

# My Life, My Ambition, My Future

## Norfolk's Learning Disability Strategy 2018 – 2022



## Norfolk's Learning Disability Partnership Board

In Partnership with



Great Yarmouth and Waveney  
North Norfolk, South Norfolk  
Norwich, West Norfolk  
Clinical Commissioning Groups



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# FOREWORD

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[My Life, My Ambition, My Future](#) has been co-produced with residents of Norfolk with a learning disability, families, advocates, health and social care professionals and the wider community. [My Life, My Ambition, My Future](#) introduces a vision and identifies the priorities that we all need to work on to achieve this vision, in partnership.

[My Life, My Ambition, My Future](#) pledges a new commitment to being person-centered in everything we do, with a focus on promoting opportunities and positive personal outcomes. It aims to promote a new journey of true partnership and co-production.

[My Life, My Ambition, My Future](#) focuses on enabling young people and adults with a learning disability to identify and achieve goals important to them and improve their quality of life through accessing a wide range of community resources and services across Norfolk.

[My Life, My Ambition, My Future](#) focuses on prevention and working together, so that collectively we can stop things from going wrong earlier and achieve equitable outcomes. This includes health and we (the partnership) all have a responsibility to promote and support the good health and positive wellbeing of people with a learning disability and their families. In doing so we will listen and notice when issues and challenges appear, so that we can help stop things from getting worse, identify the right support at the right time by the right people in the community. We will always prevent, wherever possible, the use of hospitals, residential care homes and support that is intrusive.

[My Life, My Ambition, My Future](#) sets out a clear intention for everyone involved in the lives of people with a learning disability, to work together in partnership and through co-production with people that have a learning disability, their families and the wider community in Norfolk.

[My Life, My Ambition, My Future's](#) aspiration is that together we will shape a future that improves the outcomes, opportunities, choice and control of people with a learning disability, whilst delivering efficient quality local services. This will be achieved by working together across the whole system, undertaking key areas of work and by jointly working to the Learning Disability Principles.

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# INTRODUCTION

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[My Life, My Ambition, My Future](#) sets out the Vision for shaping and delivering opportunities for people in Norfolk with Learning Disabilities. It explains how we arrived at the vision and how we intend to achieve this vision, through identifying a series of key priorities and actions.

## Our Vision

***That all people with a learning disability have the ambition, choice and opportunity to be equal members of the Norfolk Community.***

In developing [My Life, My Ambition, My Future](#), The Norfolk Learning Disability Strategy for Norfolk 2018 - 2022, we have considered national and local policy and given specific focus to a co-production process.

The co-production process ensured the views and opinions of Norfolk residents with a learning disability and their families, were central to development of the priorities and principles that [My Life, My Ambition, My Future](#) promotes. In addition, a wide range of organisations, staff and the local community, shared their views through the co-production process, to help identify the priorities of the strategy. [My Life, My Ambition, My Future](#) provides the vision, identifies outcomes and identifies work priorities to achieve these, over a 5-year period.

Future papers, plans and policies will refer to [My Life, My Ambition, My Future](#) when considering the needs of all people with a learning disability from the age of 14, including people with other needs such as autism and dementia.

[My Life, My Ambition, My Future](#) has considered the financial challenges faced by the Norfolk County Council (the Council). It recognises the need to evolve the way we deliver services and work differently in the future, to ensure

sustainable support that can promote new opportunities and maximize people's independence.

**My Life, My Ambition, My Future** belongs to everyone involved in the commissioning and delivery of services for people with a learning disability, the wider community and people with a learning disability and their families.

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## NORFOLK CONTEXT

### MONEY, DATA AND PEOPLE

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As in many parts of the country, budgets are not keeping pace with demand and so change is needed.

Commissioners are faced with the challenge and opportunity of reshaping and evolving services to best support the residents of Norfolk and deliver efficiencies. These changes are being delivered by the Council through the delivery of a programme of work called “Promoting Independence”.

The Norfolk and Waveney Sustainable Transformation Partnership (STP) has to make significant efficiencies across health and social care. The STP brings together key providers and commissioners across the local area to plan and deliver services for its population. There are already savings plans in place, however, assuming these are delivered, there is still a combined financial challenge for health and social care of c. £56m for 2018/19.

In the year 2017/18 the Council invested £119m in Learning Disability Services. Local NHS Clinical Commissioning Groups invested an extra £2m on specialist services as part of the Transforming Care response.

Care packages for people with a learning disability account for 93% of the investment referred to above. This includes commissioned services such as accommodation-based care packages, community-based services, including day opportunities and services commissioned by individuals using direct payments. In March 2018, the Council was running 5,676 services for 2,437 adults with a learning disability as their primary support reason.

Some people with a learning disability will also have additional needs such as sensory and communication needs with additional diagnosis of autism and dementia. We know that with the good news that the life expectancy of people with a learning disability is increasing, there is a need for a range of planned quality services and support across Norfolk, that can adapt to the changing needs of people throughout their lives.

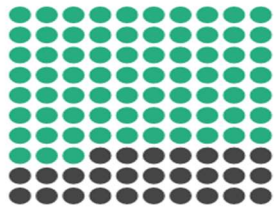
# LEARNING DISABILITIES IN NORFOLK

INTELLIGENCE & ANALYTICS

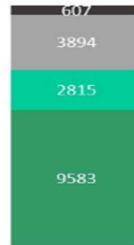
## General Population - 2017

**16,899**  
Adults estimated to have a learning disability

Estimated age of Adults with a Learning Disability



■ 18-64 (73.37%) ■ 65+ (26.63%)



■ 65+ Moderate/Severe  
■ 65+ Mild  
■ 18-64 Moderate/Severe  
■ 18-64 Mild



Source: POPPI AND PANSI (data based on predictions). Percentages may not add up to 100 due to rounding.



## Ethnicity in Learning Disabilities Services

	Day Services	Residential	HWC	Direct Payments	Supported Living	Shared Lives	Home Care
White British	95.3%	96.6%	100.0%	95.5%	95.9%	100.0%	93.8%
White other	2.1%	1.4%	0.0%	2.2%	2.6%	0.0%	2.1%
Black	0.4%	0.4%	0.0%	0.1%	0.4%	0.0%	0.0%
Mixed	0.9%	1.0%	0.0%	1.3%	0.1%	0.0%	0.0%
Asian	0.7%	0.4%	0.0%	0.3%	0.7%	0.0%	2.1%
Other	0.4%	0.1%	0.0%	0.4%	0.3%	0.0%	1.0%

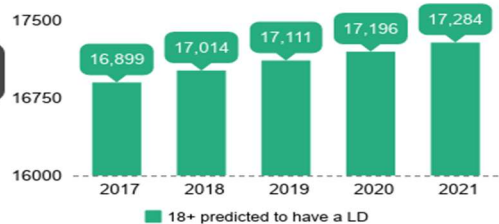
## Predicted change - by 2021

**17,284**  
Adults estimated to have a learning disability



6.9% more people aged 65+ estimated to have a learning disability

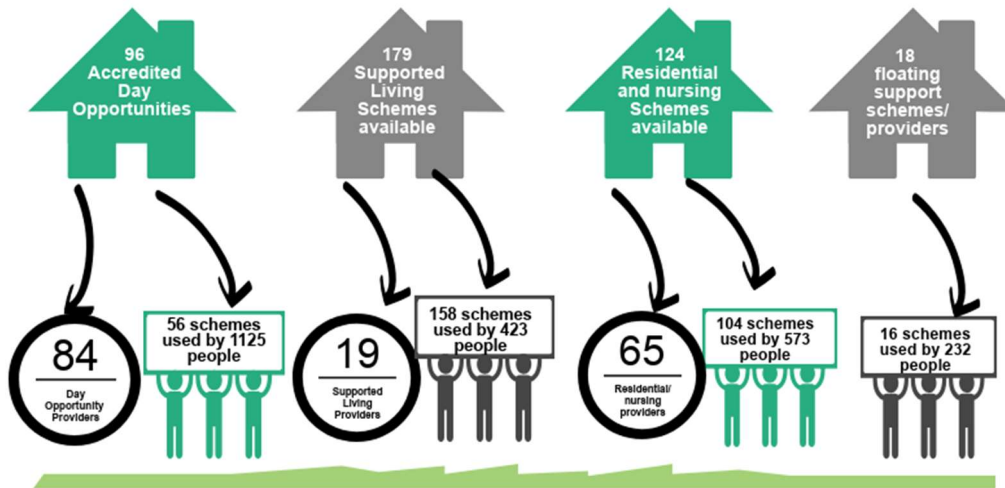
- The total number of people with a learning disability is expected to grow by 2.3% in the five years to 2021.
- The number of people with a learning disability in older age groups is growing faster than the average: in the same period the number of people aged 65+ with a learning disability will grow by 6.9%.



Source: POPPI AND PANSI (data based on predictions)



## Adult Social Care Services



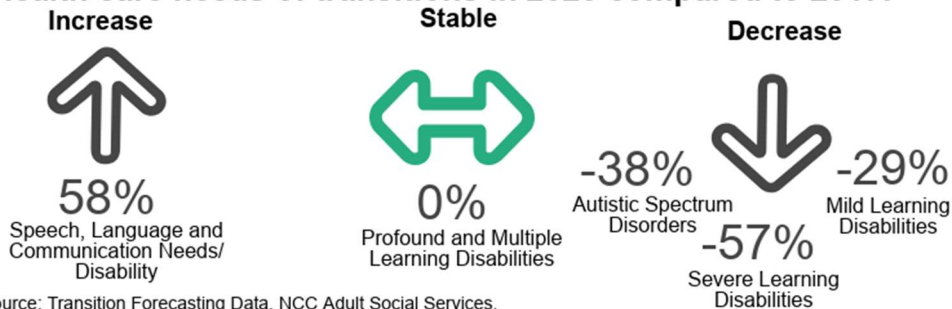
The largest commissioned services under Adult Social Services are Supported Living (including floating support) and Day Care, followed by Residential and Nursing Homes. Other commissioned services include transport and home care. Residential and nursing homes include those in Norfolk. Source: Provider List as at 28/09/18 and DMD0016a - Services open at 10/10/18.

## Transitions from Children's Services to Adult's Services Learning Disability Support:



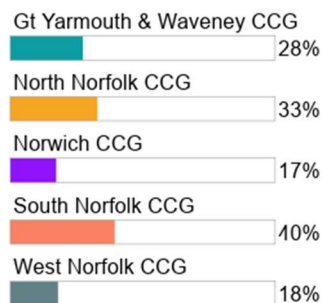
Source: Transition Forecasting Data, NCC Adult Social Services.

## Health care needs of transitions in 2020 compared to 2017:



Source: Transition Forecasting Data, NCC Adult Social Services.

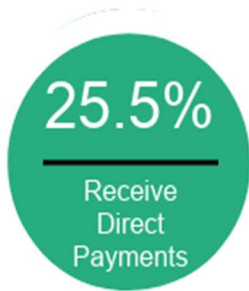
## Health Checks:



Patients aged 18+ during 2016/17 financial year identified as having QCF diagnostic learning disability who received a learning disability health check and have been provided with a learning disability action plan. Note data includes Waveney. Source: NHS Digital.

# Money

## Direct payments:



Source: NCC Social Care System (March 2018)

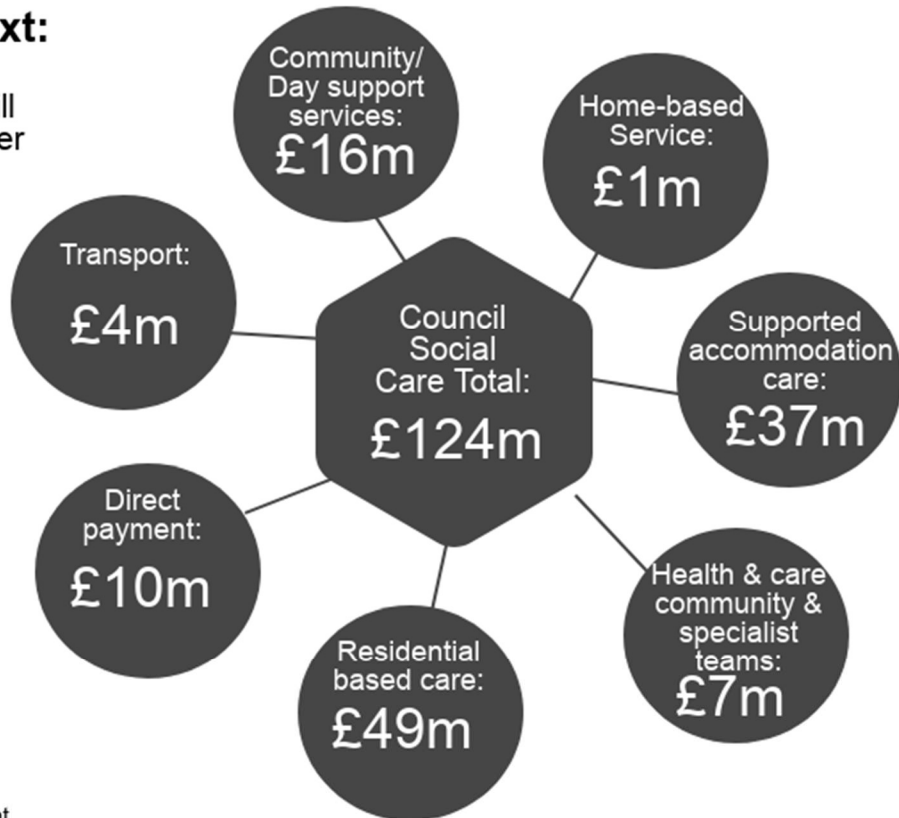
## In own home or with family:



Source: NCC Social Care System (March 2018)

## Financial Context:

Total amount of local Council money that will be used for adults (over 18) with a learning disability in 2017/18:



Source: NCC Finance Department

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# OUR WAY OF WORKING IN NORFOLK

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## Working Together

The Equality Act 2010 says disability is a protected characteristic and organisations have to make reasonable adjustments and include adults with learning disability.

We believe that it is important to work in partnership with people who experience learning disability using co-production. This way we have a better chance of improving opportunity for people with a learning disability to live more independent and self-determined lives. We will make the most of the resources and money we have available through work, which focuses on the shared priorities and principles identified during the co-production.

[My Life, My Ambition, My Future](#) recognises that in order to put this into practice we also have to take account of what we have to do to make Norfolk a more equal and accepting place to live with a learning disability.

In addition, the Council and the NHS have to make sure that they are considering people with a learning disability in the delivery of National Policy, including the Care Act, and for some people the Autism Act, Mental Health and Mental Capacity Acts. We also need to consider the needs of people with a learning disability and deliver specific national priorities such as Transforming Care, to prevent young people and adults accessing hospitals or being in contact with Criminal Justice, when it could be prevented. We are also committed to implementing an Autism Strategy for people who have autism.

We will work together with the people responsible for delivering and developing the plans that affect the lives of people with a learning disability, by asking them to work with a renewed LD Partnership Board. This will ensure that new plans and strategies take account of the specific needs and concerns

of adults across Norfolk with a learning disability and consider the Core Principles in [My Life, My Ambition, My Future](#).

We believe that young people with a learning disability should have more opportunity to gain different experiences and develop greater aspirations for their future. No matter how big or small the aspiration, we will be working with Children's Services to plan better for the support people need in the future and enable young people to develop the skills and confidence in preparation they need for adulthood.

We recognise that everyone is individual, and that people will need different types and amount of support. What we think is most important is that people get the right support for them and that this is not less or more than someone needs. We recognise that needs change and so the support will need to change to best match the needs of the person and their family where required.

### **Working as a partnership to support better outcomes**

The Learning Disability Principles in [My Life, My Ambition, My Future](#) have been developed for all partners to sign up to, so that everyone can work towards the same values and aspirations in delivering consistent services, support and opportunities. It is expected that everyone involved in the lives of people with a learning disability will agree to work together in providing a shared approach.

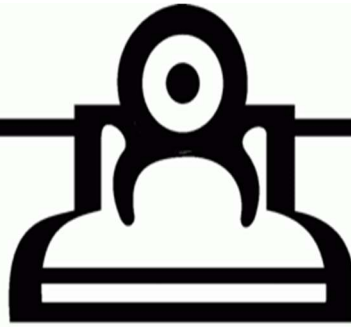
In addition, the partnership recognises a shared requirement to adhere to the values and principles of the Equality Act and United Nations Convention on the Rights of Persons with Disabilities. It also supports the delivery of Care Act Wellbeing Outcomes, Health Equalities and the Preparing for adulthood outcomes.

## Partnership Principles

Partnership is an important part of how we will deliver the ideas and changes outlined in [My Life, My Ambition, My Future](#). It is about everyone delivering, with people who experience Learning Disability at the centre of everything that happens.



In Partnership, we agree to shared principles



### Our Shared Principles

- Co-produce well
- Respect differences
- Include all
- Value people
- Communicate well
- Fair opportunity
- Be person-centered
- Work in partnership
- Predict need
- Prevent crisis
- Support health & wellbeing
- Community resources
- Safe communities
- Effective services
- Efficient services
- Prepare for Transitions

## **Principle**

## **Partnership based commitment**

### **Co-produce well**

Treat all people with respect, dignity, kindness and value their contribution through co-production.

### **Respect differences**

Respect people and their differences. Accept people for who they are as individuals. Don't make assumptions

### **Include all**

Work to include everyone, empower and co-produce with people that have learning disabilities, their families, service providers and communities.

### **Value people**

Recognise people as individuals entitled to make choices and decisions and support this with access to appropriate advocacy, communication support.

### **Communicate well**

Be transparent; adjust communication to communicate effectively, including accessible and easy read formats.

### **Fair opportunity**

Promote fair opportunities for everyone, maximise independence including the right equipment and support.

### **Person-centred**

Deliver person-centred practice, recognising strengths.

### **Work in partnership**

Work in partnership with the person; address gaps in communication and planning.

### **Predict need**

Predict needs earlier to stop things from going wrong.

### **Prevent crisis**

Prevent crisis through personalised early intervention.

## **Principle**

## **Partnership based commitment**

**Safe communities**

Promote inclusive and safe communities.

**Effective services**

Provide commission and manage quality services that focus on quality and improving personal outcomes.

**Efficient services**

Make the best use of resources so that they demonstrate outcomes and are cost efficient.

**Prepared for  
Transitions**

Prepare for phases in people's lives in good time; including adulthood, moving home or older age.



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## CO-PRODUCTION

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[My Life, My Ambition, My Future](#) is a big plan, and this big plan has been co-produced by lots of different people in Norfolk working in partnership.

[My Life, My Ambition, My Future](#) co-production took place between July and December 2017. People with experience of a learning disability, their families and carers, were central to the co-production. Professionals and the wider community were also involved in the co-production.

Co-production is important to help people in Norfolk live better independent lives, everyone in Norfolk is going to have to work together more, and in better ways, in the future.

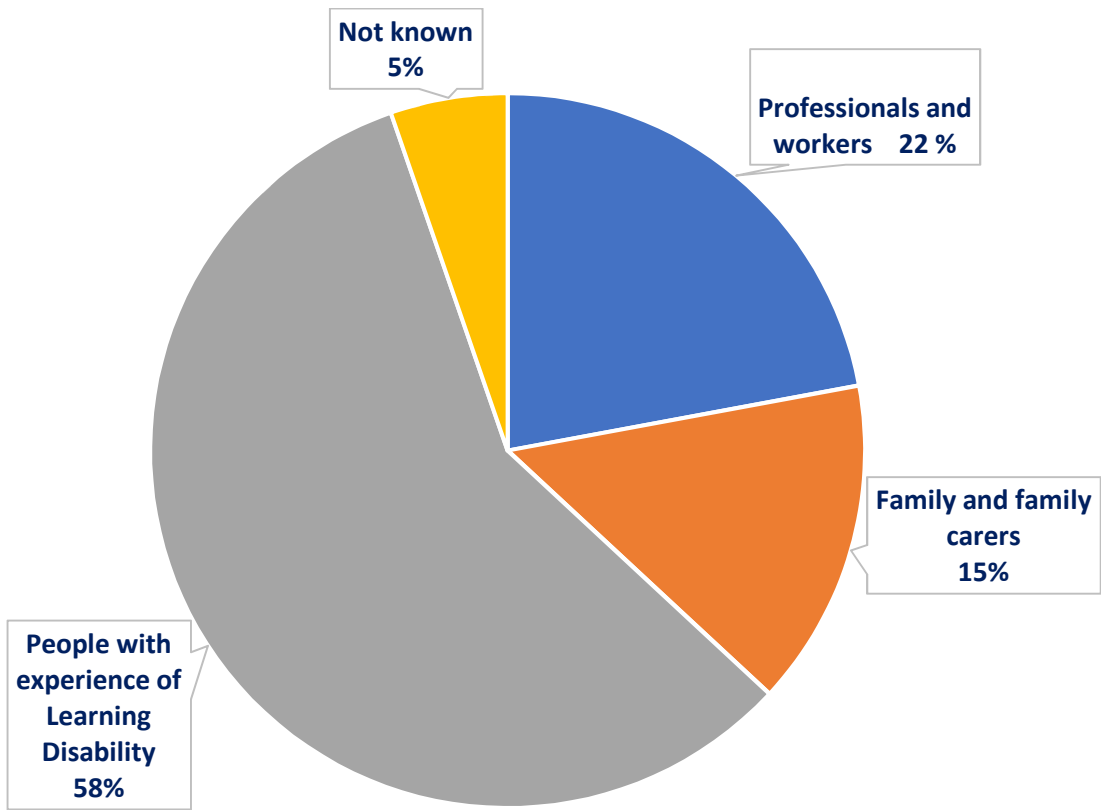
Some of the people who have helped develop [My Life, My Ambition, My Future](#) through co-production, include:

- The Learning Disability Partnership Board
- People who have experience of Learning Disability
- Families
- Learning Disability charities in Norfolk
- Norfolk NHS
- Schools and colleges in Norfolk
- Norfolk County Council/Social Care
- The Police
- Companies who provide services, like housing and day opportunities, in Norfolk
- Many other people, groups and organisations

In total, 823 people contributed to the [My Life, My Ambition, My Future](#) co-production listening and engagement activity. They did this in lots of different ways:

- 402 people completed an Easy Read survey
- 48 people filled out a non-Easy Read survey
- 236 people shared their views through an online e-survey
- 112 people joined a group activity
- 25 people were directly involved in the Co-Production Group itself

Different people shared their views -



## Giving everyone a voice

During the co-production, it was not always easy to capture everybody's views and ideas, particularly people with sensory and communication needs and those accessing criminal justice and hospital settings.

In planning and thinking about services in the future, we need to consider how we adapt our communications approaches to better include people with complex needs and are in different environments to benefit from [My Life, My Ambition](#), [My Future](#) over the next 5 years.



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# MY LIFE, MY AMBITION, MY FUTURE

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## What People Told Us

Through the co-production work it was established that there were key themes that were a priority for people with learning disabilities, and these themes are our priorities.

The priority themes identified through co-production have been translated into Priority Outcomes. These are examples of the outcomes and opportunities that could be achieved as a result working in partnership over the 5 years of the strategy.

## Key Themes and Priority Outcomes



Safety,  
Fairness and  
equality

**Outcome 1**



Health

**Outcome 2**



Home and  
Housing

**Outcome 3**



Relationships,  
family and  
friends

**Outcome 4 &  
10**



Transport

**Outcome 5**



What  
people do  
in the  
daytime

**Outcome  
6 & 7**



Staffing,  
care and  
support

**Outcome  
8**



Personal  
Budgets  
and  
Money

**Outcome  
9**



Respite and  
Holidays

**Outcome 10**

# My Life, My Ambition, My Future Priority Outcomes



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# DELIVERING THE PRIORITY OUTCOMES

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## 1. Promoting equality, respect and being safe



### What we know

A quarter of disabled people have experienced attitudes or behaviours where other people expected less of them because of their disability.

*(Attitudes towards disabled people, Scope, May 2014)*

Having more options for support in the community would help to prevent people needing to access more formalised services. The Transforming Care Programme is reducing the number of people in long stay hospitals by the use of community resources, this means more personalised outcomes.

### What people have said

*"We need to see past the disability to see a person with hopes and skills"*

- "Work with nightclubs to offer accessible discos"
- "Do more to promote Buddy systems more widely (e.g. *Gig Buddies*)"
- "Work with business to ensure greater development of Easy Read resources (e. g. menus)"

- “It is important that the place you live is not a high area of crime that is linked to past offence – drug use, probation need to offer drink/drug courses”
- “you never knew where you were in your treatment plan – telling me I am doing well doesn’t help, I need an idea of a moving out date”

## What we are doing

We have introduced Safe Spaces and our Adult Safeguarding Board and Local Authority Elected Members have a better awareness of the rights and aspirations of people with a learning disability living in Norfolk.

We are fully engaged in the national review of all deaths of people with a learning disability and are proactively implementing *Building the right support* (Transforming Care national programme 2016) to prevent the admission to hospital and to support discharge from hospitals so that people can be part of a community.

The introduction of equality legislation and improved access to public spaces will mean that disabled people have greater opportunities, visibility and aspirations than ever before.

## What we will do next

We will work closely with agencies to respond to reports of safeguarding issues, and both hate and mate crime.

We will work together to raise greater awareness and challenge misinformed perceptions of learning disability, the launch of this strategy will make this easier

Promote opportunities within communities by raising awareness of learning disabilities and greater inclusion such as developing a LD-friendly Norfolk approach.

Work harder to enable people with a learning disability to access their mainstream services, including their doctor, hospital appointments.

Work with the police and liaison and diversion teams to help prevent people with a learning disability getting into trouble and accessing the Criminal Justice System. Where people do access the Criminal Justice System we will work with the police, courts and prisons to make appropriate reasonable adjustments.

## What difference it could make

- ✓ More people say they feel safe when in the community.
- ✓ People with a learning disability will know what to do if they experience abuse.
- ✓ Carers and Families say they feel more confident in those they care for accessing their community.
- ✓ People with a learning disability will be more visible and engaged in their local communities.
- ✓ More people with a learning disability say they can access mainstream services.
- ✓ There will be more safe havens / safe places for people to access.
- ✓ There will be more people identified as at risk of falling into the criminal justice system.
- ✓ Numbers of people engaged in the criminal justice system will reduce and will have appropriate support.
- ✓ Police, probation and diversion teams (from accessing the CJS) will have better awareness of Learning Disability.
- ✓ More people with a learning disability delivery learning disability training and awareness across services and the wider community.



## 2. Being Healthy and Happy



### What we know

People in Norfolk told us that health and happiness is important, My Life, My Ambition, My Future aims to make Norfolk a place where people with a learning disability are healthier and feel happier.

Transforming Care, Annual Health Checks and the Green Light Tool Kit all promote the importance of supporting people's physical, mental health and wellbeing. In addition, Stomp (Stopping over-medication of people with a learning disability, autism or both): seeks to prevent the 'over medication of people with a learning disability. They all recognise that identifying illness and issues at early stages will reduce the distress for people and their families. It also helps to prevent admission to hospital due to an escalation of behaviours that could be considered to be challenging.

The (LeDeR) Programme (Learning Disabilities Mortality Review) aims to improve the lives of people with learning disabilities so that any preventable conditions that could result in serious consequences are recognised earlier.

A greater focus on supporting people to have the right services and support in the community. Every effort should be made to prevent people with a learning disability and/ or autism going into hospital if their needs can be met in the community. It has also provided the local areas with targets to including people moving out of hospital back into the community.

When considering the needs of people with multiple and profound disabilities, physical disabilities it is understood that good postural support, sensory needs, complex health needs, (e. g. epilepsy, respiratory problems, dysphagia and eating and drinking problems) and communication are all priorities in supporting positive health and wellbeing.

## What people have said

*"I like to go to the gym, football and dance classes"*

- "Develop a range of initiatives that support people with a learning disability to be able to use local community wellbeing resources".
- "Sometimes help with healthy eating would be good, it can be more expensive".
- "Not being supported with weight gain and diet, no accessible information".
- "Doctors don't always respect people with a Learning disability".
- "There is not the understanding that feeling unwell needs to be recognised and flagged up with the doctor".

## What we are doing

Making sure that too many hospital beds are not bought or used.

Working with NHSE to make sure that by March 2019 'all inappropriate NHS Funded placements of people with a learning disability, challenging behaviour within an inpatient setting will receive the right care in the right place.'

Providing support to individuals, their families and providers that are at risk of admission to hospital through positive behaviour support and other services to support the individual through the challenging time and prevent an admission to hospital.

We are involved in the National LeDer Programme to learn from the reviews of people with a learning disability whose physical health needs were missed.

We plan to share the learning wider so that health needs can be recognised earlier and prevent them from getting worse.

Supporting GPs and Practice Nurses to understand the importance of Annual Health Checks for people with a learning disability. NHS England provide clear guidance and expectations around the delivery of Annual Health Checks.

Supporting hospitals to make reasonable adjustments by having LD Liaison Nurses.

Implementing the Green Light Tool Kit that supports people with a Learning Disability to Access mainstream mental health services.

Reviewing the dementia pathway for people with a learning disability so they get the right accessible support and information.

## What we will do next

Ensure that the annual health checks are delivered across the County, from the age of 16, by working with GPs to improve access such as extended appointments and additional support.

Give specific thought to how all people including those people with more complex needs have improved health and wellbeing outcomes.

Support use of IMCAs and reasonable adjustments so that all people with a Learning Disability receive the right health care treatment including dentistry.

To work with the community to identify more opportunities for people with a learning disability to access support on diet and wellbeing.

Work with Providers to notice and respond to changes in physical and emotional needs, ensuring that they have skills in positive behavioural support to provide a person-centred approach in responding to the needs of people when unwell or distressed.

Provide support across building based provider services, and in the wider community to prevent the risk of a hospital admission or breakdown of accommodation.

To understand the numbers of people with a Learning Disability that have long-term health conditions, including dementia. Working together across departments to deliver a person centred approach in meeting their needs.

To promote opportunities for health and wellbeing and healthy lifestyles such as tackling obesity, healthy eating and exercise.

## What difference it could make

- ✓ More people have a recorded health check.
- ✓ No one with a learning disability dies from preventable health conditions.
- ✓ People don't go into hospital where it can be prevented through community support.
- ✓ Fewer people, including children, go outside of Norfolk to have their health care needs met.
- ✓ More young people stay in Norfolk to achieve their education aspirations and have their Health and Care needs met.
- ✓ Where hospital is essential, it is for a shorter time.
- ✓ More people with a learning disability and their families say they experience reasonable adjustments in accessing mainstream health services, for example hospitals.
- ✓ The health and wellbeing needs of young people will be included within transition planning.
- ✓ More people have their health books completed by health professionals.

### 3. Having the Right Place to Live



#### What we know

Having the right accommodation contributes to better health outcomes.

The wrong environment can have a big impact health and wellbeing, including distress that can lead to behaviours that are considered to be challenging, with the risk of losing accommodation.

There needs to be a range of housing options that meets the variety of needs and requirements. The accommodation should be in places that make it easy to access community resources as well as peoples support networks.

That the use of technology can enable people to have more independence and control in their home environment and lives.

#### What people have said

*"I want more say about who lives with me"*

- "Don't want to move too far from my family, need to look at local needs".
- "No housing options on the council website for people with a learning disability".
- "Shared Lives schemes are good, more people should get involved".

## What we are doing

Working with operational teams and District Councils to develop a housing and accommodation needs list to help plan for future accommodation needs.

Working with Children Services to plan for future accommodation and housing needs for young people that also enables independence skills.

Working with developers and providers to capture opportunities for developing new accommodation options.

Working together to consider what different types of accommodation and support do people with a learning need to be happy and independent in their home. Recognising people need different types of spaces and reasonable adjustments.

Considering what type of short-term crisis accommodation that is not a hospital or residential home that a person could use when their own accommodation is causing them distress.

## What we will do next

Have a single accommodation and housing needs list across Norfolk for people with experience of a learning disability accessing social care, including people who need new or different accommodation.

Work with housing developers and providers to develop new accommodation.

Review the existing supported living options to make sure it meets the needs of people now and in the future.

Review the shared lives model to offer more opportunities, focusing on enablement, young people returning from residential school, people moving out from home and respite.

Explore opportunities for the development of crisis placements when the current accommodation is not meeting needs.

## What difference it could make

- ✓ More people have the right place to live that meets their specific needs.
- ✓ More people say they are happy with their accommodation at their review.
- ✓ Young People will have accommodation included within their transition plans.
- ✓ More accommodation offers greater opportunities to develop skills and live as independently as possible, including the use of technology.

## 4. Developing and maintaining relationships with family and friends.



### What we know

Many people with a learning disability say that relationships are important to them - yet only 3% of people with a learning disability live as a couple, compared to 70% of the general adult population. (Mencap 2016)

Several barriers make it difficult for people with a learning disability to have personal and sexual relationships:

- Meeting people is more difficult.
- Social isolation is more common.
- The balance between risk and rights when it comes to people with a learning disability having intimate or sexual relationships is often skewed towards restricting their choices, both in the family home and other living arrangements.
- Lesbian, gay, bisexual and transgender (LGBT) people with a learning disability can face 'double discrimination', with their sexual rights denied on the basis of their learning disability as well as their sexual orientation or gender identity.

It is important for families to maintain positive relationships so that they are able to continue to support where appropriate. Additional support should be available when required in order to help families deal with a crisis situation or to prevent escalation of needs.



## What people have said

"Having friends is important"

- "Recognise that for many people, family relationships are especially important, and support is necessary to maintain these."
- "People think it is wrong or harmful for people with a learning disability to get married or have a family, living outside the norm is ok – love is more important"
- "Time from family during the day to do activities in the community is important"
- "Support for families as people move through transition and be introduced to the idea of independent living, so they are not caring for 50 years"

## What we are doing

We recognise that there needs to be more opportunities for people to develop and maintain their friendships and relationships.

We also recognise that developing an intimate relationship and potentially having a family can be important for some people.

We are asking social workers at the Council to think about how people can develop and maintain positive relationships, as this will help people stay happy, as well as providing peer support.

We also recognise that relationships with family is important and sometimes that means having space. We offer a carers assessment for families that request one.

## What we will do next

Offer and provide carers assessments and be mindful of changes in relationships as people get older.

Explore different ways that we can support people to develop friendship groups, so that they can access the community through pooling personal budgets and direct payments to do joint activities.

Explore ways that technology can help people feel more connected with other people when at home, such as video calling.

Ensure that there is responsive support available for families when in a crisis situation – through the development of a contingency plan.

## What difference it could make

- ✓ More people say they are in regular contact with friends and family.
- ✓ Fewer people say that they are lonely.
- ✓ More people say that they have important personal and intimate relationships and are not prevented from doing so including people who are from the LGBT community
- ✓ Parents with a learning disability are supported in their parenting including making reasonable adjustments within parenting programmes.

## 5. Having Transport to Get About



### What we know

Norfolk is a big county and it can be difficult to get about with some places not having access to public transport

Some people use taxis to travel a long way for activities when there could be activities and opportunities closer to home.

The Council has a transport policy that was implemented in 2017 that provides guidance on what transport can be provided. There is a free bus pass service that starts at 9. 30, people can use the bus beforehand but will have to pay a reduced fare.

*“Transport means independence  
- getting to college, work, the  
doctor, a friend's house”*

### What people have

- “Need to have accessible clear signs and timetables, easy-read information”.
- “The bus drivers need to have training on learning disability”.
- “There needs to be more adult accessible changing spaces and toilets, so people can get stay out for longer”.
- “Buses need to have priority seating and ramps, kerb side buses”.
- “‘Treating people like parcel’ with different drivers and unreliable”.
- “I feel like everyone is looking at me when I am on a mini bus that has writing on it”.

## What we are doing

Looking at more opportunities for people to receive travel training

Developing a better understanding about how many people have been travel trained at school and may just need support with a new route.

## What we will do next

Look at assistive technology options to support people when traveling independently so they feel more confident and know what to do. Including the use of mobile phone apps.

Work with Children's Services and include transport within transition planning as a key part of getting to training, jobs and activities.

Include travel training as part of the skills enablement offer during transition, for those people that haven't had it already or need support for new routes.

We will work with transport in co-production to raise awareness and introduce accessible information.

## What difference it could make

- ✓ More people say they can travel independently
- ✓ Less money will be spent on adult social care transport, such as taxis for those people than can travel independently.
- ✓ Fewer people say they feel isolated because they are able to access transport enabling them to get out and about
- ✓ More people will say they have a positive experience on public transport
- ✓ More people will say they are using technology and feel more confident

## 6. Being a part of the community and involved in local activities and leisure



### What we know

Being involved with the local community leads to friendships and peer support and it can make people less reliant on commissioned services. It gives a sense of belonging and leads to people being able to contribute to their community. The community is there for all, everyone has the right to use the facilities and opportunities on offer.

People who need more support to do things because they have complex impairments or challenging behaviour, have the right to the same opportunities as everyone else. People who need this additional support might benefit from having direct payments or an individual budget, so they get the one-to-one support they need to do things. This would help to develop a culture of acceptance to support inclusive communities.

### What people have said

*“I want to meet my friends outside normal times”*

- “Launch an initiative to promote availability of changing places and accessible toilets”.
- “Recognise that high-quality independent support and access to advocacy will be important for people to get the most from person centred reviews that promote Ambition”.
- “Take steps to understand, continue to plan for high-quality services that support the population of people who experience severe and complex and/or profound learning disability”.

## What we are doing

We are working with providers to review their offer and think about how they can support people to develop their skills and independence.

We will continue to develop a quality assurance review for all provision.

We are working with Children's Services so that young people identify their aspirations for the future in their transition plan, including getting a job.

Looking into different approaches to enable people to access their community include personal budgets.

We are developing more safe spaces and havens that people can access.

We will review the number of changing places available across Norfolk

We are looking into how assistive technology can help people feel more engaged and able to access their communities.

## What we will do next

We will work with providers to review the existing day opportunities model and undertake people's reviews to make sure that people are being supported to achieve their personal goals.

We will work with the community to increase the opportunities for people to use their local and community resources and clubs such as gyms, community groups.

In partnership, we will think about how community hubs can bring people together in a local resource including the idea of buddies.

We will specifically consider how people with more complex needs can access new experiences and opportunities whilst recognising their personal needs.

We will promote local community activities with fewer words and more pictures.

Work with Art and Culture companies to develop opportunities for people with a learning disability to actively participate by socialising, developing their skills and opportunities in the arts; such as music, photography, drama, art and dance.

## What difference it could make

- ✓ More people say they are able to be involved in their community and local activities including employment, training and voluntary work.
- ✓ More people with a learning disability say they feel more confident about being in their local community and know people in their local community.
- ✓ Young people will include access to their local community in their transition plans.
- ✓ Accessing the local community will be included in assessments and reviews with and without support.
- ✓ More people will have personal budgets to access the opportunities and resources that help people's independence, like going to the shops.
- ✓ More people will use technology to support them to access their communities.
- ✓ People with complex and significant needs will have opportunities that meet their sensory needs and have positive experiences.

## 7. Having employment, work, education and training opportunities



### What we know

People with a learning disability or autism do not have the same opportunities to access employment.

In Norfolk 3.4% of adults with learning disabilities aged 18-64 known to us were in paid employment which is below the national average.

Nationally there has been some resources identified to support local education commissioners and providers to develop supported apprenticeships to encourage more opportunities for future employment.

We understand that having a job or a purpose can lead to having greater fulfillment, less social isolation and if in paid employment in a stronger financial position to make choices.

### What people have said

*“There needs to be greater opportunities and equality in the application and interview process”*

- “Need to promote the positives and challenge the misconceptions about the value people experiencing a learning disability can bring to the workplace”.
- “Some employers are prepared to work with supported employment providers and schemes that can help.”
- “The Council should be a role model and employ people with disabilities including a learning disability.”



## What we are doing

We are working with day opportunity providers to establish what their current employment training opportunities offer is, including whether this has resulted in paid work.

We are working with Children's Services to ensure that transition plans include developing opportunities into employment, training and further education.

We are working with mainstream employment support providers to understand what the offer is available across Norfolk, including developing skills, CVs, and access to work schemes.

We are working with Children's Services to consider the introduction of supported apprenticeships.

During assessment and reviews we are asking how people can access employment, voluntary opportunities and asking young people to think about what they would like to do in the future (their aspirations).

## What we will do next

We will work with Children's Services and education to think about how they also prepare young people and adults to access employment opportunities and develop their skills to be prepared for a workplace.

We will continue to speak with the employment support agencies to understand what support can be offered dependent of needs, so that people know who can provide the right support at the right time.

Work in partnership with employment support agencies and day opportunities providers to understand what is currently available and what people need for the future.

Work with employers to promote the positives and opportunities as part of a wider employment piece of work to help change the culture and develop more opportunities.

Consider the development of a modular programme that supports people to engage in work related activities whilst supporting them to gain independent living skills. This could involve supporting people to access other mainstream services that offer advice and skills to increase independence and reduce reliance on funded care.

Work with Welfare Rights to support in accessing the right benefits and access to work and work with supported employment agencies to support people in retaining employment opportunities once in work.

Utilise the community to help make best use of the facilities, clubs and services that are already in existence in the community. We will need to work alongside colleagues, providers, other local authorities to ensure accessibility of community options.

Work with day opportunity providers to ensure that day services offer outcome focused services that are going to lead to more independence and more work-related activities.

## What difference it could make

- ✓ Number of people in paid employment increases.
- ✓ More young people are involved in apprenticeships.
- ✓ More young people have employment, education and training included in their transition plan.
- ✓ People are being given skills that make them ready for work or training opportunities.
- ✓ This will ensure that people have a sense of purpose.
- ✓ More people with a learning disability will be able to access mainstream national funded job support with reasonable adjustments.
- ✓ The day opportunities model will reflect the future need and approach developed in partnership through the review process.

## 8. Having a Voice and Choice about the Right Support

### What we know



People with a learning disability need to have true choice to make sure that the support they receive supports the achievement of an outcome or opportunities. This can be big or small depending on the specific needs of the person.

*Building the right support* (Transforming Care) states within the principles that people with a learning disability and or autism should receive authentic person-centred support and be outcomes driven. This will ensure that they can determine how care and support can best meet their needs in the least restrictive way.

### What people have said

*“Develop a workforce that focuses on values-based management and recruitment”*

- “A leaflet is not care, they have a place, but people need to have guided conversations, particularly where people are less IT literate”
- “Establish a Learning disability staffing care and support task force to develop and grow the workforce in Norfolk”
- “Take steps, through a range of co-produced initiatives, to address stigma and discrimination, and improve awareness and understanding, around learning a disability”

## What we are doing

Developing a workforce plan for learning disability, including transforming care and a multi-agency workforce and training plan for autism including learning disability.

Developing a multi agency autism workforce and training programme that introduces awareness, champions, and autism specific applied training that is person-centred and inclusive of LD.

Implementation of new Social Work Principles at the Council and the introduction of the 3 Conversations that focus on resolving issues earlier with short-term intervention or advice.

Reviewing advocacy services to ensure that people have a voice and are central to their planning in line with the Care Act and Transforming Care.

## What we will do next

Bring together the different organisations supporting people that have a learning disability and their workforce training plans to develop a single LD Workforce plan for Norfolk.

Continue to develop the social care workforce to apply person-centred and outcome-focused assessments and practice, focusing on strengths and opportunities.

Work more closely with providers to demonstrate the continuous development of their workforce, particularly with regards to person-centred and positive behaviour support approaches, in addition to safeguarding, autism and mental capacity.

We will work with providers of commissioned services to make sure that the service they provide is of good quality and that people receiving the service provide their feedback.

We will work with the LD Partnership Board in delivering the priorities of the strategy in partnership and co-production via working groups.

There will also be the introduction of an Annual LD Show and Tell to demonstrate the progress made through the strategy and promote the positive work across Norfolk.

## What difference it could make

- ✓ More people say they are involved in planning for themselves and have choice and the right support.
- ✓ People will be at the centre of the care planning and have improved outcomes.
- ✓ People will receive quality services and will be able to contribute to the quality assurance review.
- ✓ Providers and the people in receipt of services will have a sustainable service and planned workforce.
- ✓ People in receipt of services, and commissioners, will receive good value for money quality services that enable and promote independence.

## 9. Managing money and personal budgets



### What we know

The Care Act 2015 placed a duty on the Council to produce Care and Support plans and offer a Personal Budget (following an assessment), to ensure that people's needs are adequately met.

Currently 24% of people with a learning disability in Norfolk have a direct payment.

The ability to choose how support is provided in order to meet personal needs and outcomes, can make a significant improvement to the quality of life, health and wellbeing as a result. However, people with a learning disability and their families often do not feel confident in managing a budget, or feel they have the skills to choose the support, or in being an employer when appointing a personal assistant. Therefore, we recognise that good support in making decisions is essential if self-directed support is to be successful. Equally, having the choice of services is important to meet the range of needs that people have as individuals.

More people with a learning disability want to live more independent lives, accessing community services and choosing their support. This includes the management of bills, food shopping and personal finances. Many people that engaged in the strategy, communicated worries about managing their money in general, including their benefits.

### What people have said

*"Give people choice; it needs to be okay to spend"*

- "Recognise the role of businesses and the wider community in supporting good practice when transacting with people who experience a learning disability"

- “Increase access to and support around engagement with, services like Money Matters and DOSH (cash back application) Financial Advocacy Support”.
- “Work with new and existing service providers and other partners to develop support/classes and activities focused on learning money skills”.
- “Different people seem to experience different levels of choice and self-determination within agreed review priorities. This needs to be addressed”.
- “There needs to be improved clarity for people who experience a learning disability, on the cost of services, so Personal Budgets can be spent well, and a range of options considered when planning the delivery of agreed person-centred outcomes.
- “Improved access to Direct Payments, Individual Service Funds and pooled budgets, including exploration of integrating social care Personal Budgets with Personal Health Budgets (where appropriate)”.
- “More education for families/individuals/carers and professionals about support and services available and how they can access Direct Payments with a Personal Budget”.
- “People need more support to use and manage Direct Payments; for example, around employing PAs. PAs and Support Workers also need support”.
- “We should not expect people to fit into services; rather we need to ensure that services (and other support) are attractive and appropriate for the people who need them”.



## What we are doing

The Council has undertaken a consultation on the current direct payment offer to obtain the views from users of direct payments including people with a learning disability.

It is recognised that in many cases people with a learning disability and family members have found managing direct payments difficult.

We are beginning to work with community providers to look at more personalised approaches that could be delivered through a direct payment.

We are working with the Welfare Rights team to provide greater outreach and support to people with a learning disability and autism.

## What we will do next

We will learn from the response from the Direct Payment consultation with people who have direct payments, in particular what people with a learning disability and their family have said.

In addition, we will clarify what support is needed for people with a learning disability to help them consider having a Direct Payment.

We will review the take up and accessibility to personal assistants and consider how the workforce plan can support the increase in numbers of personal assistants.

We will also look at the opportunities for increasing the numbers of community volunteers and buddies.

We will work together to consider how both health and social care needs could be met via a personal budget.

## What difference it could make

- ✓ More people say they are involved in planning for themselves
- ✓ More people say that they have greater choice in finding the right support
- ✓ More people say that they feel happier and able to achieve their outcomes due to having good person-centred support.
- ✓ More people feel more confident to manage their money and their personal budget (with support where required).
- ✓ People are confident that they have the right welfare support advice.
- ✓ More people understand their financial situation and how it works for them
- ✓ More people feel supported to plan for their future including how to deal with a financial crisis.
- ✓ Young people will include managing money and the option of a direct payment as applicable within their transition plan.
- ✓ More people feel that their personal budgets reflect their agreed outcomes from their personal centred reviews.

## 10. Having support for carers and family, including respite and breaks.



### What we know

Family Carers provide an important role in directly providing care and support to a family member or friend. Sometimes due to the intensity of being a carer it can be difficult to look after their own health and wellbeing or just be mum, dad, sibling or spouse.

The Care Act 2015 gives Local Authorities a responsibility to provide carers assessments. This means more carers are now able to ask for an assessment of their needs and the impact the caring role has on their lives including their health and wellbeing.

*"I am worried about what will happen to my son/daughter in the future when I am not around or able to continue"*

### What people have said

- "Review and clarify, Norfolk's Respite Policy; for those with direct experience of a learning disability and family carers/others who may be eligible for Respite support/access."
- "I am struggling to find support, so I can go on holiday."
- "Please recognise that good respite can promote good relationships and that opportunities to access and develop relationships, beyond day-to-day activities and the home and/or family environment, are valuable."
- "Some people have a personal budget for respite, it is not clear when you can and when you can't. Include what Respite means."

## What we are doing

We are looking at what is currently offered to carers to support them have a break and we are reviewing the number of carers assessments undertaken.

We are working closer with Children's Services to better improve the transition arrangements for young people and their parents.

We are exploring opportunities to provide short term support at times of challenge to prevent a breakdown of the family household.

We will review the feedback provided in the carers survey every year to obtain the views and satisfaction of Carers supporting people with a learning disability.

## What we will do next

We will better record the number of older carers. Carers will be included in assessments as appropriate and their views will be recognised, as well as more individual assessments of carers will be undertaken.

We will work with older carers to plan for the future, for a time when they are unable to continue caring, including the development of a transition plan

Young people will include the support they receive from their family within their transition planning and assessment.

We will look at the development of back up plans (contingency plans) to put into place at times of emergency.

We will look at the impact of parents with direct experience of a learning disability.

## What difference it could make

- ✓ More parents and carers receive carer's assessments.
- ✓ More carers say their wellbeing is good.
- ✓ More older parent carers, families and individuals are planning for the future
- ✓ More people will have back up plans that they can put into place on an emergency.
- ✓ More carers will say that they feel listened too.
- ✓ More carers will report greater satisfaction in the support they receive.
- ✓ Parents of younger people with a learning disability will understand the changes in their role when the young person becomes an adult.
- ✓ The role of the carer will be included in young people transition plans.
- ✓ All reviews will consider the value, to families and carers, of alternative care for individuals.
- ✓ Less people communicate that they are unable to continue caring.
- ✓ More people are identified as providing mutual care during their reviews.

## National Influences

In addition to the Equality Act there is specific national policy and programmes and legal requirements that the partnership, in particular the Local Authority and Health Commissioners, need to consider when planning for people with a learning disability and their families. In brief these include;

### ***'Building the Right Support'* Transforming Care National service model 2017**

Transforming Care is about improving the life chances of children, young people and adults with a learning disability and/or autism who display behaviours that challenge. Their support should be person-centred, planned and proactive. That people could access quality multi-agency specialist services in the community, preventing the use of hospital and other restrictive placements. People will be supported to stay out of trouble and hospital unless completely necessary, and that Care and Treatment Reviews or Care Education and Treatment Reviews for children will be used to determine this. Where hospital settings are used, discharge planning will start at the point of admission to learn and prevent things going wrong in the future.

**Nice guidelines and Quality Standards**, provides evidence based best practice guidance for health and social care.

**Learning Disability and Behaviours that Challenge 2018**, Guidance that focuses on service design and delivery best practice for children, Young people and adults with a learning disability inclusive of people with autism that have a learning disability

## **Adult Autism, Guidelines and Quality Standards for diagnosis and support 2014, Autism Act 2009, Think Autism, Statutory guidance 2016**

The Autism Act 2009 recognises all people on the autistic spectrum, including people with a learning disability, it also specifically identifies people without a learning disability should not be refused an assessment based on IQ.

The Autism Strategy 'Think Autism' and the National Statutory Guidance seeks to make sure that more people understand autism, that it is easier for adults to get a diagnosis of autism, (a diagnosis is when a doctor tells someone that they have autism by undertaking an assessment), make it easier for adults with autism to choose how they live and get the help that they need to do this through reasonable adjustments and by an autism aware workforce. This will help with assessments for health and social care including supporting young people plan for adulthood.

## **Children and Families Act 2016 Preparing Young people for adulthood**

Identifies key outcomes that should be considered for young people transitioning into adulthood, these include Accessing Employment, Having Friends, relationships and community, Good Health and Independent Living. This includes all partners across education, health and social care working with the young person and their families in preparing for adult life and identifying what support is needed to best enable the achievement of outcomes and ambitions.

## **The Care Act 2015**

This introduces Wellbeing outcomes that all people should access including people with a learning disability and their Carers. These include personal dignity (including treatment of the individual with respect), physical and mental health and emotional wellbeing, protection from abuse and neglect, control by the individual over day-to-day life (including over care and support provided and the way it is provided), participation in work, education, training or recreation, social and economic wellbeing, domestic, family and personal suitability of living accommodation, the individual's contribution to society.

## The Care Act Says

- Local authorities must always put people's wellbeing at the heart of its decision making.
- People with a learning disability need to be assessed in person by someone with expertise in learning disabilities. The Care Act guidance explicitly states that people with learning disabilities should receive a face to face assessment by someone with the right training and skills.
- Carers have similar rights to services to the people they care for, including the right to an assessment.
- Local authorities have duties to provide information and advice; for example, about how the system works, how to manage the financial aspects of meeting care needs, and especially how to help prevent, delay or reduce the need for care and support - to keep people as healthy and independent as possible.
- People with a learning disability have the right to an advocate if they find it difficult to communicate or to understand something.
- There are rules to make it easier for people to keep getting care and support if they relocate to a different local authority area.
- If you get social care support, you will have a right to request a personal budget if you're not offered one.



## Local Influences

The Council has 2 plans called '**Norfolk Futures**' and '**Promoting Independence**' that focus on increasing opportunities for people to be more independent, including using technology, targeting the resources including information to prevent people's needs from getting worse, helping people to develop their skills and have jobs. Also, for some people help them recover from illness and provide services directly to those who need a lot of support to stop things from getting worse.

The Promoting Independence vision is to support people to be Independent, resilient and well. It has three main elements to **1) Prevent and provide early help, 2) Help people to stay independent for longer and 3) Support people living with complex needs.**

It also seeks to manage the pressure on services through the development of local community solutions for individuals and families, where this is practical and appropriate and making the most cost-efficient use of resources.

Where people do need a service, the Promoting Independence aim is to support people to be as independent of services, as soon as possible.

## Norfolk Social Care Principles and the 3 Conversations

The Social Care approach is to meet the needs of the most vulnerable members of Norfolk's community. The social care staff and their partners are working together to find ways to improve people's outcomes whilst reducing the number of people reliant on commissioned services. This will include an early intervention approach providing early advice and information to stop things from getting worse, which will also help to minimise the cost of care packages for everyone.

This will include exploring how to meet people's care and support needs in other ways to ensure that the limited resources available are fairly shared.

The Council has committed to ensuring that social work practice is consistent and adhere to the social work principles below.

- **Comply with the legal framework for adult social care**
- **Timely and defensible decision making (and recording)**
- **Offer alternatives to traditional care services**
- **Always aim for outcomes that aim to maximise independence**  
**legal framework for adult social care**

## **Health**

Under the auspices of the Sustainable Transformation Plan is a mental health work stream taking forward specific pieces of work to support emotional wellbeing. Appropriate access to mental health services for people with a learning disability and autism through reasonable adjustments – known as the Green Light Toolkit – is being embedded into core service delivery.

## Making the change happen

If we are to achieve our vision, that *all people with a learning disability are treated equally as members of their community and are recognised for their strengths*, everyone who is involved in the lives of people with a learning disability have an important role to play in making this happen.

This includes friends, family and the wider community, in addition to the local authority, social care and health commissioners of targeted and specialist services.

The types of services and support people may receive can be divided into 4 groups that often reflect the level of need or specialist knowledge required to address a specific issue. It would be expected that everyone should be able to access community and mainstream services even with a bit of help. However, for some people this is not enough and additional more specific or specialist knowledge it required. Most of us can receive support from more than one of the groups of support.

### **The 4 groups of support are:**

**Family, Community and mainstream:** such as family members, partners, neighbours, community members and groups, self-help groups and advocates.

Plus, services for all such as information and advice; general practices, leisure centres and community centres.

**Targeted Support (Community Plus):** Community and mainstream support is suitable and accessible through additional reasonable adjustments and short-term support. Sometimes there will be specific services in the community aimed at people with a learning disability that people and their carers / family can access.

**Commissioned and Named worker:** Support is case managed and coordinated by a named worker for people that have more needs such as supported housing, care packages and specific group activities and day centres.

**Specialist:** services such as placement in registered accommodation or specialist skilled teams with additional knowledge of people with a learning disability, associated conditions and provide support such as positive behavioural support and teams.

Every effort will be taken to prevent people going into a hospital or long term residential placement, unless it is to enable the recovery and protection of needs associated with health and wellbeing.

To achieve our goals, we must work together towards the same priorities and principles. Through co-production we have identified the priorities we want to achieve together, and these are detailed below. In addition; [My Life, My Ambition](#), [My Future](#) also identifies the need for proactive, preventative and strengths-based approaches, in everything that we do.

The NHS and Norfolk County Council are working together to make sure that there is the right type of support in the community to help prevent more people needing specialist support by responding to needs earlier and stopping them from getting worse.

This is important as the specialist and reactive support is more expensive than preventative and enabling support and we need to as a partnership help make the resources reach as many people as possible when they most need it.

## Delivering My Life, My Ambition, My Future



The Learning Disability Partnership Board will have a **BIG** role to play in the delivery of the Key Priorities identified in *My Life, My Ambition, My Future* and the delivery of the agreed partnership principles.

In addition, the Learning Disability Partnership Board will provide co-production, participation and opinion on other projects where it may impact on the lives of people with a learning disability or their families as part of the equality impact assessment.

In order to do this the existing Learning Disability Partnership Board agreed the introduction of working groups to prioritise the actions and have oversight of the activity so that work doesn't happen in isolation.

The working group will link to the Local area partnership groups to ensure local delivery of priorities and receive information about the local issues. The working groups will feed into the new LD Partnership Board progress and any challenges. The LD Partnership Board will include all the core partners for the delivery of [My Life, My Ambition, My Future](#) and assure themselves of the delivery of the Partnership Principles.

### **Engagement, Participation and co-production in everything we do**

In all the above, the Council and its partners will proactively engage with people and embed Co-Production practices, in their activity, to ensure the Partnership Principle in [My Life, My Ambition, My Future](#) *is delivered*.

### **Thank you**

Thank you to everyone that has been involved in developing [My Life, My Ambition, My Future](#) especially the co-production group who supported over 800 people to share their views.



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# APPENDICES

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## Appendix I: Glossary of Terms

<b>Term/Word</b>	<b>Helping you to understand the words we use</b>
<b>actions</b>	things we have to do
<b>advocacy</b>	getting your voice heard and being able to say your views and concerns
<b>approaches</b>	is the way of doing something and often makes sure that people all work in the same way
<b>assessment</b>	finding out what someone's needs are
<b>carer/carers</b>	a person who provides support and looks after someone - in this document we mean family carers, and this can at times include people with learning disabilities who care for other family members
<b>commissioning</b>	buying services
<b>consolidating</b>	bringing things together to make them stronger
<b>cost effective</b>	If something works well but is also not too expensive
<b>direct payment</b>	having money to buy your own services

<b>diversity</b>	we are all different people, and everyone has their own different needs and things they believe in or are important to them
<b>eligibility criteria</b>	When people ask social services for support they use a guide called an 'Eligibility Criteria' which looks at the sort of situations in which people could qualify for a full assessment and services.
<b>enabling/enabled</b>	to make possible or to support to make something happen
<b>framework</b>	a plan
<b>fuller life</b>	a life with more choices and opportunities
<b>high support needs</b>	people who have a lot of health and care needs
<b>implement</b>	to put into action or to carry out a plan
<b>independence</b>	having choice and control over your own life
<b>inequalities</b>	people who should receive the same service, but don't
<b>involvement</b>	being part of something – like a meeting or having your say
<b>Learning Disability Awards Framework</b>	this is training that all staff who work with people with learning disabilities should do, especially new staff



<b>Learning Disabilities Mortality Review</b>	Also known as National LeDeR Programme this aims to make improvements to the lives of people with learning disabilities so that any preventable issues or conditions such as constipation that has resulted in serious consequences are recognised earlier.
<b>minority ethnic groups</b>	people whose families were originally from different countries
<b>monitor</b>	to find out if things have been done
<b>objectives</b>	the things we need or want to do
<b>outcomes</b>	the end result
<b>participation</b>	to share or take part in – an example is to take part in meetings
<b>Partnership Board</b>	The Government's White Paper 'Valuing People' asked every Local Authority to set up a Partnership Board (which is a meeting of lots of different people) in their area to improve the lives of people with learning disabilities and to provide better support to family carers
<b>partnership working</b>	everybody working together
<b>person centred</b>	making sure that everything we do has the person involved and at the centre of everything that happens with them
<b>personal budget</b>	Money allocated to meet a person's unmet need as identified in their social care assessment
<b>presence</b>	being part of something
<b>protocols</b>	a plan for working together

<b>provision</b>	services that are provided
<b>quality</b>	making sure that we have good services that meet people's needs
<b>registered social landlords</b>	Social landlords are people who run businesses, not to make a profit, to provide homes for people to live in.
<b>review/reviewed</b>	looking back at the past and planning to make changes if they are needed
<b>services</b>	Things or help that is provided which are needed to carry on our lives. Examples are a bus service which helps people to go from one place to another or a doctor who provides a service if you are not well
<b>specialist</b>	somebody or a service which has a lot of experience in an area of work
<b>strategy</b>	a plan – often this is a main plan covering lots of different areas
<b>supported accommodation</b>	Having the right support to be able to live in your own home - either alone or with friends
<b>supported employment</b>	having the right support to be able to have a job – this could be a paid or unpaid job
<b>transition</b>	this is what we call a time of change – an example is moving from being a child and being at school to becoming an adult and going to work or college or planning for older age

## Appendix II: References



If you need this report in large print, audio, Braille, alternative format or in a different language please contact 0344 800 8020 or 18001 0344 800 8020 (textphone) and we will do our best to help.



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