







Update Report to Health and Wellbeing Board

LEDER ACTION PLAN (2020-22)

1. Introduction and purpose of report

Learning from Deaths Reviews (LeDeR) are now a core part of the quality of care oversight across Stockport when we monitor the care that has been provided to people with a learning disability. The monitoring of the LeDeR Action Plan is managed through the LeDeR governance group chaired by the CCG Executive Nurse. This report is distilled from the very detailed action plan and is provided to describe the themes, and the improvement work being undertaken to fulfil the requirements of LeDeR Action Plan for 2020-2022. Leder improvement processes like all other work streams have been impacted by the COVID 19 pandemic. The recovery of progress is now underway.

1.1 Introduction:

The recommendations from the completed LeDeR reviews in 2020-21 have informed the current LeDeR Action plan. The Leder action plan has been condensed into five main themes

- 1. Care pathways and documentation
- 2. Primary Care annual health checks
- 3. STOMP (Stopping over medication of people with a learning disability) and Medication
- 4. Staffing and Capacity
- 5. Learning and Training

These themes reflect the national drivers for change as follows:

- Best practice guidance,
- · Reducing Health inequalities,
- NHS Assurance Framework,
- NHS Long Term Plan
- NHSi Learning Disability Standards.







The LeDeR Governance Group and LeDeR Action plan subgroup meet regularly to measure outcomes. Representation on this group include key Service leads from Stockport Adult Social Care, Stockport Primary Care Services including a General Practitioner, Stockport Foundation Trust, Pennine Care Foundation Trust with representation from Learning Disability and Mental Health services, Quality lead (Adult Social Care), Stockport Advocacy, unpaid carers representing CALD (Carers of Adults with a Learning Disability), a carer with lived experience and Provider Service representatives.

2.0 Action Plan Themes

	Theme
1.	Care Pathways/Documentation
	 Completed actions that are 'Green' Learning from deaths reviews, 7-minute briefings to be circulated to disseminate where implementation of improvements will improve future care. 7-minute briefings to be approved by Leder Governance Group prior to sharing. Partially completed actions that are 'Amber' Improvements in Continuity of Care/Communication between residential Care staff, provider services and clinicians are required. Quality Assurance Framework led by Quality lead for Adult Social Care is currently in draft. Audit schedule for providers is compiled but needs to be implemented including how the health needs of people with a learning disability are being monitored. Attendance of key clinicians at provider forums planned to support Audit aims Completed MCA (Mental Capacity Act)/Best Interest documentation needs improving to reflect care plan decisions and care outcomes. QAP (Quality Assurance Partnership Group) a subgroup of the Stockport Adults Safeguarding Board is supporting this action by conducting a MCA (Mental Capacity Act) Audit via QAP with a focus on scrutiny of documentation for unwise decision making to support standardisation of practice. Carers Assessments need to be offered routinely with clear records to reflect if Carer has refused. Audit will be completed by Adult Social Care
2.	Primary Care/Annual Health Checks (AHC)
	 Partially completed actions that are 'Amber' People with a learning disability are not always receiving an Annual Health Check. The Health Equality Group are supporting the improved access to Health Checks Actions still needing further development that are 'Red'
	Accessible information not always available in line with the need for reasonable adjustments. CCG Primary Care business partners are supporting GP practices with accessible information.







3.	STOMP (Stopping over medication of people with a learning disability)/Medication
	Actions still needing further development that are 'Red'
	 Reviews of medication under STOMP are not routinely captured and the information is not routinely shared.
	Discussions with the learning disability Psychiatrist have been reinvigorated to improve the review process
	GP's to consider parity with general population in prescribing medications to slow down cognitive decline, learning disability Psychiatrist
	to present at GP masterclass
4.	Staffing/Capacity
	Partially completed actions that are 'Amber'
	 A Learning Disability liaison nurse post to be considered to address the needs and health inequalities of people who have Learning
	Disabilities who access Healthcare in Stockport.
	 Review of referral and allocation process within the Community Learning Disability Team (CLDT). A recovery plan is in place and has
	been agreed with service leads.
5.	Learning/Training
	Completed actions that are 'Green'
	 Accessible information and guidance around Constipation has been shared with key Services, Providers and carers
	 LeDeR presentation delivered to the care and nursing home forum to update Care Home staff about the LeDeR programme
	Partially completed actions that are 'Amber'
	Providers to ensure staff have undertaken medicines management training. Quality Assurance Framework to capture quantitative data.
	 Referral pathway for S</Dysphagia support from Community Learning Disability Team (CLDT) to be communicated wider.
	 Safe eating and drinking Training to be promoted. This can currently be accessed via ASC delivered by CLDT (Pennine). Quality
	Assurance Audit (Adult Social Care) will capture compliance when implemented (2022)
	 Improvements in the implementation and use of the Health Passports by Medication staff required. Awareness sessions in place
	including plans for lunch and learn sessions for staff at the FT
	Actions still needing further development that are 'Red'
	Not all staff in provider settings are aware how to interpret bowel patterns/output. Providers to provide assurances at commissioner
	quality reviews that are undertaken
	 Increased awareness around dementia and learning disability is needed. Lunch and learn sessions are planned for 2022.

3.0 Conclusion and Recommendations

The Leder Governance Group is committed to improving the experience of care for those with a learning disability through the above plan. However full participation from all parties is needed to achieve real progress. The reinvigoration of the Health Equality Group is seen as a key line of support for the changes needed.

3.1 The Health and Wellbeing board are asked to:

- Note the recovery position of the Action plan, and the continuance of the oversight by the Leder Governance Group.
- Note there is a system response required in order to effect the improvements needed.
- Note that a 2022-23 plan is in the process of being compiled that will incorporate any residual actions from this action plan.
- Advise when a further update is needed.

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