

NHS Highland



Meeting: Highland Health & Social Care Committee

Meeting date: 31st August 2022

Title: Learning Disability Services Assurance Report

Responsible Executive/Non-Executive: Louise Bussell, Chief Officer

Report Author: Arlene Johnstone, Head of Mental Health, Learning Disabilities and Drug & Alcohol Recovery Services

1 Purpose

This is presented to the Board for:

- Assurance

This report relates to a:

- Government policy/directive
- Local policy
- NHS Board/Integration Joint Board Strategy or Direction

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

This report relates to the following Corporate Objective(s)

Clinical and Care Excellence <ul style="list-style-type: none"> • Improving health • Keeping you safe • Innovating our care 	Partners in Care <ul style="list-style-type: none"> • Working in partnership • Listening and responding • Communicating well
A Great Place to Work <ul style="list-style-type: none"> • Growing talent • Leading by example 	Safe and Sustainable <ul style="list-style-type: none"> • Protecting our environment • In control

<ul style="list-style-type: none"> • Being inclusive • Learning from experience • Improving wellbeing 		<ul style="list-style-type: none"> • Well run 	
Other (please explain below)			

2 Report summary

1. SITUATION

- 1.1. This paper provides an update and summary of the current provision of health and social care to individuals with a learning disability in North Highland.

The Committee is asked to:

- Note the ongoing strategy development work.
- Be aware of the risks associated with the provision of support to individuals with complex needs and the recruitment and retention difficulties being experienced by the support sector.
- Note the recommendations from the Coming Home Implementation Report (Feb 22) and support NHS Highland's involvement in the national work.

2. KEY DRIVERS (Background)

- 2.1 The Scottish Government published the ***Learning / Intellectual Disability and Autism: Transformation Plan*** in March 2021. This plan brings together the aspirations detailed in the Keys to Life (2013) and the Scottish Strategy for Autism (2011) and “sets out to ensure that progress is made in transforming Scotland for autistic people and people with learning/intellectual disabilities.” <https://www.gov.scot/publications/learning-intellectual-disability-autism-towards-transformation/>

The purpose of the plan is to “*shape supports, services and attitudes to ensure that the human rights of autistic people and people with learning / intellectual disabilities are respected and protected and that they are empowered to live their lives, the same as everyone else.*” The plan identifies 31 Actions, detailed in Appendix 1.

- 2.2 NHS Highland staff actively participate in Scottish Government led initiatives to action the plan:

Action 17: “*The Scottish Government is also working with Healthcare Improvement Scotland (iHub) and H&SCPs on a learning/intellectual disability collaborative to maximise partnership working on community led solutions to new models of day support for people with learning/intellectual disabilities.*” NHS Highland successfully bid to participate in this work – Highland Resource Centre Managers, advocacy organisations and third sector partners participated in the working groups.

Action 5: “*... SLWG set up to improve delayed discharge and reduce inappropriate out of area placements for people with complex needs. The*

findings of this work will be reported on and published in the near future and mechanisms will be put in place to deliver on its recommendations.” Arlene Johnstone, Head of Service represented Social Work Scotland on the SLWG and contributed to the contents of the report.

“Coming Home Implementation: A report from the working group on complex care and delayed discharge” was published by the Scottish Government on 21st Feb 2022. The full report can be read here: [Coming Home Implementation: report from the Working Group on Complex Care and Delayed Discharge - gov.scot \(www.gov.scot\)](https://www.gov.scot/resources/consultation-papers/collections/documents/coming-home-implementation-report-from-the-working-group-on-complex-care-and-delayed-discharge.pdf). Further details relating to this report are discussed in section 6.

- 2.3 In 2018 the Health & Social Care Committee provided support to progress a Highland Learning Disability Strategy. This work has now been incorporated into the NHS Highland Strategy Development Work and will be included in the strategies as described in the table below:

NHS Highland Together We Care Strategy	
Responsible:	NHS Highland Board
Progress:	Final strategy imminent
North Highland Mental Health & Learning Disability Service Strategy	
Responsible:	Louise Bussell: Chief Officer NHSH,
Progress:	Engagement work led by Scottish Recovery Network underway. Ongoing discussions with People First and staff working within Learning Disability services to ensure people with a learning disability are included in engagement work. It is anticipated that the strategy will be in draft form, for further consultation, by the end of 2022.
Mental Health & Learning Disability Improvement & Transformation Plans	
Responsible:	Arlene Johnstone, Head of Mental Health, Learning Disability & Drug and Alcohol Recovery Services.
Progress:	Available for all Mental Health & Learning Disability services, however, currently transferring to the new workstream structure within the framework of the NHS Highland Annual Development Plan.

3. HIGHLAND DATA (Background)

- 3.1 The Scottish Learning Disability Observatory (<https://www.sldo.ac.uk>) identified from the Scottish Census in 2011 that 0.5% of people in Scotland have learning disabilities.
- 3.2 In 2020, to ensure regular contact with people with a learning disability throughout the pandemic an exercise was conducted by health and social care professionals to identify individuals known to NHS Highland specialist Learning Disability services or social work teams. This identified 1038 people with a learning disability known to services.

- 3.3 The Highland Learning Disability Service comprises support across both Health & Social Care:
- Team of 20 Community Learning Disability Nurses (based in localities)
 - Epilepsy Specialist Nurse (pan-Highland)
 - Specialist Allied Health Professional (AHP) team – Speech & Language Therapy, Occupational Therapy, Physiotherapy, Dietetics, Clinical Psychology (pan-Highland)
 - 2 Consultant Psychiatrists (pan-Highland)
 - Willows In-patient Nursing Staff Team – 6 Assessment & Treatment beds in New Craigs
 - 4 in-house Building Based Day Services: Inverness, Invergordon, Fort William, Thurso
 - 12 Commissioned or grant funded day services across Highland
 - 2 in-house housing support services: Inverness & Portree
 - Commissioned Social Care Support from Independent Support Providers in individuals own homes.
 - Housing solutions in cluster arrangements, shared living, or isolated tenancies.
 - Social Work Transition team

- 3.4 The budget is divided between the Mental Health and Community divisions and there is variation in the utilisation in “North & West” and “South & Mid”. The current recording of spend is complicated and therefore it is not possible to provide an accurate performance report across the multiple divisions and health and social care services. Support is provided by a range of agencies including the third and independent sectors.

The Adult Social Care budget is spent on the provision of direct support to people with a learning disability, in either their own home or an alternative setting (usually referred to as day care).

Diagram 1 shows the projected spend for 2022-2023. Total spend £34,682,351.

- Option 3 refers to the cost of support that is commissioned from independent sector support providers to provide care and support to people with a learning disability.
- Option 1 refers to the cost of budgets that individuals or their families have been allocated to purchase their own support (usually the employment of Personal Assistants)
- Housing Support refers to the cost of support that is commissioned from independent sector support providers to provide care and support to people with a learning disability. (Recorded differently from Option 3 for historical reasons relating to Scottish Government budget allocations).
- Option 2 refers to the cost of Individual Service Funds that individuals or their families have been allocated to purchase their own support options
- Day Care refers to the cost of in-house buildings-based day services or independent sector commissioned day services

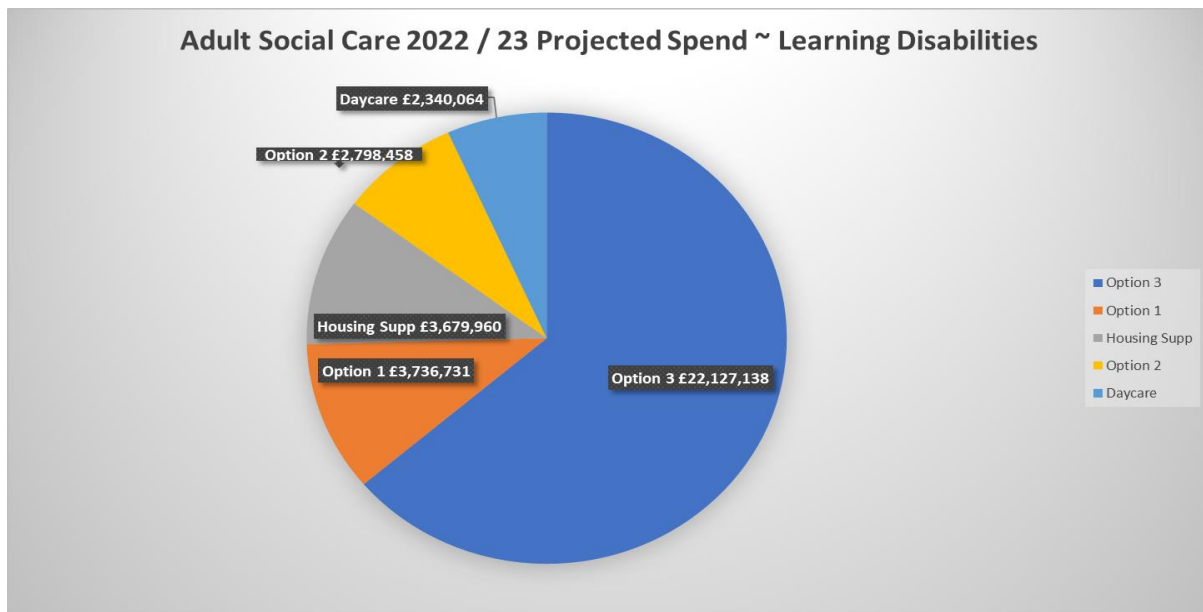


DIAGRAM 1. ADULT SOCIAL CARE PROJECTED SPEND 2022 / 2023

4. COVID RESPONSE (Background)

4.1 The Learning Disability Service responded quickly to the Covid pandemic and introduced a variety of different methods of attempting to ensure that health and social care professionals remained in contact with people with a learning disability throughout the pandemic. It was identified that some of these measures were very effective, and therefore continue to date:

- Contact a Learning Disability Professional Phone Line
- NHS Highland Learning Disabilities Facebook page updated regularly with Easy Read Information etc.
- Online activity sessions initiated.
- Highland LD Services You Tube channel
- RED meetings to provide advice to professionals or support providers as they identify people with a RED rag status. This has continued as a daily meeting and allows an immediate operational response to individuals in crisis.
- Daily Huddle for Support Providers & Specialist Care Homes (now weekly)

Day Centres significantly reduced provision (ie one / two people using building as a base to meet personal care needs or manage challenging behaviours). Staff were reassigned to deliver support in people's own homes or other roles.

4.2 The support to providers and changes to commissioning Learning Disability services in Highland were summarised in an I-hub insight piece, published on the national site in 2020. [PowerPoint Presentation \(ihub.scot\)](#)

4.3 The Community Learning Disability Nurse team provided vaccinations to individuals in an accessible clinic in the Corbett Centre and to those with complex needs in their own homes. They continue to work in partnership with the central vaccination team to ensure vaccines are accessible to all.

5. SUPPORT PROVISION (Assessment)

- 5.1 As shown in Diagram 1, most of the support provision received by people with a Learning Disability is commissioned via Option 3 and delivered by a support provider. NHS Highland has several specialist Learning Disability support providers on the framework:

Richmond Fellowship Scotland	Key
Thera Scotland	Gateway
Lifeways	Sense
Community Integrated Care	L'arche
Highland Home Carers	Gold

- 5.2 All support providers are inspected by the Care Inspectorate and the results are available online. Relationships with support providers are monitored via regular Contract Monitoring meetings. These meetings gather and discuss data regarding recruitment and retention, complaints and reportable incidents, quality of outcomes achieved and feedback from service users and their families. NHS Highland meet weekly with all providers to ensure timeous communication and escalation of concerns. ARC (Association of Real Change) facilitates a monthly providers meeting.

- 5.3.1 Agreement for the transformation of “traditional building based” day services was agreed by the Health & Social Care Committee in March and September 2018. Progress to new models was led slowly (to ensure alternative options were established and transitions were carefully planned, and person centred). The onset of the pandemic significantly impacted upon this work and the focus shifted to the provision of support to individuals in their own homes.

- 5.4 Further details of the day care provision is detailed in the previous papers. Provision is varied across Highland; a range of service models and commissioning arrangements are available:

IN House (NHSH) provision		
Thor House	Thurso	7 people with profound learning disabilities
Corbett Centre	Inverness	16 people in the building focusing on flexibility of model (outreach support in people's own homes now offered)
Isobel Rhind Centre	Invergordon	55 people focusing on employment activities and on-line support
Montrose Centre	Fort William	8 people focusing on employment activities
COMMISSIONED Support provision		
Kyleakin Connections	Skye	Block funded, focus on community participation
L'arche	Inverness	Block & spot funded, focus on employment activities
Nansen Highland	Muir of Ord	Block & spot funded, focus on young people and employment activities
Cantraybridge	Croy	Residential and day care. Focused on young people, rural & digital skills and employment
Clachbeg	Black Isle	Spot funded. Focus on rural skills.

Grigor House	Nairn	Spot funded, focused on day activities.
GROW Project	Inverness	Block funded, focus on gardening skills, qualifications, community participation and employment
Leonard Cheshire	Inverness	Residential and day service. Focused on individuals with physical and learning disabilities
Watermill	Croy	Spot / funded via individual's budgets. Cycle track, space for support.
Caberfeidh Horizons	Kingussie	Spot / funded via individual's budgets. Bookshop, Wombles, independent living.

- 5.5 In 2021 Highland participated in Healthcare Improvement Scotland Transformational Redesign Project: New Models for Learning Disability Support Collaborative. In-house resource centre managers, advocacy organisations, third sector providers and support providers all participated in the collaborative to support the design and redesign of models for the provision of support in Highland. The collaborative shared models of good practice and provided tools to review service delivery. Highland focused on the service provided in the in-house provision.
- 5.6 This work highlighted the NHS Highland assets:
- buildings (operated by NHH) with specialist equipment eg sensory rooms, touch screen computers, safe space
 - staff with additional training to meet the needs of individuals with profound and multiple learning disabilities, complex autism and behaviours perceived as challenging, with low turnover
 - a range of support providers e.g., Richmond Fellowship Scotland, Key, L'arche currently providing high quality support to individuals at other times in their lives
 - a varied range of opportunities developed by local people for local people with strong community links eg Kyleakin connections, Caberfeidh Horizons
 - a commitment to following through the expressed desires of people with a learning disability to achieve employment (in its broadest sense)
 - a commitment to supporting local opportunities
- 5.7 These assets have been maximised and space and / or support in in-house buildings-based resource centres is offered to individuals with profound and complex physical and / or behavioural difficulties in a very flexible model.

Activities offered are designed to meet the needs of clients with complex needs and aim to link with employment activities. For example: candle making in Isobel Rhind Centre, café in Fort William (that was recently celebrated for its work by Volunteer Scotland [Volunteer Friendly first for Fort cafe volunteers - The Oban Times](#))

Many individuals are also now able to access the resources available in building based resource centres with support from their own familiar care team, eg Personal Assistants or support workers employed by a support provider (not NHH).

NHS Highland resource centre staff are facilitating online group activities (open to a wider range of people than pre-pandemic), supporting people in community settings and teaching people skills in their own homes.

- 5.8 As Highland shifts to “living with Covid”, day services have evaluated the provision of support during Covid and are ensuring the most effective elements are included in the provision of support moving forward. There has been regular contact, both informally over the telephone and in the review process, with supported people and their carers throughout the pandemic and this feedback has informed the development of the virtual activity programme.

In December of 2021, people who received support from day services across Highland, and their carers, were invited to complete a short questionnaire asking them about their experiences since the onset of the current pandemic. It should be noted that there was limited response to questionnaires (29) and that additional engagement methods with stakeholders should be utilised to provide robust evaluation moving forward.

The following evaluation is based on the returned questionnaires:

- **Virtual and online groups** were generally viewed positively by supported persons. It was unclear from the returns, the views of carers. Staff delivering virtual groups, have noted that on the whole carers generally leave supported persons alone to participate in virtual activities, wherever possible. This may indicate these activities allow for some short-term respite from their caring responsibilities.
- **Provision of face-to-face support in own homes.** Although there was clear unhappiness regarding suspension of day services, questionnaires confirmed that day service staff had continued to provide support to individuals throughout the pandemic. Responses confirmed that supported persons were receiving support in a place they felt safe, primarily their own homes, and that this support had been positive for most individuals who had been in receipt of more 1:1 support, allowing them time to work on individual care and support needs such as bespoke physiotherapy routines, gaining skills such as cooking in their own homes etc.
- **Additional support.** From the twenty-nine responses available, twenty-one confirmed that they had received additional support from a range of paid providers and six recorded they had required additional support from families.

It is acknowledged that the service has only sought the views of those accessing in-house day provision. Further information about day activities is readily available and regularly shared from support providers but this has not been collated into one document.

To ensure the inclusion of people with a learning disability in the development of the strategy it is our intention to work in partnership with an independent third sector organisation with experience working with adults with a learning disability.

- 5.9 The ***Learning / Intellectual Disability and Autism: Transformation Plan*** clearly states that its purpose is to ensure the people with a learning disability are “*empowered to live their lives, the same as everyone else.*” Actions 20 and 21 identify the aspirations to halve the employment gap and ensure progress. Previous consultation events in Highland have evidenced that people with a Learning Disability in Highland would like to be in employment and they require support to achieve this.

To further progress this work the NHS Highland Learning Disability Service intends to establish an Employment Transformation Programme that will work in partnership with key stakeholders and shift resource from “traditional” support provision to finding opportunities for jobs and supporting people with a learning disability in places of employment.

6 INDIVIDUALS WITH COMPLEX NEEDS that are DELAYED IN HOSPITAL or in OUT OF AREA PLACEMENTS (Assessment)

- 6.1. “Coming Home Implementation: A report from the working group on complex care and delayed discharge” was published by the Scottish Government on 21st Feb 2022. The full report can be read here: [Coming Home Implementation: report from the Working Group on Complex Care and Delayed Discharge - gov.scot \(www.gov.scot\)](http://www.gov.scot/coming-home-implementation-report)

Recommendations include:

- A dynamic support register should be developed into a tool for national use
- A national support panel should be established in order to provide support and oversight of the dynamic support register
- A national peer support network should be established to facilitate people coming together to learn and share best practice
- Further work should be undertaken to explore the issues in relation to people with enduring mental health conditions who are subject to delayed discharge from hospital

The report also clearly states “by March 2024 we expect to have seen out of area residential placements and inappropriate hospital stays greatly reduced, to the point that out of area residential placements are only made through individual or family choice and people are only in hospital for as long as they require assessment and treatment”.

- 6.2 27 individuals with a Learning disability or Autism are placed in a range of residential settings out of our local authority area. 20 people are in Scotland, 6 in England and 1 in Northern Ireland.
- 6.3 There are 10 individuals with a Learning Disability and / or Autism diagnosis in hospitals out with Highland. 6 of these patients are receiving care at sites in Scotland and 4 further afield in England.
- 6.4 Highland has worked in partnership with Safe as Houses and Key (support provider) to develop a new cluster housing development for individuals with complex needs. Building work will, hopefully, be completed in the Autumn of 2022 and 6 tenants will move into their own homes in a phased manner in the winter of 2022. One individual is returning from a hospital in England, another is moving from New Craigs.
- 6.5 This is an area of risk within NHS Highland. The needs of each individual are highly complex and require staff teams that are highly committed, well trained and regularly

supported. Each individual requires high levels of care and support (for example 3:1 support provision 24 / 7), specific housing environments (for example two exits in each room, additional sound proofing) and regular contact with specialist health professionals.

- 6.6 Support providers are reporting increasing difficulties recruiting and retaining staff and are therefore less willing to agree to work together to create support packages for individuals with complex needs.
- 6.7 The difficulties in recruiting and retaining staff has led to providers being unable to create their own “staff bank”, this means that they are unable to provide crisis or short notice support in ways that they have in previous years. It is likely that will lead to an increase in requests for out of area placements or inappropriate hospital admission due to the lack of appropriate care and support in community settings.
- 6.8 To ensure that NHS Highland meet the aim of reducing out of area placements we will establish a Short Life Working Group to establish how Highland will participate in the national work and agree the actions required. NHS Highland has agreed to be a pilot site for the national register work.

7. HEALTH INEQUALITIES

- 7.1 It is well documented that people with a learning disability experience poorer health outcomes than the general population and die on average twenty years earlier than the rest of the population. Last year, new evidence was published by the Scottish Learning Disabilities Observatory that adults with learning disabilities are twice as likely to die from preventable illnesses.
- 7.2 The Scottish Government wrote to all Health Boards on the 14th June 2022 with a direction: The Annual Health Check for People with Learning Disabilities (Scotland) Directions 2022 (“the Directions”), which provide a duty on Health Boards to provide Annual Health Checks to all people in Scotland aged 16 and over who have learning disabilities, using the Scottish Health Check for Adults with Learning Disabilities. Annual Health Check for People with Learning Disabilities
- 7.3 NHS Highland are awaiting confirmation of funding and are working on an options appraisal exploring options for delivery.

2.4 Proposed level of Assurance

This report proposes the following level of assurance:

Substantial
Limited

Moderate
None

X

3 Impact Analysis

3.1 Quality/ Patient Care

Support individuals to remain in their local communities and participate in meaningful activities.

3.2 Workforce

Current concerns regarding support providers ability to recruit and retain staff

3.3 Financial

Additional costs to provide support to individuals with complex needs is acknowledged. Scottish Government has provided funding to support model changes and fund double running costs etc.

3.4 Risk Assessment/Management

Risk of inability to provide support as required to individuals with complex needs. Management plan: to set up SLWG to increase partnership working and explore innovative options.

Risk of increased number of people placed out of area or inappropriately admitted to hospital. Management plan: as above

3.5 Data Protection

State whether the proposed piece of work or project involves personally identifiable information (including but not limited to patient, staff, service use, volunteer, NOK)?

If so, confirm whether advice has been sought from the Data Protection Team to ensure the correct risks have been considered and documentation completed.

Register work (for both health checks and individuals with complex needs) will involve liaison with Data Protection Teams.

3.6 Equality and Diversity, including health inequalities

Supports Board Equalities Outcomes by tackling health inequalities.

An impact assessment has not yet been completed.

3.7 Other impacts

Service changes have the potential to impact on carers.

3.8 Communication, involvement, engagement and consultation

Every person with a learning disability receiving support has a regular review (at least annually, often 6 monthly).

Participation in support providers monthly meetings.

Feedback is received from Advocacy organisations – People First and TAG

3.9 Route to the Meeting

Mental Health SMT 15.08.22

4 Recommendation

- Note the ongoing strategy development work.
- Be aware and discuss the risks associated with the provision of support to individuals with complex needs and the recruitment and retention difficulties being experienced by the support sector.
- Note the recommendations from the Coming Home Implementation Report (Feb 22) and support NHS Highland's involvement in the national work.
- Note the direction relating to the provision of annual health checks to all people with a learning disability in Highland.

4.1 List of appendices

The following appendices are included with this report:

- **Appendix No 1: Learning / Intellectual Disability and Autism: Transformation Plan: Summary of Actions**

APPENDIX NO 1.

Learning / Intellectual Disability and Autism: Transformation Plan: Summary of Actions

Action No:	HUMAN RIGHTS
1	The Scottish Government is clear that the needs of autistic people and people with learning/intellectual disabilities and their carers are to be actively considered as part of the ongoing independent review of the Mental Health Act. This legislative reform work will help inform the shape of our future legislation.
2	The Scottish Government will explore further the proposals for a commission or commissioner to help protect people's rights.
	BOTH LEARNING/INTELLECTUAL DISABILITY AND AUTISM
3	The delivery of the Mental Health Transition and Recovery Plan will support improvement in population-level mental health services. We will explore how these services can better meet the needs of autistic people and people with a learning/intellectual disability.
6	We will pilot a Nurse/AHP Consultant for Autism and learning/intellectual disabilities (learning from best practice from Alzheimer's Scotland Nurse Consultants) aimed at improving both mental health and hospital care of autistic people and people with learning/intellectual disabilities.
10	We and our partners have established a Gender Based Violence Steering Group and will develop an action plan to reduce incidence of violence and empower women with learning/intellectual disabilities and autistic women to have safe and loving relationships.
12	We will explore establishing: A - mandatory autism training for all NHS staff. B - mandatory learning/intellectual disability training for all NHS staff.
15	The Scottish Government will ensure that people with lived experience are listened to and better supported to initiate and influence programmes and initiatives which

	will impact on their lives. We want to ensure that those voices are part of discussions from the outset. This will include helping to support engagement with the issues set out in the review of adult social care, the Social Renewal Advisory Board and National Taskforce on Human Rights. This provides opportunities to ensure that social care reform and the transformation of social care services are focussed on reducing inequalities and better meet the needs of our population.
16	The Scottish Government continues to work with Inspiring Scotland 'Support in the Right Direction' and other partners to ensure that more autistic people and people with learning/intellectual disabilities access their rights under the Social Work (Self Directed Support) (Scotland) Act 2013 to direct their own support.
17	In May 2020, the Scottish Government, Social Work Scotland and COSLA produced COVID-19: Guidance on Self-Directed Support Option 1 and Option 2. The guidance is for Local Authority and Health and Social Care Partnership staff who assess, approve and administer social work and social care and support (including carer support), and approve Self-directed Support (SDS) budgets and is relevant only for the duration of the COVID-19 pandemic period. It aims to support local social care systems and services to continue to respond appropriately and flexibly, to enable service users to meet their outcomes during the pandemic. We will work with partners and individuals to understand the impact of this change. The Scottish Government is also working with Healthcare Improvement Scotland (iHub) and H&SCPs on a learning/intellectual disability collaborative to maximise partnership working on community led solutions to new models of day support for people with learning/intellectual disabilities.
18	The Scottish Government has launched a national carers marketing campaign to help more people recognise when they are in a caring role and to access the support available under the Carers (Scotland) Act 2016. We will help make sure that people know about this support.
19	The Scottish Government will explore asset based community development models to create better outcomes for autistic people and/or people who have learning/intellectual disabilities and their family carers.
20	The Scottish Government will continue to work towards our ambition to at least halve the disability employment gap as stated in A Fairer Scotland for Disabled People and A Fairer Scotland for Disabled People: Employment Action Plan .
21	The Scottish Government will ensure that the voices of autistic people and people with learning/intellectual disabilities are heard and a meaningful and important part of the decision making in the review of supported employment provision across Scotland. Supported Employment plays an important part in helping people into work who would otherwise struggle to gain employment in the open labour market. As such, it is a model that can make an important contribution to the ambition to at least halve the disability employment gap in Scotland, and will be more important than ever as part of our COVID-19 recovery efforts. The review is taking place in the first quarter of 2021 with the final report due in the summer of 2021.
22	The Scottish Government and COSLA will work with partners to support the implementation of the action plan on the recommendations of the Additional Support for Learning Review , improving educational experiences and outcomes for all children and young people who need support with their learning.
24	We will build better learning/intellectual disability understanding by promoting the Talking about Learning Disability resources through the General Teaching Council and Association of Directors of Education in Scotland.
25	The Scottish Government will work to develop meaningful Additional Support for Learning outcome measures which capture indicators of the achievements and progress of autistic children and/or children who have learning/intellectual disabilities beyond solely academic and destination data.

26	The Scottish Government will produce new standalone guidance on the use of physical intervention and seclusion in Scotland's schools. This will provide a clear human rights based policy on physical intervention and seclusion and will be presented as part of the Included, Engaged and Involved suite of guidance. We will also introduce a standard data set and oversee subsequent implementation, including a review one year from publication of the revised guidance to ensure its effectiveness.
27	As part of our joint action plan in response to the Additional Support for Learning implementation review, we will explore how to support more parents to have access to the information, skills, support and advocacy they need to be active and equal participants in their child's education.
28	A - We will improve digital access for people with learning/intellectual disabilities so that they can stay connected to their friends, family, and communities. B - We will improve digital access for autistic people so that they can stay connected to their friends, family, and communities.
31	In partnership with Inspiring Scotland and the Scottish Commission for people with Learning Disabilities (SCLD), we will encourage people with lived experience to participate in a Future Leaders Programme to empower people to be active and involved in their own community. We also want to support self-advocacy initiatives like the National Involvement Network, autistic led charities and organisations, People First and the People's Assembly.
32	The Scottish Government will take specific action to engage with autistic people and also people with a learning/intellectual disability from Black, Asian and Minority Ethnic Communities to hear about their experiences and identify how we can best support and work with them.
	LEARNING/INTELLECTUAL DISABILITY
4	We will promote the Mental Health resources being developed by PAMIS to better support people with Profound and multiple learning disability (PMLD) to explore their emotions and a resource developed by Glasgow University to better support people with learning/intellectual disabilities to cope with anxiety.
5	We will ensure that the recommendations of the Coming Home Report are fully considered in the implementation of the work of the SLWG set up to improve delayed discharge and reduce inappropriate out of area placements for people with complex needs. The findings of this work will be reported on and published in the near future and mechanisms will be put in place to deliver on its recommendations.
7	We will work with the Scottish Learning Disability Observatory to further understand health inequalities and to identify specific predictors of mortality and actions that will improve health outcomes for people with learning/intellectual disabilities of all ages.
8	The Scottish Government, Aberdeenshire Health & Social Care Partnership and partners will take forward a pilot of health checks for people with learning/intellectual disabilities to address health inequalities and early deaths.
9	The Scottish Government and partners including NHS Boards, the Scottish Commission for people with Learning Disability and the Scottish Learning Disability Observatory will deliver improvements in data collection and access to data to improve the visibility of these populations and consider the development of a Key Performance Indicator to monitor improvements.
29	In partnership with the Scottish Commission for people with Learning Disabilities (SCLD) and People First we will build on the Covid-19 experience of providing access to accessible information. This will include using SCLD's website as an accessible information hub and linking into Disability Equality Scotland's Inclusive Communication Hub.
	AUTISM

11	We will continue to work with the National Autism Improvement Team (NAIT) to support autism and ADHD diagnostic services through improvement practice and explore with Healthcare Improvement Scotland (HIS) the development of a Key Performance Indicator to monitor diagnostic services across Scotland.
13	As committed to in the Programme for Government we will deliver a 6 month pilot national post diagnostic support service for autistic people from December 2020. We will work collaboratively with national autism charities, autistic led charities and organisations and evaluate the outcomes of the pilot post May 2021.
14	We will explore the barriers to autistic people living a healthier life.
23	We will action the Deputy First Minister's Working Group Implementation Plan following the <u>Not Included, Not Engaged, Not involved Report</u> . This will include building better autism understanding in Initial Teacher Education, working with the General Teaching Council Scotland and Universities to develop training resources and deliver training in autism to all trainee teachers.
30	We want to empower people to have their voices heard as active citizens. Our new autism campaign – <u>Different minds. One Scotland.</u> – is part of trying to change the way that autistic people are understood and was built on early and successful involvement from autistic people. We will continue our work on this.

DRAFT