdale</b> <b>Doncaster</b> <b>DN1 3BU</b></p>

This BIG Plan was made with the pictures from the Photosymbols Picture Bank.





# Doncaster All Age Learning Disability and Autism Strategy

## 2021 / 24 Plan on a Page

### Our Vision

“We believe that children, young people and adults with a learning disability and/or autism have the right to the same opportunity as anyone else to live satisfying and valued lives, and to be treated with dignity and respect. They should have a home within their community, be able to develop and maintain relationships, and get the support they need to live healthy, safe and rewarding lives ”

### Our Approach

- To work in partnership across the health and care system.
- To work collaboratively with Voluntary, Community and Faith partners.
- To put the voice of people with lived experience at the centre of what we do.
- All developments are based on the needs of people with lived experience
- All developments are based on best available evidence
- Approaches are personalised, strengths based, and community focussed.
- To make sure all learning is captured, and reflected in delivery.

### Our Objectives

#### 1. Diagnosis of Autism

To reduce waiting times for diagnosis of Autism and Post – Diagnostic Pathways

#### 2. Education and Inclusion

To embed the Graduated Approach;

#### 3. Employment

People with LD&A have the right support access and maintain real employment opportunities.

#### 4. Carers and Short Breaks

To increase the availability and range of short breaks for Doncaster Carers

#### 5. Housing and Support

To ensure that there is a suitable range of accommodation & support based on peoples needs and preferences.

#### Cross Cutting Themes

##### 1. Health Inequalities

To improve health outcomes and reduce health inequalities for people with LD&A

##### 2. Transforming Care

Supporting people to live their best life in the community

##### 3. Transitions

To improve the experience of young people preparing for adulthood with a seamless transition into adulthood

### Our Next Steps

#### 1. Diagnosis of Autism

Increasing capacity of the Autism Diagnostic Service

#### 2. Education and Inclusion

Ensure secondary schools meet the needs of students who have SEND so that are well prepared for their next stage in education and future employment

#### 3. Employment

Make sure that the CYP Employment, Education, and Inclusion Plans work together. Complete the Employment Support mapping exercise, start plans to meet the gaps.

#### 4. Carers and Short Breaks

Review the outcomes of the Focus group and survey, recommendations to inform the Carers and Short Breaks plans

#### 5. Housing and Support

Set up a framework to source landlords / properties based on the needs of people with lived experience; start matching and preparing individuals to the new supported living apartments at Askern

#### Cross Cutting Priorities

##### 1. Health inequalities – COVID -19

Working partners, develop plans to engage with BAME communities to plan the response to COVID-19 inequalities for people with LD&A . Implement LeDeR outputs

##### 2. Transforming Care Programme

Continue to support people into community based accommodation and support based on their needs.

##### 3. Transitions

Continue to prioritise the needs of Young People across each work-stream above.

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