



Doncaster Council

Report

To the Chair and Members of Cabinet

Date: 9th March 2021

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

| Relevant Cabinet Member(s) | Wards Affected | Key Decision |
|-----------------------------------|-----------------------|---------------------|
| 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^{1 2} 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

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

www.gov.uk

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

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>Doncaster Working: 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"> • Better access to good fulfilling work • Doncaster businesses are supported to flourish • Inward Investment | <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>Doncaster Living: 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"> • The town centres are the beating heart of Doncaster • More people can live in a good quality, affordable home • Healthy and Vibrant Communities through Physical Activity and Sport • Everyone takes responsibility for keeping Doncaster Clean • Building on our cultural, artistic and sporting heritage | <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>Doncaster Learning: 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"> • Every child has life-changing learning experiences within and beyond school | <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"> • Many more great teachers work in Doncaster Schools that are good or better • Learning in Doncaster prepares young people for the world of work | |
| | <p>Doncaster Caring: Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> • Children have the best start in life • Vulnerable families and individuals have support from someone they trust • Older people can live well and independently in their own homes | <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>Connected Council:</p> <ul style="list-style-type: none"> • A modern, efficient and flexible workforce • Modern, accessible customer interactions • Operating within our resources and delivering value for money • A co-ordinated, whole person, whole life focus on the needs and aspirations of residents • Building community resilience and self-reliance by connecting community assets and strengths • Working with our partners and residents to provide effective leadership and governance | <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 7th 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