**Health Stones 5**

UK Health and Learning Disability Network

For information, queries and to contribute to FPLD health stones contact

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Please copy me into any replies.

Thanks

Janet

1. **IMHA in LONDON**

Can you let us know which Independent Mental Health Advocacy services (IMHA) in London offer services to those with a learning disability

I know that technically they all should if the individual meets the criteria but we are asking for named services in London specifically.

[debbie.robinson@kaleido-scope.org.uk](mailto:debbie.robinson@kaleido-scope.org.uk)

1. **Reviewing the Community Learning Disability Teams**

I am in the process of reviewing the Community Learning Disability Teams that we commission and wanted to ask other members of your network whether they have undertaken similar reviews and are happy to share their process and findings.

As part of the review I am also hoping to look at CLDT's which have evolved from the traditional model of how CLDT's work to working in more innovative ways.

Would welcome people getting in touch.

*Martin Ayres*

*Senior commissioning manager for LD services for Gloucestershire Clinical Commissioning Group.*

[*martinayres@nhs.net*](mailto:martinayres@nhs.net)

1. **Offenders with Learning Disabilities - Is the Criminal Justice System Failing our Autistic Community?**

I am an undergraduate student at the university of Bedfordshire, currently studying my third year in a Criminology and Sociology Hons Degree.

I am currently writing my dissertation and I have chosen a secondary research literature review.

The title of my dissertation is *Offenders with Learning Disabilities - Is the Criminal Justice System Failing our Autistic Community?*

I am constructing a literature review of current research and studies to form a reasonable debate surrounding the services available and processes for offenders who have autism and a learning disability.

When I have completed my dissertation I would very much like to use the research from my project across networks, helping give information to people who are involved in this area or are interested in it.

Claire Nicholson

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1. **Inter disciplinary/interservice care plans**

We are a multidisciplinary team and are looking at ways to effectively document interdisciplinary care plans so that all profession specific care plans are presented as an integrated document. We have approached some other services to see what they are using and have found this is a common theme.  Does anyone have a format that they would be willing to share?

Louise Gannon

Community Learning Disability Nurse, Specialist Practitioner

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1. **Learning Disability Census: new analysis including anti-psychotic medication use and physical 'incidents' for inpatients**

<http://www.hscic.gov.uk/article/4731/Learning-Disability-Census-new-analysis-including-anti-psychotic-medication-use-and-physical-incidents-for-inpatients>

*Summary*

This report presents further findings from the 2013 Learning Disabilities Census, following an initial report published on the 13 December 2013. The principal aim of the Census was to deliver action 17 in ‘Transforming Care: A national response to Winterbourne View Hospital - “an audit of current services for people with challenging behaviour to take a snapshot of provision, numbers of out of area placements and lengths of stay”.

The Learning Disabilities Census was collected on the 30 September 2013, providing an individual record level snapshot of inpatients in receipt of treatment from NHS and independent learning disability service providers on that day. This patient group comprises those with learning disabilities, autistic spectrum disorder and/or behaviour that challenges. Data were collected via the Health and Social Care Information Centre (HSCIC) on behalf of the Department of Health, the Care Quality Commission, Public Health England and NHS England.

This report contains information relating to patient experience of care including drug administration, incidents, ward accommodation, uses of the Mental Health Act (1983), and information on the commissioning and provision of learning disability services including costs and care planning. It also provides more detailed information on a geographical basis and additional service user profile information.

*Key facts*

* Survey responses were received from 104 provider organisations on behalf of 3,250 service users who met the inclusion criteria for the 2013 Learning Disabilities Census.
* Over two thirds of service users (68.3 per cent or 2,220) had been given major tranquiliser class drugs leading up to Census day. Of these, 93.0 per cent (2,064) had been given them on a regular basis.
* Over half of the service users (56.6 per cent or 1,841) had been the subject of at least one incident involving self-harm, an accident, physical assault on the service user, hands-on restraint or seclusion during the three months preceding the Census. Proportionally, more females experienced every type of incident than males. There appears to be an association between hands-on restraint and the administration of major tranquiliser class drugs; 40.4 per cent (889) of the 2,220 given these drugs had experienced at least one instance of hands-on restraint compared to 21.4 per cent (221) of the 1,030 who were not given any of this medication.
* Almost half of service users (46.4 per cent or 1,508 people) were in receipt of an active care plan without a discharge plan in place. Around 1 in 20 service users (4.7 per cent or 152 people) were experiencing a delayed transfer of care.
* Almost four fifths of service users (78.0 per cent or 2,536) were subject to the Mental Health Act 1983 on Census day, compared with 22.0 per cent (714 people) who were classed as informal patients. Of those subject to The Act, the majority (99.5 per cent or 2,524) were subject to ‘longer term hospital orders’ (with a duration of greater than 72 hours).
* Care for the majority (86.0 per cent or 2,795 people) of service users cost between an estimated £1,500 and £4,499 per week, with the highest proportion (37.9 per cent or 1,231 people) being in the £2,500-£3499 range. For 11.4 per cent (369 people), care provision was reported to have cost over £4,500 per week per person. Almost a fifth (19.6 per cent or 112) of service users staying 100km or more from home were in high cost placements (over £4,500 per week). By contrast over a third of service users (34.0 per cent or 208) staying within 10km of home1 were in placements costing under £2,500 per week.

1. **IHaL Making reasonable adjustments to primary care services: supporting the implementation of annual health checks for people with learning disabilities**

<http://www.improvinghealthandlives.org.uk/publications/1224/Making_reasonable_adjustments_to_primary_care_services:_supporting_the_implementation_of_annual_health_checks_for_people_with_learning_disabilities>

**IHaL Health Checks Factsheets**

IHaL have written three fact sheets on health checks:

* Health checks: identifying health issues in people with behaviour that challenges
* The effectiveness of health checks for people with learning disabilities
* What makes health checks for people with learning disabilities work better

They can be downloaded from: [www.improvinghealthandlives.org.uk/projects/annualhealthchecks/detail](http://www.improvinghealthandlives.org.uk/projects/annualhealthchecks/detail)

IHaL have also written a report on the reasonable adjustments primary care can make to support the implementation of health checks.

The report can be accessed from the above link or from: [www.improvinghealthandlives.org.uk/publications/1224/Making\_reasonable\_adjustments\_to\_primary\_care\_services:\_supporting\_the\_implementation\_of\_annual\_health\_checks\_for\_people\_with\_learning\_disabilities](http://www.improvinghealthandlives.org.uk/publications/1224/Making_reasonable_adjustments_to_primary_care_services:_supporting_the_implementation_of_annual_health_checks_for_people_with_learning_disabilities)

1. **Prevalence of Autism with Learning Disabilities**

<http://www.improvinghealthandlives.org.uk/projects/autism>

1. **Prison Reform Trust - Punishment without purpose**

<http://www.ldhealthnetwork.org.uk/docs/punt.pdf>

The Incentives and Earned Privileges (IEP) scheme and its impact on fairness, decency and rehabilitation behind bars

April 2014

<http://www.prisonreformtrust.org.uk/PressPolicy/News/vw/1/ItemID/213>

1. **Personal health budgets: Guide for GPs**

<http://www.ldhealthnetwork.org.uk/docs/guigp.pdf>

further information

<http://www.peoplehub.org.uk/>

1. **Outcomes assessment for people with long-term neurological conditions: a qualitative approach to developing and testing a checklist in integrated care**

<http://www.journalslibrary.nihr.ac.uk/hsdr/volume-2/issue-9>

1. **Sensory stories**

<http://jo.element42.org/sensory-stories>

1. **Better care for people with 2 or more long term conditions**

<https://www.gov.uk/government/publications/better-care-for-people-with-2-or-more-long-term-conditions>

1. **Quiet Riot**

<http://www.ldhealthnetwork.org.uk/docs/riot.pdf>

1. **News of a forthcoming call for funding applications from the Foundation for Nursing Studies**

<http://www.fons.org/>

Patients First is on its way

<http://fons.org/programmes/patients-first.aspx>  
Patients First is a fantastic development opportunity for nurse, midwife or health visitor led teams to improve care and put patients at the centre of their practice. The call for applications will open soon, but now is the time to start having conversations with patients, colleagues and managers about what you are thinking of doing. Our current projects and completed project reports make excellent reading and may inspire you to apply.

*Professor Ruth Northway*

[*ruth.northway@southwales.ac.uk*](mailto:ruth.northway@southwales.ac.uk)

1. **New easy read/accessible information service**

Making it Clear is an organisation on a mission: to encourage more easy to understand information, and less of the complex information that makes all our lives harder. Making it Clear offers services in easy read, plain English and easy read training. It was set up by Estelle Bloom, who managed accessible communications at Mencap. Estelle has worked with people with learning disabilities for many years, and has seen how accessible information can make the difference for many between being left out and being able to engage and make choices.

For more information about Making it Clear visit

[www.makingitclearuk.com](http://www.makingitclearuk.com), email [info@makingitclearuk.com](mailto:info@makingitclearuk.com) or phone 07804 542104

1. **Mencap Getting It Right - From The Start**

<http://www.mencap.org.uk/what-we-do/our-projects/getting-it-right-start>

1. **QUOTE OF THE MONTH**

*'Jesus invented the Big Society 2,000 years ago... I just want to see more of it.'*

Prime Minister David Cameron claiming [divine inspiration](http://www.crimeandjustice.org.uk/sites/all/modules/civicrm/extern/url.php?u=986&qid=83693) was at work when drafting the key concept behind Conservative Party policy. The Christian spirit did not end there for the Prime Minister who later called for Britain to be unashamedly '[evangelical](http://www.crimeandjustice.org.uk/sites/all/modules/civicrm/extern/url.php?u=995&qid=83693)' and described it as a Christian country.

While the Prime Minister was 'doing God', [The Independent](http://www.crimeandjustice.org.uk/sites/all/modules/civicrm/extern/url.php?u=994&qid=83693) was just one of a number of papers to report that the Bishop of Oxford was turned away from Mr Cameron's constituency office when he tried to deliver a letter on poverty. Commenting on this apparent stonewalling the Bishop, the Rt Revd John Pritchard, said:

*'It is deeply ironic, to say the least, that on the same day David Cameron was writing in the Church Times talking about what a good Anglican he is, he was wasn’t able to receive his own bishop in his constituency office. I think this speaks volumes.'*