

## **Report to Health and Wellbeing Board**

### **Greater Manchester Learning Disability (GMLD) Action Plan**

The GMLD Action plan was launched in 2018 as one of GMCA's priority areas. Each Local Authority was asked to complete an action plan identifying key actions and improvement areas for the ten domains:

- Improving health and reducing health inequalities
- Reducing social isolation and belonging
- Improved Housing
- Increased employment opportunities
- Improved strategic leadership
- Bespoke commissioning
- Improved advocacy
- Improved transitions for people leaving Children's services and entering adulthood
- Improvements for people in the justice system
- Improved workforce

Each area on the Action Plan has a dedicated lead and has tried to implement the actions in order to successfully make a difference to the lives of people with a learning disability in Stockport. The action plan has continually evolved to reflect the changing demands and developments across the borough.

Inevitably, the impact of the Covid virus has had a huge impact on people with a learning disability, and has brought the issues of keeping healthy and reducing social isolation into sharp focus. The Valuing People Partnership Board, Senior Management Team and the Corporate Leadership Team have agreed that these two issues are the main areas to focus on at present, and whilst work will continue with all 10 domains, these are the priority.

### **Reducing Health Inequalities:**

It is widely recognised that the most important aspect of enabling someone with a learning disability to remain healthy is to ensure they access their Annual Health Check (AHC). This service should be available at all GP Surgeries and requires a thorough check of people's physical health. It is a Local Enhanced Service and GPs do receive a payment for every check undertaken. In Stockport, the CCG have funded a Primary Health Facilitator nurse post to drive the uptake of checks.

In Stockport in 2018/19, the percentage of people with a learning disability who had a health check was 42%. Our current uptake is 58.5%, which has gone up consistently year on year, but is not at the 75% uptake that NHSE have asked us to aim for.

The uptake percentage for the UK as a whole is 53%, and 25% of practices in Stockport scored above 75%, the overall figure is reduced by practices who are scoring 0%. Unfortunately, some practices are not completing any or very few annual health checks. It is not appropriate to identify them here, but this information can be made available. Seek the Board's support to continue to work with these practices to better understand why they are not completing them and what we can do to help them improve the numbers.

Inevitably, there are some statistical issues.

Some practices are not putting in their denominator figure every return which means that NHS Digital cannot give an uptake percentage. We are working to address this with practices.

Despite best efforts, there are still a number of reasons why meeting the 75% target is difficult including:

- In order for NHS digital to recognise that annual health check has been done, GP practices have to put in 3 different read codes. Some practices are not correctly coding the annual health checks that they did do, meaning that the work has been done but not counted in our uptake percentage.
- Many GP practices have not cleansed their registers from when their learning disability register was reviewed in 2018/19 and found that 22% of people on the register were incorrectly coded and should not be on the LD register as they had conditions such as dyslexia, dyspraxia, acquired brain injury, stroke, dementia or Asperger's. This means that the denominator figure is significantly higher than it should be which reduces our uptake as these patients do not need and will not come in for a learning disability annual health check.
- Some practices will not provide reasonable adjustments such as appointments at home for those who struggle to come in or wait in the waiting room due to their autism.
- Some practices are not promoting the annual health check or calling people in for their annual health check as per the DES.
- Some people with a learning disability simply do not want to come in for their annual health check-often because they perceive themselves to be healthy.

It is also important to note that although there challenges remain, the following has been achieved:

- The quality of the annual health check has improved in many cases.
- There has been learning disability awareness training

#### **Other Health Related issues:**

- Increased uptake of the flu jab and cancer screening for people with an LD.
- The Health Equalities Group, which has wide representation from health, social care, carers and providers, meets regularly and has a strong influence on shaping local practice

- The 'Transforming Care' work to ensure that people with a learning disability who are in long stay hospitals have discharge plans in place is on track and there is only one person still in hospital who is due to move out Spring 2021
- The Learning Disability Death Review (LeDeR) Steering group, chaired by the CCG, continues to assess what lessons can be learned from LeDeR Reviews to address any identified short comings

### **Reducing Social Isolation**

The impact of CV has resulted in the closure, or significant reduction, of many services that people with a learning disability have traditionally accessed including day services, leisure groups and access to short-term breaks. For many people and their carers, this has been extremely difficult and disruption to routines for some people has resulted in serious social isolation. Work has been done to maintain contact with people, and all vulnerable people have been given information about how to access support and help. Stockport Advocacy have been working hard to provide opportunities via zoom for people to 'connect' with others. This does require access to technology and digital poverty does present a challenge in some cases, although the local authority has provided tablets to some people who were not able to access kit. Some providers have also been extremely creative in their approaches to enable people to join in on calls. There is still a requirement for staff training and we are working with providers to ensure they are genuinely assisting people to make contact, albeit digitally, with others.

Day services and short-term breaks are re-opening, and despite several setbacks have been able to support some people back into their routines.

### **Other areas of the action plan:**

I do not intend to describe all the other actions-they are clear on the Action plan, but some achievements are listed below:

- Housing-SHG housing development of 12 apartments for people with LD opened in January 2020. Another development of 10 apartments opened September 2020
- Workforce-The LD provider group has been re-established and organisations can share good practice and hear a consistent message from the Council
- Employment-The Greater Manchester specialist employment service has launched resulting in increased employment opportunities for people with LD in the borough
- Preparation for Adulthood-Work on the local offer and EHCPs is underway and stronger links between education, health and social care are improving people's experience of the transitions pathway