Widening Choice and Opportunities

Contents

Part 1 - Ten things we want to make happen 1
Part 2 - Supporting Detail for the Strategy 17
Section 1 - Services for People with a Learning Disability 18
Section 2 - Vision and Priorities 23
Section 3 - Present Provision in Outline 28
Section 4 - Community-based Services 33
Section 5 - Modernisation of Adult Centres 46
Section 6 - Programme of Action 53
Part 1
Ten things we want to make happen
Ten things we want to make happen

This is a plan for people who have a learning disability. It is also a plan that will help carers feel more supported.

It’s for people who get services from the Northern Trust. But to make the plan happen, the Trust needs to work with others so that they play their part too.

It’s about how people could have more choices of things to do during the day, at evenings and weekends.

It is based on what people told us when we asked them what should be in the plan - people who attend schools and centres; carers; Trust staff and people working in other services.

The ten things that the Northern Trust will do in the next five years are:

1) We will listen to people.
2) We will encourage people to speak up.
3) We will set up local planning groups.
4) We will support people to find more work opportunities.
5) We will support people to learn new skills.
6) We will create opportunities for people to meet and to make friends.
7) We will improve the Trust’s Adult Centres.
8) We will give extra support to people who require it.
9) We will give people the money to buy their own services.
10) We will develop our staff for new support roles.

This part tells you some more about each action. It ends by saying how carers will get more support.

Part 2 gives the reasons why these ten things were chosen. It also gives more details about how they might come about.

1. We will listen to people

We will meet with each person and listen to what they want to do and talk about the support they need. We will draw up a plan for what each person wants to do. Family carers will be involved in this.

We will also listen to the support needs of family carers and, if needed, a separate plan will be drawn up for them.

In 2007, we will start to do this with:

- Teenagers aged 14 years onwards when they are still at school.
- People attending Centres who are aged 19 years to 25 years.
- People attending Adult Centres or Day Centres but who have told us that they would like to do other things.

Each person will have a ‘lead person’ who will be responsible for drawing up the plan and making sure it starts to happen. These plans will bring together all the different plans that Trust staff make at present. Each person’s plan will be reviewed every year.

Each year the Trust will report on the number of plans that have been drawn up. The lead workers will report on the goals achieved and those that were not achieved, for example, the numbers of people on waiting lists for support services.

From 2009 onwards we will do this planning with everyone who uses our services.

Action steps to make this happen

- A Trust officer will be designated with responsibility for this action.
- Lead persons will be appointed for individuals in the three groups named above: they will be mostly teachers, social workers, adult centre or day opportunities staff.
- A trial format will be agreed for person-centred planning and reporting system.
- Staff will be trained in use of these planning tools as will carers, if they wish.
- Clear pathways will be developed to assist people in transition.

1 This plan does not cover respite services, supported accommodation or specialist assessment and treatment services provided by the Trust. Information on these services can be obtained from Trust officials based at Spruce House, Cushendall Road, Ballymena.

2 Different Trust officers could take responsibility for each theme.
2. We will encourage people to speak up

We will support people to come together in advocacy groups. This should happen in schools and adult centres but also advocacy groups could be locality based and open to everyone who lives in an area.

We will also support advocacy groups for carers.

The Trust will fund an organisation to support advocacy throughout the Trust area. They will provide support to existing groups and encourage the development of new ones.

These groups will give people a chance to hear about one another’s experiences. Representatives from the advocacy groups will help the Trust to make plans. The groups can draw up their own plans for things they could make happen for their members. They can meet politicians and community services to tell them what needs to happen.

Likewise the Trust will keep the groups informed about their planning and new developments. This could be done through web pages, a newsletter and information meetings.

Action steps to make this happen
- A Trust officer will be designated with responsibility for this action.
- A budget will be identified for three years and terms of reference agreed for the advocacy service.
- The service will support existing groups as well as support the development of new groups, especially in areas where there are none and will increase access to advocacy services that are separate from service provision.
- An Information Strategy will be developed to keep all stakeholders informed of developments in day support services.

3. We will set up local planning groups

The Trust will set up a planning group in different areas of the Trust: for example, in Larne/Carrickfergus/Newtownabbey; Magherafelt/Cookstown/Antrim; Ballymoney/Coleraine/Moyle/Ballymena.

The groups might include members of advocacy groups, service users, school principals, FE College staff, adult centre managers, Department of Employment and Learning staff, along with people from business and the community.

Their task is to review the opportunities that are available at present in their locality. They will write these down and produce a booklet that can be given to people with learning disabilities and their carers. A video or DVD could also be produced. This will be based on the ‘Rail Track Model’ developed by the Trust.

The Planning Group will identify the needs and priorities for improvements in their area; for example in transitions or development of new day opportunities (see later). They will send their proposals to the proposed local commissioning groups that will replace the HSS Boards, to the Trust and other services. The Day Opportunities Co-ordinators will link with these planning groups.

Each year they will write an Annual Report to tell others about the needs and plans. This will be sent to politicians and newspapers as well as to all families.

Action steps to make this happen
- A Trust officer(s) will be designated with responsibility for this action; one for each area.
- The membership in each area will be identified and an interim chair appointed.
- Training and orientation sessions will be provided for the Group (e.g. based on experience of successful Partnership Boards in England).
- Day Opportunities Co-ordinators will be linked with these groups.
- The relationship with local commissioning groups will be clarified.
4. We will support people to find more work opportunities

Some people with learning disabilities want to work but they cannot do so. The Trust will work with the Department of Employment and Learning (DEL), voluntary organisations and local businesses to create more opportunities for people with learning disabilities. This is how it will happen.

Person-centred planning will focus on people’s wishes and training needs (see above).

People will be referred to career guidance and vocational training, as needed. All training courses should result in some form of an award (qualification) such as a National Vocational Qualification (NVQ) or Essential Skills (OCR). These schemes will include work experience placements.

Opportunities for voluntary work will also be found. This could happen through the local planning groups and volunteer centres.

We will try to get supported employment schemes started in each locality. They will focus on getting more people into part-time and full-time paid work. We will ensure appropriate payment for work undertaken.

We will extend the number of social enterprises located in industrial or business sites. Contract work undertaken in adult centres will transfer to these social enterprises. Some of these people will have additional needs. However, for most people these firms will be a training placement with a training programme set out for each person. The goal is to move people on to some form of supported employment.

At the beginning of each year, we will set targets for the number of job opportunities we hope to create.

Action steps to make this happen

- A Trust officer will be designated with responsibility for this action.
- The different employment initiatives occurring in the Trust will be brought together to form a Trust-wide, Employment Task Force with membership from key groups, including employer and HR sectors.
- Day Opportunities Co-ordinators will continue to work in this area. Also suitable staff from existing Day Services could be seconded to new schemes and/or new funding sources will be identified.
- The range of options will be extended for accredited vocational training courses in FE Colleges, Centres and Schools.

5. We will support people to learn new skills

The Trust will work with various partners to help people develop their skills and become more independent. The person-centred plans and advocacy groups will tell us what needs to be done. But already we know of four areas in which people want and need help.

Independent travel training: There is an OCN accredited training programme which is delivered by various agencies to enable people to learn the knowledge and skills to travel independently. Our local planning groups will make plans for its use in schools, colleges and adult centres.

Also the following things need to happen.

- Everyone aged 16 years and over will have a Translink travel pass.
- The local planning groups will negotiate discounts from local taxi companies, especially for off-peak or shared (group) travel.
- The local groups will find out about community travel options - such as volunteer drivers, community rural transport, ‘Door-to-Door’ and ‘Out-and-About’ schemes.

Communication: We will help people become better at communicating. The person-centred plans will tell us if people need to use Augmentative and Alternative
6. We will create opportunities for people to meet and to make friends

In each town, we will identify a place where people can ‘drop-in’ to meet their friends. This might be in leisure or community centres, or in a hired room in a college, church, or business premises. This would open on certain days or at certain times, including evenings and weekends.

People may come to these drop-in centres rather than going to Adult Centres or to Day Centres, for example, older people who find centres too noisy; the people who occasionally attend centres; people living in supported accommodation.

The Trust will appoint a co-ordinator from the Adult Centre and a ‘volunteer team’ will support them. They could be recruited from community, family members or trainees on work experience.

People would go from the ‘drop-in’ base to join in with activities that are available in the locality, such as swimming, cinema, shopping.

In 2007, the Trust will open two drop-in centres on a trial basis. By 2011, every town should have its own base.

Also, the local planning groups will identify the various organisations that are available in their locality with names and contact details of people, so that people can be put in touch with them.

The Trust will identify new ways of giving people and carers a short-break (respite care). Day-time breaks could come from an extension of adult placement schemes; people staying with host friends and families; or holiday trips.

Action steps to make this happen

- A Trust officer will be designated with responsibility for this action.
- Training will be provided in the use of the Independent Travel Training Pack to key personnel in each planning area.
- Speech and Language Therapy to draw up an action plan for resources required to boost the use of Augmentative and Alternative Communication and to promote communication awareness among staff, volunteers and community groups.
- The Local Planning Groups will compile a directory of training courses available in their locality (e.g. in FE Colleges, Adult Centres, community groups). They will identify courses that are a priority to provide.
7. We will improve the Trust’s Adult Centres

The Trust will tell everyone the amount of money that is spent each year on each Adult Centre and how the money is spent, including the cost of transport. This will help people to advise the Trust if they feel there are better ways of spending the money.

By 2010 all the buildings used as Adult Centres by the Trust will meet the standards set out in the new regulations. This may mean altering and extending some centres. Also the numbers of people attending at a time may have to be limited. New buildings are needed to replace the existing centres in Ballymena, Carrickfergus and Larne.

Better facilities are needed for people who are immobile; who require all their personal care needs to be met; or who have other major health needs. They will have priority for attending centres (see next section). We will also consider how best to meet the needs of older people.

Each centre will have a written admissions policy and procedure. This will describe the range of supports, treatments and therapies that the centre will offer and hence, the people who will have priority for attending that centre.

In certain centres, some activities will be provided at evenings and weekends for people with extra needs. This will be decided by the Person-Centred Plans and family carer needs. The Trust will also encourage the buildings to be used at evenings and weekends by community groups, with priority given to those that involve people with learning disabilities.

From September 2007, all new people coming to centres will be offered initially a two-year placement which will be reviewed annually and, if appropriate, extended. All new centre placements will be for a minimum of one day, with additional days provided according to need and demand.

As person-centred planning is done and new options are found, it is expected that some people attending Adult Centres or Day Centres at present will reduce the number of days they attend. However if these new options do not work out, the person will revert to their Adult Centre placement if this meets their needs.

A review will be undertaken of transport costs; the criteria for its provision and the management of these resources.

8. We will give extra support to people who require it

Certain people require extra help. This may be because of their extra difficulties such as not being able to walk, to see or to look after themselves. It could be because they have extra health problems and need special medical help such as daily injections, special equipment or assistance with feeding. Or they may have behaviour or emotional needs and these may be a risk to themselves or to others and they need someone to be able to protect and help them.

People who work for the Trust, such as doctors, psychologists, nurses and therapists will help to decide when people need extra support, and for how long it needs to be provided. Agreed criteria will be developed for when a person qualifies for additional support. The person-centred plan will describe the supports, treatments and therapies that will need to be provided.

Each year the numbers of people receiving extra support will be reported on, as will those on waiting lists for extra support. We expect this number to be around 20% of all persons with a learning disability known to the Trust.

Action steps to make this happen

- Trust officer(s) will be designated with responsibility for this action.
- A Development Group will be established in each Adult Centre to draw up the Development Plan for that centre; taking account of the needs of people presently attending and other developments that will be ongoing in the locality. This to be completed by March 2008.
- The Senior Management Team of the Trust will identify priorities and common policies across centres, e.g. admission criteria and eligibility for number of days attending.
- The use of other Trust Day Centres by people with a learning disability will be reviewed.
- The capital works programme for existing centres will be costed by mid-2007.

By 2010 we expect that fewer people will have the Adult Centre or Day Centre as their only form of day support.
We aim to provide a local service to people with extra needs. As appropriate, we will work with other programmes of care in the Trust to achieve this, such as mental health services, primary care services and services for older people.

If a number of professionals are involved with the person, then a lead person will be identified. This lead person will be the main contact for the person and for his or her family carers and other support staff.

People getting extra support will have an additional Support Plan drawn up that will be part of their Person-Centred Plan. This will be shared with all the supporters of that person so that everyone knows how they can help. The Plan will be reviewed at least every six months.

People with additional support needs should have the same choice and opportunities as others. Trust staff will advise, train and support the people in community settings who are supporting the person: for example, through the Challenging Behaviour or Nursing Services.

In drawing up the Development Plans for our Adult Centres, people with additional support needs will have priority for a placement as some of their support needs may be better met there than in other places. However, as their needs change, this will be reviewed.

### Action steps to make this happen

- A Trust officer/clinician(s) will be designated with responsibility for this action.
- In each locality a multi-disciplinary team will be established to support centres and other service settings such as colleges, employers etc.
- Establish common set of criteria for extra support needs and maintain a database of all persons assessed as having extra support needs and services they receive or for which they are wait-listed.
- Develop training courses for front-line supporters on responding to additional support needs; e.g. inputs on assessments, person-centred planning, reviews.

9. **We will give people the money to buy their own services**

The Trust will identify a fund of money so that people can buy their own support. This is sometimes called Direct Payments or Individualised Payments.

This fund will be promoted at first with people attending Adult Centres who live in some form of supported accommodation such as residential homes or supported living. It will also be promoted on a trial basis to some young people leaving school.

A support plan will be drawn up and costed for the person based on their person-centred plan drawn up with their lead person. The money provided will be used for the purposes of providing support staff. Advice and help on obtaining Direct Payments will be provided by the Trust. We will try to make the management of these payments as simple as possible.

A number of people living in the same house or living close by one another may wish to share a common support plan. The total amount of money could then be used to get more shared hours of support. A scheme of this sort would start to break down the distinction between day and residential services.

In addition we will give advice to people and family carers about their entitlement to benefits and how they might apply and appeal. This will be done for everyone who is preparing for work or in work.

### Action steps to make this happen

- A Trust officer (e.g. in finance) will be designated with responsibility for this action.
- The ground rules for the operation of the individualised payments will be drawn up.
- A centre/area in which greatest savings could be made on the revenue budget (transport, staffing) will be identified.
- Sources of matched funding from supported accommodation providers will be explored.
- We will work with the Social Security Agency to provide Benefits Advice.
10. We will develop our staff for these new roles

We need Trust staff to work in different ways for these plans to happen. However these will not happen suddenly. Change will take place gradually.

We want staff to share in our vision of change so we will keep them informed of all our plans and involve them in our discussions and planning.

We will identify a group of leaders (champions) for the Strategy (called designated officers in the Action Plans). Special training and development opportunities will be available for them alongside similar colleagues from other service sectors (such as FE, schools and non-statutory services).

We will use fully the talents of existing staff as new roles become available and seek volunteers to undertake job secondments or new job roles. From 2007 onwards we will bid for more staff from the Trust and other services working as:

- **Community co-ordinators:** with responsibility for drop-in centres and for linking people into community facilities and recruiting befrienders/supporters.

- **Day opportunities co-ordinators:** with responsibility for the co-ordination of social enterprise, finding work placements, on-the-job training and supported employment, sourcing further education, volunteering and opportunities to develop friendships.

- **Advocacy Workers:** to promote all forms of advocacy and the use of Direct Payments and Individualised Payments.

- **Lead Persons:** to co-ordinate additional support needs.

- **Behavioural Support Workers:** to provide specialised supports and advice.

We will provide training for staff taking on new roles. Usually this will be done in ‘teams’ so that staff build up a sense of common purpose and with the participation of users and carers as ‘trainers’.

Each year the Trust will report on the number of support staff in post according to the various job functions they fulfil. They will also report on the training courses held.

---

**Action steps to make this happen**

- A Trust officer (e.g. from Human Resources and/or Training) will be identified with responsibility for this action.
- The leadership team will be nominated (e.g. all designated staff under the previous nine action points).
- Leadership training and development opportunities will be set up for the coming 24 months.
- An information and training strategy will be developed for existing staff.
- New job descriptions and person-specifications will be created for the new roles.
- From 2008, all recruits to Trust day services will be recruited to a new job description.
- Training courses will be developed for front-line supporters on responding to additional support needs; e.g. inputs on assessments, person-centred planning, reviews.
- Users and carers will be supported to become trainers.

---

**Supporting Carers**

These plans will also help carers.

- An individual day support plan will be drawn up for their relative. Carers and users will be involved in this.
- An individual support plan (carer’s assessment) will also be drawn up for carers if they wish to have one.
- A lead person will be allocated to each person using the Trust services. Carers will have the contact details of one person to contact for information and advice.
- People living with family carers will have priority for day support services.
- More activities will be available in localities where the person lives. Carers will be involved in planning and developing these.
- Their relatives will learn to do more things for themselves.
- More evening and weekend activities will become available.
- Carers will be involved in future service planning as members of the proposed groups (see Part 2: Section 6).
Finding the money for these plans

The money for these plans will come from:

- Changing the way the Trust spends the money it has for day support services.
- People with learning disability getting their share of monies that are available to the wider community.
- New monies from Government, especially to provide services for the increased number of people who require a service.

Making the plans happen

A great deal of work has to be done to make these plans happen. The following actions are proposed. (Further details are given on page 57).

- A leadership team is set up of designated Trust officials who will report to the Director of Mental Health and Disability Services in the Trust.
- Encouraging other statutory agencies such as Education and Employment and Learning to play their part in the Strategy.
- Setting up local planning groups involving partner agencies in voluntary and community sector as well as advocates and carers.
- A Task Force is formed on Employment, one on Transition and another on Complex Needs.
- A Development Group is set up for each Adult Centre.

An external review of progress in putting the Strategy into practice should be carried out in two years time.
Section 1: Services for People with a Learning Disability

This Strategy aims to widen choice and opportunities for persons with a learning disability in the Northern Trust area. We recognise that many people are denied the same life chances as their non-disabled peers. They require additional support, often throughout their life. This can come from various sources, foremost of which is their family. Hence a key element of any Strategy is the provision of support to family carers.

However health and social services alone cannot succeed in meeting the needs and aspirations of people with a learning disability. They must have access to mainstream and other specialist services that are available to the wider population such as education and employment.

This Strategy will guide the Northern Trust in the development of day support services for this group in partnership with other agencies and services. ‘Day support’ refers to all out-of-home activities and includes attendance at day centres, further education, vocational training, work placements and employment, as well as leisure activities and short breaks designed to benefit the person. The age range of service-users is 16 years and upwards.

This section covers three themes:
- Who the strategy covers.
- Why it is needed.
- How it was arrived at.

Who is covered by the Strategy

This Strategy covers the provision of services to people who have been assessed as having a learning disability and who are aged 16 years and above. However the Trust has statutory responsibilities to begin transition planning from 14 years of age.

The definition of ‘learning disability’ adopted within the Trust is ‘a significant impairment of intelligence and social functioning which occurs before adulthood’. It applies to just about all pupils who have had a statement of severe learning difficulties at school, as well as many of those with moderate learning difficulties. It also includes a number of adult persons who are assessed each year by Trust clinicians as having a learning disability.

Although a person’s eligibility for services from within the Trust’s Learning Disability programme of care is determined solely on the basis of the definition above, the precise configuration of services which may be offered to any particular person with a learning disability depends upon the individual’s specific needs, including any additional mental health problems, challenging behaviour or complex physical health needs.

As current demand for services exceeds supply, the Trust intends to establish more definite eligibility criteria for the various services it provides.

Why a strategy is needed

Learning disability is a life-long condition that is usually present from birth. As the name implies, people with this disability are slow to learn but they can learn if given the opportunity. In recent years there have been marked advances in their achievements. No longer are they shut away from society. All attend schools and many join in youth and community activities. They take courses at Colleges of Further Education and some hold down part-time and full-time jobs. Increasing numbers are living in homes of their own assisted by support staff. They are beginning to speak up for themselves through advocacy groups and on the whole, society is more welcoming of them. Their rights are also acknowledged in recent legislation such as the Human Rights Act (1998) and the Disability Discrimination Act (2004).

However most people with a learning disability remain dependent on their families and on health and social services. Unlike other client groups, these services cover the full age-range; from infancy to old age. The needs of persons and families require the expertise of a wide range of professionals including doctors, psychologists, therapists and social workers. A variety of different services are also required such as residential care, supported living, respite breaks, specialised hospital assessment and treatments, leisure and recreation plus a range of day support services. These may be directly provided by the Trust or through contracts with the independent sector. Hence the learning disability programme of care within HSS Trusts comprises an intricate mix of ...
services that have evolved largely within the past 10-15 years with the demise of institutionalised care in long-stay hospitals. The Equal Lives Report (2005) produced by the Bamford Review of Mental Health and Learning Disability under the aegis of the DHSSPS, has set out a vision and plan for improvements in these services for the next 10-15 years.

A core component of learning disability services throughout Northern Ireland are the day support services that traditionally have been provided through Adult or Day Centres. These began as all-age Centres but with the transfer of children to Education in 1987, they served adult persons from 19 years upwards through a range of activities including contract work, social education and leisure pursuits. With increased life expectancy and most people now living in community settings rather than long-stay hospitals, the age range of people attending centres has gradually extended. Around 7,000 persons are estimated to attend some form of Day Centre throughout Northern Ireland*. However the number of new places has not kept pace with the numbers of children leaving schools.

In April 2006, new Day Care Setting Regulations came into force and these set out new minimum standards for the operation of all registered day care provision. At present much of the current provision falls short of these new standards. Also the DHSSPS has recently instigated a value-for-money review of day service provision for all client groups but learning disability is the largest of these.

In recent years new forms of day services have started to appear, mostly in response to local initiatives and often initially funded by grants from charities or the European Union. These have opened opportunities for people with a learning disability in further education, vocational training, supported employment, befriending and leisure schemes, advocacy and empowerment. The success of such initiatives nationally as well as locally, has encouraged service providers to review the range of services they offer, often in response to demands from service-users and other advocacy groups.

How the Strategy was arrived at

Homefirst Trust invited Professor Roy McConkey, University of Ulster/EHSSSB to facilitate the development of the Strategy. A Project Board and a Project Team were established consisting of Trust directors, managers and clinicians (see Addendum 1).

The project Board first defined the principles to the development of the strategy. It should:

- Promote the best interests and needs of people with learning disabilities.
- Build on existing good practice.
- Be participative of all stake-holders and build consensus.
- Be transparent and open in its work.
- Informed by evidence and experiences elsewhere in Northern Ireland and the policies set out by NHSSB and DHSSPS.
- Have clear, easily communicated outcomes.

The following activities were undertaken.

1. A self-completion pro-forma was sent to all staff involved in day support services inviting them to provide comments on existing services and their views on future developments. (A report on the 31 responses received is available: Addendum 2).

2. A scoping paper outlining the main issues and suggesting possible developments was prepared by Roy McConkey and circulated in advance of the Partnership Forum. (A copy is available: Addendum 3.)

3. A Partnership Forum met for a morning planning session attended by 48 persons from a range of partner agencies (e.g. schools, FE Colleges, voluntary providers) as well as from Trust services (e.g. adult centres, clinicians). Various recommendations were identified that were taken forward by four working groups. (A report on the Stake-holder’s Forum is available: Addendum 4.)

4. Four working groups were established with membership inclusive of partner agencies. These were co-led by members of the Project Steering Group.

   - Transition Planning (Marie Roulston and Garth Anderson).
   - Day Centres (Weir Carson and Alison Annett).
   - Complex Needs (Ivan Bankhead and Donna Morgan).
   - Community Development and Elderly Persons (Michael Smyth and Liz McNabney).

Reports from each group are available (Addendum 5) and their main recommendations have been incorporated into the Strategy.
Section 2: Vision and Priorities

The Strategy is based on a coherent set of principles that are in line with recent Government policy and the aspirations of people with a learning disability and their families. These are markedly different from those of even a decade ago when much of our current provision was established.

Service Values

The services we provide for people with a learning disability are based on the following principles and values.

Citizenship: People with a learning disability are individuals first and foremost; each has a right to be treated as an equal citizen and for their voice to be heard.

Social inclusion: People with a learning disability, as valued citizens, need to be enabled to use mainstream services and be fully included in the life of the community.

Empowerment: People with a learning disability must be enabled to actively participate in decisions affecting their lives. Genuine choices need to be available for them.

Individual support: People with a learning disability will be supported in ways that take account of their individual needs and helps them to be as independent as possible while striving to keep them safe and protected from abuse and exploitation and taking into account their capacity to make decisions for themselves.

Supporting family carers: Families caring for a relative at home in particular, also should be able to access the support they need as carers.

Working together: Conditions must be created where people with a learning disability, families and organisations work well together in the planning and delivery of services and supports to meet the needs and hopes of people with a learning disability.

---

5 These values and priorities have been identified in the Regional Review of Day Services (McConkey, 2004) and in the Equal Lives Report: Review of Policy and Services for People with a Learning Disability, September 2005, issued as part of the Bamford Review of Mental Health and Learning Disability commissioned by the DHSSPS.
Monies spent on transporting people to centres could be more effectively deployed in other ways. Alternatives need to be explored.

More opportunities for family carers to have a respite break for a day, or evening or at weekends.

The Vision for Change

Part 1 has outlined the vision for the new forms of day support services that the Trust will move to provide in the coming five years. These are written in the form of action statements.

1. We will listen to people.
2. We will encourage people to speak up.
3. We will set up local planning groups.
4. We will support people to find more work opportunities.
5. We will support people to learn new skills.
6. We will create opportunities for people to meet and to make friends.
7. We will improve the Trust’s Adult Centres.
8. We will give extra support to people who require it.
9. We will give people the money to buy their own services.
10. We will develop our staff for new support roles.

In essence, as Figure 1 overleaf shows, these actions entail a marked expansion of community-based services alongside the refocusing and modernisation of existing Adult Centre provision. Both are essential as they interlink with each other. However, priority must be given to the expansion of community-based services in the first instance for these plans to succeed. At present most people receive their support services through centre-based provision with a minority supported in community-based pursuits. Over time, this balance will shift towards community-based provision. Later sections of the report will examine both these dimensions of day support services.

Changing perceptions

These new styles of services may require existing staff and family carers, and even some people with learning disabilities, to change their perceptions and expectations.

---

A named service person (‘lead person’) who can act as the principal contact for the individual and family.

Successful involvement of people with learning disabilities in community settings and groups, and this being publicised more widely.

Information sharing and training for existing staff in Trust services, teachers in special schools and family carers.

**Co-ordinated planning**

The focus of this Strategy is on day support services. However, this Strategy has to harmonise with the provision of other services by the Trust. These include:

- Other services for people with a learning disability; notably respite provision, supported accommodation, and specialist assessment and treatment services.

- Services provided by other programmes of care that may be accessed by persons with a learning disability, for example services for older persons or mental health services.

- In addition, there are mechanisms proposed in this Strategy which may be equally applicable for other client groups and it would lead to unnecessary duplication for these to be replicated for each client group.

- Most crucial though, are the planning mechanisms that the new Trust will adopt. The thrust of recommendations in this Strategy is to have planning decisions devolved as close to the client as possible with the active engagement of operational staff.

It is beyond the scope of the Strategy Review to define how the linkages with other Trust services should be made but this will be a vital part of developing the implementation plans for the proposals made in the Strategy (see Section 6).

---

**Centre-based services**

offering activity, social and therapeutic opportunities primarily for people who have defined, additional needs, such as:

- Challenging behaviours;
- Complex physical healthcare needs;
- Mental health difficulties;
- Dementia.

Eight centres will be provided throughout the Trust area and they will be linked with other programmes of care provided by the Trust.

**Community-based services**

offering social, educational and employment opportunities through:

- Drop-In Centres
- Further Education Colleges
- Supported employment
- Social Enterprise provision
- Work experience
- Volunteering
- Use of community amenities
- Advocacy Groups
- Social placements

These will be provided in a range of locations throughout the Trust area, mostly through partnerships with other agencies and providers.

---

**Figure 1: New configuration of Day Support services**

Such change challenges everyone and will require careful management. Among the new perceptions that need to be promoted:

- An expectation that people will have a ‘package’ of services in different locations rather than attending one centre for five days a week.
- An expectation that people with learning disabilities need to do more for themselves rather than being looked after.
- An expectation that people with learning disabilities will avail of services provided for others in the community rather than requiring special assistance and services.

It is likely that certain services will be offered for a time-limited period, according to need rather than in perpetuity. Not everyone will receive the same services as they will be prioritised on an assessed need for specific services.

The tensions could be managed through:

- Person-centred planning that involves the person, their family carers and other supporters.
Section 3: Present Provision in Outline

The main day services provided in the two former Trust areas are outlined here along with the range of other options that are available in each area provided also by partner agencies.

3.1 Day Support Services for area formerly covered by Homefirst

The figure shows the numbers of people in the different services provided by former Homefirst Trust (total 850 persons).

Figure 2: The numbers of persons in different day services

The main service provision is in the form of Adult Centres, of which there are eight. They are located in Larne, Carrickfergus, Magherafelt, Cookstown, Antrim, Ballymena and Newtownabbey (Drumross and Broadway). The Trust is contracted by NHSSB for 575 places in these centres. Currently 647 persons avail of this provision (as at December 2006).

In 2005, over 80% of Adult Centre attenders were present for five days, 11% came on three or four days and 6% for two or one day.

In addition, 103 people with learning disabilities attend Day Centres alongside older persons, and they too are generally older. This occurs in Maghera, Antrim, Ballymena, Carrickfergus, Cookstown, Larne, Newtownabbey and Magherafelt. As people attend on average 2-3 days per week, an estimated 50 places are used in this form of provision.

Figure 3 shows the percentage of people within each age grouping in 2005. Over 4 in 5 persons are under 50 years of age. Hence the numbers leaving the service in the next five years through infirmity or death is likely to be small.

Of the persons in receipt of Trust services, 22 live independently (3%) and 63 (8%) in some form of supported accommodation. Hence around 90% of service users live with family carers.

A further 59 persons are currently actively engaged with the Day Opportunities Programme in community-based activities (see below).

Also, 32 places are provided by the Bridge Association, Antrim. This provides a programme of vocational training and work opportunities.

Thus around 850 persons receive a day support service at present. Of these, 81% are solely centre-based, 7% solely community-based and 12% receive a mix.

The Day Opportunities Programme

In addition to Adult Centres, a Day Opportunities Programme (which began in April 2005) operates a package of co-ordinated community-based provision. This Trust-wide Programme offers a service for school leavers, community referrals, hospital discharge, and people who attend the Adult Centres. These package opportunities include: Supported Employment Provision; Volunteering; Accredited Further & Higher Educational Provision; Social Enterprise Provision; and Leisure Activities.
Other day opportunity services supported by the Trust are:

- Advocacy Groups (through Compass Advocacy) - 74 places
- AST Causeway Institute (43 students)
- Sport drop-in club at Joey Dunlop Centre, Ballymoney - 25 places

It is likely that people avail of more than one placement but this information is not readily to hand. At a minimum, 300 people avail of some type of day provision but this could be in excess of 350 (compared to 850 in former Homefirst area).

**Future demand**

Estimates of future demand were assessed for Larne, Carrickfergus, Newtownabbey, Antrim, Ballymena, Magherafelt and Cookstown areas. During the five years 2007-2011, 161 pupils leaving school are known to require day support services. In addition, the Trust usually receives around 15 referrals per year for adult persons who require a service for the first time. Thus over five years this could amount to 75 new persons.

There are also around 60 people presently in Muckamore Abbey Hospital (resettlements and delayed discharge) who would require day support services on their discharge. It is not known precisely how many will leave the hospital in the next five years, but 50% is used in these calculation; i.e. 30 persons.

In total then, the number of new referrals could be 265 persons over five years in the Larne, Carrickfergus, Newtownabbey, Antrim, Ballymena, Magherafelt and Cookstown areas or pro rata for the whole Trust area, around 350 persons or 70 per year.

Allowing for a small number of vacancies through death or infirmity (around 30: i.e. 50% of users currently aged over 60 years) the balance of 320 would still represent a 28% increase in people receiving day services. This clearly has considerable revenue implications for the new Trust over this period.

**Balance of future provision**

In bringing to fruition the vision for future services outlined in Section 2, the Trust has a triple task:

- To increase the number of places available through Day Opportunities
Section 4: Community-based services

The Strategy foresees a major expansion in the day opportunities that will be available within community settings. This is based on people’s responses when we asked them what should be in the plan - people who attend schools and centres; carers; Trust staff; and people working in other services. It builds on the work that the two former Trusts have already started through the Day Opportunities programme and contracts with voluntary agencies.

This dimension of the Strategy has to be taken forward in partnerships with others, notably the people using our services: family carers; staff working in day support services; further education colleges; employment schemes; and community services. Various means for doing this are proposed.

This section contains the recommendations of two working groups set up as part of the Review. First, those from the transition from school and children’s services to adult services are summarised; and second, those from the group on Community Development with particular reference to supports for elderly persons with learning disabilities.

Person-centred planning

Person-centred planning has been used successfully in developing the Trust’s supported living services. This expertise will be used to train key staff in our day support services and partner agencies in its use. The plans are drawn up with the person and other significant persons whom they wish to have present, such as family carers or staff in supported accommodation. We aim to have one common plan that is shared with all the agencies from whom the person receives services. Consideration needs to be given as to how these plans will fit with current care management arrangements. It is intended that in time, the one plan will replace all other planning tools currently used by Trust staff.

In 2007, we will start to do this planning with:

- Teenagers aged 14 years onwards when they are still at school. This will be done mainly by teachers and transition co-ordinators in NEELB.
- People attending centres who are aged 16 years to 25 years. This will be done by Adult Centre staff.

To increase the number of community-based options.

To modernise existing centres to better meet the needs of persons with complex needs.

As noted above, the great majority of places are currently in Adult Centres. Thus any developments in future provision will have to be focused on community-based options, in the first instance. These will enable people to transfer from attendance solely at Adult Centres as well as providing options for a majority of the new referrals.
Developing community options

Although it is recognised that the Trust does not have responsibility for developing community options, it has an important role to play as a catalyst, advocate and supporter of them. An inter-agency working group was set up as part of the Strategy development to explore the theme of developing community options in greater detail.

The key issues raised were as follows.

- The Trust needs to know better what services are available in our areas and local communities, outside of conventional services. This mapping process should include awareness of services and facilities that are available not only at local, but also at the Board and regional level.

- Those services that are available should take positive steps to understand their respective roles and responsibilities, and work to improving the links between them. Clarity of role and understanding can only assist the process for providing an efficient and integrated service. The Trust needs to set an example in this.

- Efforts should be made to improve multi-professional and multi-agency working. Trust staff, by focusing on client goals, should then be able to identify any obstacles or obstructions, which prevent these goals from being achieved, and target efforts to clear the obstructions.

- The Trust should seriously consider the development of more substantial links with local councils.

- Other useful links could be made e.g. with the Northern Ireland Council for Voluntary Action and the regionally established Social Economy Network organisation.

- Staff working in diverse locations such as leisure facilities, education settings or work placements should be provided with appropriate awareness training and especially in communication skills, so that they are able to engage in appropriate and meaningful interaction with clients. These would help them to fulfil their obligations for access to services under the Disability Discrimination Act.
Local planning groups

The establishment of local planning groups is proposed. These would enable the Strategy to be tailored to the particular needs and available services within the different localities within the present Trust area. Given the anticipated changes in public administration, it is difficult to define these areas precisely at present. One option is to base them around local commissioning groups or on the new local councils’ areas. They could be introduced on a phased basis.

Each planning group would include advocates (users and carers), school principals, FE College staff, day centre managers, DEL staff, along with people from business, the community and relevant voluntary organisations. Initially they will meet regularly. The Trust will designate a senior officer with responsibility for convening the group; preparing the initial terms of reference and standing orders. The existing Day Opportunities Co-ordinators will link with these planning groups and also facilitate their work.

Among the tasks the groups could undertake are:

- A review of the opportunities that are available at present in their locality. A booklet would be produced that can be given to families and people with learning disabilities and/or a video or DVD describing local opportunities could also be produced that will be given free to families. These could use the Rail Track Model.
- The Planning Group will identify the needs and priorities for improvements in their area. This would cover transition arrangements, development of drop-in centres, employment opportunities and the development plan for Adult Centres in their locality. They will send their proposals to the Trust and other statutory services.
- Each year they will write an Annual Report to tell others about the needs and plans. This will be sent to the Trust, politicians, and newspapers, as well as to all families.

Training and development opportunities will be provided to leaders and members of these local planning groups.

In the longer term, consideration should be given as to widening the remit of these groups to include other services for people with learning disabilities in their area, notably respite and supported accommodation.

Also administrative support to the groups will be important, especially if they are to undertake information sharing and reporting functions. Some funds may be required to cover the transport costs of users and carers, and possibly the substitute care costs of carers when attending meetings.

Creating work opportunities

The Trust will build on its successes already in creating work opportunities through the Day Opportunities programme and links with non-statutory providers. A Trust-wide, Employment Task Force will be established with membership from key groups in statutory and non-statutory services, including employer, Human Resources and Trade Union sectors.

The remit of the Task Force will include:

- Boosting employment in statutory services in the area (e.g. HSS agencies; local councils).
- The continuation and development of supported employment opportunities.
- The further development of social enterprises including the reconfiguration of work activities contracted within Adult Centres.
- Widening vocational training opportunities and work experience placements through the Day Opportunities programme and Further Education Colleges.
- Liaising with the Benefits Agency for advice on implications for social security payments.

It is possible that this Task Force could cover other client groups who need assistance in finding employment such as those with physical and sensory impairments and mental health problems. This work then would be jointly commissioned by different programmes of care in the Trust as well as with other statutory agencies.

Annual employment targets would be set and an annual report prepared on the numbers of people placed in the various options.

In the past, work opportunities were funded through non-recurring money. This made them vulnerable to closure and inhibited opportunities for stability and future development. Lack of recurring funding also sends out a message of weak commitment and engagement, particularly in regard to partnership working with the voluntary sector. In the future, secure sources of funding need to be found.
Supporting people to learn new skills

The strategy identifies the following areas for new skills development.

- **Independent travel training**: The local planning groups and the Employment Task Force will be asked to promote the use of the Independent Travel Training accredited programme, through a range of providers.

- **Communication**: Speech and Language Therapy to draw up an action plan for resourcing the increased use of Augmentative and Alternative Communication (AAC) throughout all services and to promote communication awareness among staff, volunteers and community groups. This will be done in conjunction with the Local Planning Groups.

- **Information Technology and Independent Living Skills**: Each Local Planning Group will compile a directory of training courses available in their locality (e.g. in FE Colleges, in Day Centres). They will identify courses that are a priority to be provided if they are not currently available. Some of these courses could be provided in the evenings in day centres, community locations and special schools as well as in colleges.

However a number of issues relating to educational courses require to be addressed.

- Educational programmes might improve if they contained a better mixture of training and work experience. The desired output should be greater employment opportunities for the student and this is in keeping with the main purpose of Further Education.

- A greater range and diversity of further education courses or other courses, such as horticulture would assist many service users. Courses should be tailored to meet identified client need, and should have measurable outcomes identified in advance.

- There is a need for more course tutors to work with clients with learning disability, and to be trained to do so. Better links with colleges might encourage this development.

- We need to integrate a model of progression through courses into our overall planning for individuals.

- For persons on external education courses, an exit strategy needs to be in place in advance of a course ending.

Transport issues

Transport is an issue for a number of reasons:

- What are the access criteria for use of Trust transport? Should these be revised to reduce expenditure in this area and release funding for more positive activities?

- Do we create a culture of dependence by providing transport so readily?

- Should we, and the education authorities, provide better and earlier training in the use of public transport, in order to foster greater independence?

- If public transport is to be used, who should pay? The Trust, service users through mobility allowance or DLA, for example?

It is recommended that these transport issues are considered by all the planning and development groups and proposals sought for creative alternatives.

Creating opportunities for people to meet and to make friends

The local planning groups and the Day Opportunities Programme will be instrumental in increasing the options for people to meet their friends outside of Adult or Day Centres. The concept of a ‘drop-in centre’ holds promise. These should be developed on a phased basis but two should open in 2007. The bases need to be in the heart of the community and be locally-based to avoid long travelling times. They might be located in a Healthy Living Centre, Leisure Centre or Community Centre.

Persons attending will generally have low dependency needs and should be able to travel independently. A range of users could avail of the drop-in facility, such as older persons and those living in supported accommodation, so as to provide them with a more convenient location while furthering their opportunities for social inclusion. Likewise, persons in part-time work or attending college courses could also make use of these bases.
The Trust will nominate a co-ordinator for each local centre but volunteer helpers will be needed especially for evening or weekend activities. The goal would be to have users taking responsibility for the activities and the running of the drop-in centres.

The Working Group recommended:

- Each drop-in centre would have a small number of people attending at any one time (up to 12); which are age and need appropriate. If people attended an average of three days a week, around 20 people could be linked to each centre.

- They should be developed in partnership with other organisations.

- There should be opportunities to make use of local amenities with the centre serving as a base.

- The centre should feed into other options, e.g. employment and advocacy services.

- The centre could serve as an information point; people can be sign-posted to other advising services e.g. benefits, housing, legal issues, CAB etc.

- Drop-in should be available beyond 9.00am - 5.00pm as people can feel isolated during weekends. Some of the Trust Adult or Day Centres could be open at weekends as ‘drop-in’ centres.

The Group did caution that the challenge is that these facilities do not become another Adult Centre. But unlike Adult Centres, there would be increased use of volunteer helpers, less involvement of the multi-disciplinary team, less emphasis on assessments and programmes. In time, voluntary or community organisations might be contracted to provide these services.

Social placements

Alongside drop-in centres the Trust will endeavour to develop social placements. These will be modelled on successful adult placement or ‘social buddy’ schemes in that people will be recruited, selected and trained to provide regular day-time/evening placements for individuals with whom they have been matched, for example two days per week. These social placements will further develop the respite breaks available to family carers in the Trust through the newly introduced leisure and recreation activities programme.

Existing recreational opportunities such as Gateway Clubs, Special Olympics and Pool League, will continue to be supported. Consideration should be given to relocating some of these into community facilities such as Leisure Centres.

Individualised payments

In 2007/08 the Trust, in conjunction with NHSSB, will identify a fund of money so that people can buy their own day-time support. This fund will be promoted, at first, with people attending day centres who live in some form of supported accommodation such as residential homes or supported living. A number of people living in the same house or living close by one another may wish to share a common support plan. The total amount of money could then be used to get more shared hours of support. A scheme of this sort would start to break down the distinction between day and residential services.

Individualised payments will also be promoted on a trial basis to some young people leaving school.

Each funding application will contain a costed support plan based on the applicant’s Person-centred plan drawn up with the named worker. The money provided will be used for the purposes of providing support staff.

Advice and help on doing this will be provided by the Independent Advocacy Service being set up to promote direct payments and/or other organisations such as Disability Action. Implications for how social security benefits are spent may also need to be addressed.

Transition to adult services

The Strategy envisages that, in future, the majority of school-leavers will receive services through community-based options. However, this requires to be planned well

7 The SHSSB have a DVD describing how these schemes operate.
in advance if appropriate forms of day support are to be available when required. An inter-agency working group was convened to develop proposals for improved choice and opportunities after school. They revisited the stated values underpinning any future recommendations; the views expressed at the Partnership Forum, and the Users’ Event. They also considered the recommendations in the “Equal Lives” to inform the recommendation for the Strategy. Their recommendations are divided into two groupings:

1. Process (i.e. recommendations on process, planning, procedures on how to facilitate transition)
2. Outcome (i.e. what services the group felt should be there for young adults with a disability to transition into).

Improving the process of transition

A small working group should be set up as a continuation of the Transitions working group to further develop during 2007 the following broad recommendations into a clearly defined and accountable five-year plan of action across the new emerging Northern HSC Trust.

This group will consider:

- Existing policy and practice guidelines and how they can be incorporated into a coherent pathway for transitions within the Northern HSC Trust.
- To clarify the role of the newly appointed Transitions Co-ordinators (NEELB) in transition planning, and their overall role in the transition process.
- To clarify the role of DEL’s Special Need Careers Advisory Service.
- To clarify and consider the role of the voluntary sector Transitions provision (e.g. Triangle).
- To consolidate and consider the role of the day opportunities co-ordinators (in former Homefirst area) in transition planning and delivery post-education.

A ‘pathway document’ would be produced to describe the overall transition process, staff roles and accountability, and contact details. This would be widely circulated to schools, teachers, health and social services staff, families and young people. A transition CD Rom resource - “From Here to There”, will be developed Trust-wide and will include clarity of roles and process as noted in the bullet points.

Existing computerised systems within the Trust and Education should be set up to allow the tracking for early planning and identification of all young people requiring transition plans and post-education service provision.

Clear protocols will be developed around assessments. These should be done on a multi-agency basis and include schools, Allied Health Professionals, Children’s and Adult Services, as appropriate. This would take into account the draft protocol (devised for the former Homefirst area) regarding Children’s/Adult Services. A single transition (person-centred plan) will be drawn up and shared across all agencies along with the names of lead persons whom families can contact.

The Children’s Disability Team needs to re-examine the transition arrangements for pupils with moderate learning difficulties.

Increasing transition options

The Trust will consolidate and build on the role of the Day Opportunities programme (post-education) to co-ordinate and monitor individual packages of community-based day opportunities across the new Northern HSC Trust (see earlier).

The Trust, through the Transitions group, will clarify with each provider across the Northern HSC Trust (including Adult Centre provision) criteria for admission to their service, the purpose of service, procedures to access service, expected outcome of provision, how it will be monitored and reviewed. This could be done through the Local Planning Groups (see earlier).

Through the local planning groups, the Trust will continue to update the “Get on Track” CD Rom and will identify the resourcing of this. Consideration will be given for these to be widely available through schools and children’s services, and also adult services post-education, regarding the emerging variety of day opportunities available across the Northern HSC Trust.

All staff involved in the transition process will be given updates on information about available opportunities and multi-agency training to develop their contribution.
Estimates of places required

More detailed planning is required to determine the number of places that should become available in the various community-based options. Ideally, this will be done in response to the person-centred plans, so that services are built around the person. However, in planning terms some broad indication is required of the number of places/people who might receive each community-based option.

An attempt is made to do this below, but this is mainly to stimulate debate as to feasibility of options and the differential requirements across options. This has been done in terms of the number of places available on a five-day basis, although one place could be shared by two or more people on a part-time basis. If people had less than five days of supported day opportunities, this would increase the numbers of people who could be accommodated.

As reported in Section 3, an estimated 320 persons may require a service in the future. At present, around 170 places are available in a range of community options. These could be increased as follows:

<table>
<thead>
<tr>
<th>Service Option</th>
<th>Places by 2011</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drop-in Centres</td>
<td>132</td>
<td>11 centres by 12 places</td>
</tr>
<tr>
<td>Supported Employment</td>
<td>100</td>
<td>Based on 250 people; average 2 days employment</td>
</tr>
<tr>
<td>Social Firms</td>
<td>64</td>
<td>6 locations by 15 places; average four days per week</td>
</tr>
<tr>
<td>Work Experience</td>
<td>60</td>
<td>Based on 150 people; average 2 days work experience and volunteer work</td>
</tr>
<tr>
<td>Further Education</td>
<td>80</td>
<td>Based on 20 people attending four days a week at five Colleges</td>
</tr>
<tr>
<td>Adult Placement</td>
<td>12</td>
<td>Based on 30 providers offering 2 days per week</td>
</tr>
<tr>
<td>Direct Payments</td>
<td>40</td>
<td>Based on 40 people arranging all their own day support</td>
</tr>
<tr>
<td>Total</td>
<td>488</td>
<td>Net increase of 318 places in community-based services based on estimated 170 places available at present.</td>
</tr>
</tbody>
</table>

A proportion of these new community-based placements could be taken up by people currently in Adult Centres so as to free up places there for new referrals. These community developments also allow any vacancies occurring in Adult Centres (estimated @ 30 in the coming five years) to be used to reduce numbers.

However if the numbers of people attending Adult Centres had to reduce further due to the increased complexity of need among their attenders, then the following options would need to be considered.

- An increase in the number of placements within the community-based options listed. Which types of service have more room for expansion? By how many places could they increase?

- Reducing the number of days people receive the new community services. If this was reduced to an average of four days, then the community options outlined above could accommodate an additional 80 persons (@ 400 people in total) plus 100 places currently funded.

- Reducing the number of days people attend Adult Centres. If this was reduced to an average of 4.0 days from the 4.5 days at present, then an extra 100 persons could attend.

- If four days became the average across both community and centre-based services, around 180 extra persons could be provided with services. With the anticipated vacancies, this equates to an average reduction of around 20 persons in each Adult Centre.
Section 5: Modernisation of Adult Centres

This Strategy has major implications for existing Adult Centres. Although these will remain for the foreseeable future, their role and function needs urgent review not least because of the new Day Care Setting Regulations (NI) which came into operation on 1 April 2006. A working group was set up to make recommendations for the modernisation of these Centres and these are summarised in this section.

People with extra support needs will become the primary focus for health and social services in the future. Another working group of Trust staff examined how the Strategy might best meet their needs. Their recommendations are also contained in this section.

There are growing numbers of older persons with a learning disability whose needs and aspirations change with age. Proposals are made for this group. This includes a review of the use of Day Centres for people with learning disabilities.

Improving Adult Centres

As community-based options increased for people with learning disabilities, existing Adult Centres could be reshaped to provide a more structured environment, especially for those with more complex needs. In the interim, the centres would continue to provide a base for people with severe learning disabilities who are less dependent but who prefer coming to the centre. Through time, the Adult Centres will accommodate fewer persons, with the buildings adapted to meet the particular needs of the various groups attending.

Part 1 outlined the changes that are envisaged to Adult Centres. In implementing these changes, the working groups noted the following.

- There must be a criteria established for persons eligible to attend Adult Centres. In addition, criteria are needed as to who qualifies for transport. Alternatives to Trust transport should be explored.

- Careful assessment is the basis for referral to the Adult Centre and for review of placements there. Best practice requires that:
  - The user must be placed at the centre of the assessment process;
  - Multi-disciplinary assessments are required but these must feed into a common person-centred plan;
  - Current processes involved in assessment and service delivery should be reviewed to identify improvements.

- We advocate multi-disciplinary working within centres. Where individuals’ needs require input of several professionals or agencies, professionals and agencies must agree a local protocol to share information.

- Centres must have dedicated space for therapy and specialist activity areas e.g. Multi-sensory room, IT room.

- Appropriate equipment and facilities must be available in day centre prior to admission of the person requiring them. Budget for equipment must be identified.

- The existing staff/client ratio needs to be reviewed - the ratio must reflect person-centred assessment.

- The skill mix among staff may need to be reviewed; for example nurses and AHPs may need to be located in the centre.

- Specialist training will be required for all those providing services in centres. Trust drivers also require specific training on learning disability.

- Day Centres must be completely physically accessible - compliant with DDA.

- The size and design of centre will determine appropriate numbers and complexity of need.

- People who present with challenging behaviour need appropriate facilities within the centres, which may include observation rooms.

- The Adult Centres need to link with other services and activities in the community if the social inclusion of attenders is to be promoted.

People with extra support needs

People with extra support needs are defined as those who, in addition to their learning disability, present difficulties in terms of either, or both, of the following:

(a) physical health problems and disabilities; and
designed for the people now attending them. They are expected to meet the needs of people with challenging behaviours, some of which are added to by the environment the person is placed in, whilst at the other end of the spectrum there are frail older persons who are long-term attenders. Some service users have significant personal care needs, although the majority have few or none. The historical design of centre-based services requires service-users to ‘fit in’ to a large group of people despite the best efforts of staff to make it a more individualised experience for each person. Moreover, delivering services in segregated environments has had the unintended consequence of promoting stigma and perpetuating social exclusion.

In recent years there have been growing difficulties in both the recruitment and retention of Adult Centre staff. Also, staff are not always aware at the recruitment stage that they may be expected to work with clients with complex needs.

Proposed solutions:

I More Adult Centre staff (in recognition of the growing proportion of clients with complex needs)
I Career paths developed for Adult Centre staff in line with those of other professions - perhaps with enhanced payments for staff who work with clients with complex needs?
I Job descriptions to specify the need for staff to work with clients who have complex needs (whether in the form of physical health problems and/or challenging behaviour)
I Rotation of staff across different client-groups within Centres (so that skills, knowledge and expertise can be generalised)
I More focused recruitment campaigns for staff.

3. Staff Training

Centre staff are increasingly carrying out procedures either under the direction of, or delegated by, others (e.g. AHPs, nurses, challenging behaviour service staff). They are also dealing increasingly with clients with multiple conditions (e.g. a client could be diagnosed with depression, epilepsy and arthritis). There are obvious issues of training and safety (both of staff and clients) in relation to this.
A programme of general training in complex needs across all Centres, to be completed by all new staff within a prescribed period (e.g. 6 months).

A corresponding programme of refresher/update training across all Centres.

The above to be facilitated through an extension of the current ‘closure days’ scheme.

Client-specific training, carried out by professional staff in relation to individual clients’ needs.

Increased education and training in learning disability in general, and complex needs in particular, for staff in services (e.g. podiatry) not traditionally regarded as ‘core’ to Learning Disability, but likely to be increasingly called upon in the future.

4. Structural Issues

Clients with complex needs often have additional requirements in terms both of aids and equipment (e.g. specialist wheelchairs) and environmental factors (e.g. the availability of personal space).

Proposed solutions:

- Capital improvements need to be incorporated in the Developing Better Services Initiatives.
- Dedicated clinical areas for specified procedures, therapies and interventions - possibly in the form of off-site ‘therapy units’?
- Dedicated storage space for necessary equipment, etc.
- Dedicated ‘ASD Rooms’ (each for 4-6 clients - primarily to facilitate TEACCH programmes).
- Dedicated facilities, to serve both as individual and small-group behavioural therapy rooms and ‘quiet rooms’ (to where clients with sensory-overload difficulties may withdraw).

Centres to operate more flexible opening hours (to include evenings and weekends).

5. Other Supports

As the level of extra support needs within Centres increases, so the need for immediate professional support will increase too - both for staff training and advice (see above, point 3) and for the management of unexpected or emergency situations. The vital role that carers often play in the management of clients with complex needs (e.g. in augmenting individualised programmes, or in transport) must be recognised and supported.

Proposed solutions:

- Appointment of a range of additional professional staff (e.g. nurses, AHPs, challenging behaviour specialists) - whether appointed as additional members of existing community teams or with specific attachments to designated Centres.

Older persons with a learning disability

With increased life expectancy, there will be more older persons with learning disability. In addition, there is an increasing incidence of dementia within the aging population. Older people with a learning disability should have the same access to all the support services that are available to other older people and these options should be explored as part of their person-centred planning. The Trust's Strategy for Older Persons - Living well: ageing better - provides further details on anticipated future options.

However, to effectively provide services and care for those older persons with additional needs, will require additional funding and services. Two points are worth noting.

1. There is some debate about the age used to identify ‘older’ service users. Certain individuals, because of their condition, will experience problems of aging at a much younger age.

2. There could be a considerable number of potential ‘older’ service users who are currently unknown to Trust staff. This group may only present when existing care arrangements break down, perhaps due to aging or the death of a carer, or a major increase in management needs, which can no longer be met by the carer(s).
The diverse needs of the older service users needs to be recognised, hence we do not envisage a service solely for older persons; for example, some might wish to remain in employment. Nonetheless many appreciate a quieter, more relaxed environment than offered in Adult Centres and hence the proposal for drop-in centres in which attendance time is not prescribed by transport. This group might also appreciate having a greater range and volume of social outlets available to them, which could include church groups and luncheon clubs. However, for those persons with early onset dementias, their needs could be better met within the structured environment of the Adult Centre. Alternatively, those in later stages could avail of the specialist dementia services provided by the Trust.

The provision of respite services for family carers of older persons with dementia is vital.

Day Centres

At present over 100 people with a learning disability in the former Homefirst Trust area attend a Day Centre provided largely for older persons. This issue was not addressed by any of the working groups set up as part of the Strategy but, in the light of all the other proposals, it would be prudent for the Trust to undertake a review of these placements and the future role of these centres in the day support options provided to people with a learning disability.

Development plans

In developing implementation plans, it is recommended that a development plan is drawn up for each of the existing Adult Centres. This would be done in consultation with users and carers and would cover building adaptations, equipment as well as staffing and other issues. These plans should begin to be available from mid-2007.

Proposals for capital monies need to be included in the Developing Better Services Plan.

If the numbers of people attending centres are to significantly reduce, then there will need to be a concomitant increase in community-based places as described at the end of Section 4. However the increase presented there to nearly 500 places in community-based services would still leave the majority of placements within Adult or Day Centres (830 places).

Section 6: Programme of Action

A great deal of work has to be done to make these plans happen. This section summarises the different planning and implementation groups that could be set up; the actions steps that are needed and the possible new roles and training requirements for staff in existing services.

Arguably the most challenging aspect of the Strategy is developing the community-based options relatively speedily and for sufficient numbers of people, both school-leavers and those in Adult Centres whose needs and aspirations could be better met elsewhere. This will then allow the modernisation of Adult Centres to take place. Failure to advance the community-based options will result in a deteriorating service for those already in Centres with waiting lists developing and staff time taken up with crisis responding.

Implementing the Strategy

The Strategy represents an ambitious programme of action that involves:

- the redesign of eleven existing Adult Centres;
- developing new styles of working with partner agencies and the creation of a range of community-based provision;
- an expansion of the numbers of people using the services.

Consideration needs to be given to:

**The Trust personnel who will drive the Strategy:** It is proposed that a team of designated officials are identified with responsibility for different strands. These roles could be held alongside existing responsibilities. However, they need to function as a co-ordinated team with development as well as operational responsibilities. A development co-ordinator (Project Manger) will need to be appointed.

**Mechanisms for more detailed planning:** Two of the working groups set up during the development of the Strategy propose to continue their work on Transitions and on Complex Needs. A special group dealing with the needs of older clients will be set up. In addition, a multi-agency Task Force on employment is proposed. These new approaches will require careful nurturing.
However their work would be time limited, for example for 12 months. People working in the Causeway area should be invited to join these groups.

**Mechanisms for partnership working:** A number of proposals are in the Strategy: the development of advocacy throughout the Trust so that users can become more involved in service developments and the formation of local planning groups.

**Mechanisms for shaping Adult Centres:** It is proposed that a group prepares a development plan for each Adult Centre. These groups could begin work on a staggered basis and would be time-limited - say for 6 months.

**Trust Planning and Operations:** The Trust needs to clearly specify the senior officers in the Trust to whom these groups are accountable.

The following figure summarises these proposals. It is possible that the remit of these groups could embrace other learning disability services provided by the Trust and/or other client groups (e.g. the Task Force on employment).

**Figure 4: The planning and implementation groups proposed**

![Diagram of planning and implementation groups]

**Review and monitoring arrangements**

Procedures for monitoring the implementation of the Strategy will also need to be identified within the overall Planning Structures of the new Trust. These could include:

- Setting performance targets of the number of places/people in the new developments per annum.
- Annual reports prepared by the local planning groups.
- A Review of the Development Plans for each Adult Centre.
- An Annual Review report prepared by the Leadership Team.

**Action steps**

The following actions are recommended for 2007/08.

- Approval of Strategy by the Trust SMT and Board.
- The Senior Officer is appointed to oversee the implementation.
- The leadership team for the Strategy is appointed along with Project Co-ordinator. Training is provided for them.
- The Trust obtains participation from Education, DEL and other relevant agencies in the Strategy.
- The Trust informs the DHSSPS and the Health and Social Care Authority of its Strategy and provides an indication of additional resource requirements.
- Plans are prepared for staff to undertake person-centred planning.
- The Task Force on Transitions and on Complex Needs continue to meet with revised membership as needed (a continuation of the work done in 2006).
- School-leavers in April and June 2007 are offered services according to their assessed needs and availability of places.
Obviously many of these developments are dependent on the resources becoming available within the proposed timeframes.

Funding the Strategy

The money for these plans will come from:

- Changing the way the Trust spends the money it has for day support services. This strand may also include redeployment of monies on other learning disability services.
- People with learning disability getting their share of monies that are available to the wider community. This includes monies spent in the Trust’s other programmes of care as well as through other Government Departments, such as Departments of Employment and Learning. This will require directives from central government.
- New monies from DHSSPS; especially to provide services for the increased number of people with a learning disability who require a service.

Staffing the Strategy

The Strategy envisages changes in the roles of staff. We will use fully the talents of existing staff as new roles become available and seek volunteers to undertake job secondments or new roles. From 2007 onwards we will have more staff working as:

- Community Co-ordinators: with responsibility for drop-in centres and for linking people into community facilities and recruiting befrienders/supporters.
- Day Opportunities Co-ordinators: with responsibility for the co-ordination of social enterprise provision, finding work placements; on-the-job training and supported employment, sourcing further education, volunteering and opportunities to develop friendships.
- Advocacy Workers: to promote all forms of advocacy and the use of Direct Payments and Individualised Payments.

2009 onwards

In subsequent years, further employment and educational options need to become available alongside increased social and recreational opportunities and the development plans for the remaining adult centres. It will probably be 2009 before significant changes can begin to be made to some Adult Centres and this would progress in a phased basis through until 2011.
Lead Persons: to co-ordinate person-centred planning.

Behavioural Support Workers: to provide specialised supports and advice.

Therapy Support Staff: to provide specialist support for persons with complex needs.

New job descriptions and personnel specifications will be created for the new roles. From 2007, all new recruits to the Trust day services will be recruited to the new job description. We will provide training for staff taking on new roles. Usually this will be done in ‘teams’ so that staff build up a sense of common purpose and with the participation of users and carers as ‘trainers’. Training courses will be developed for front-line supporters on responding to additional support needs; e.g. inputs on assessments, person-centred planning; reviews.

Each year the Trust will report on the number of support staff in post according to the various job functions they fulfil. They will also report on the training courses held.

A communications strategy will be developed to keep staff informed of developments.

Evaluation of progress

In addition to the annual monitoring reports that are proposed, the Trust should consider commissioning an external evaluation of progress in two years time. This would identify the achievements and how they had come about, as well as the barriers encountered and how they might be overcome. This should be done with the same spirit of openness and participation that permeated the development of the Strategy.

Addendum

The Addendum to the Strategy document is available on request from Oscar Donnelly, Director Mental Health and Disability Services*. It contains:

1. Membership of the Project Board and the Project Team.
2. Responses to self-completion questionnaire.
5. Reports from four working groups.
6. Report on consultation with users of day services.
