

Valuing People Now: Partnership Board annual self assessment report template 2009-10

Please send your completed form to your Valuing People Programme Lead by 31 March 2010.

If you have any queries about your form, please contact your Regional Valuing People Programme Lead.

How to complete your form

- 1 Make sure you've included the name of your Partnership Board in the filename. This will help us to keep track of all the forms sent back to us.
- 2 Complete the form on your computer.
You can key your answers into the spaces provided, and also copy and paste information if appropriate.
You can save your form, so you don't need to complete it all in one go. Always make sure you save the form as you work.

What to do when you've completed your form

When you've completed your form, you need to share it with the members of your Partnership Board so that they can sign to say they agree with the information you've provided.

- 1 Save the file and print copies for all members of your Partnership Board. You can email the form to the members as long as they'll be able to open it.
- 2 Ask all of the people listed in section 20 of your form to date and sign the form to say they agree with the information you've provided.
You can use electronic signatures or ask people to sign a hard copy. Make sure you keep the signed copy safe as proof that the members have signed.
- 3 Email the final, agreed version of the report to your Regional Valuing People Programme Lead.

What happens next

Once they have all the forms, the Regional Valuing People Programme Leads will put together the regional overview report for the National Learning Disability Programme Board.

You can publish your report in April 2010 if you wish. Please use your form to help with future planning.

Regional Valuing People Programme Leads

Region	Name of Lead	Email address
North West	Dave Spencer	dave.spencer@northwestjip.nhs.uk
North East	Paul Davies	paul.davies@dh.gsi.gov.uk
Yorkshire and Humber	Jenny Anderton	jenny.anderton@dh.gsi.gov.uk
West Midlands	Chris Sholl	christine.sholl@dh.gsi.gov.uk
East Midlands	Helen Mycock	helen.mycock@dh.gsi.gov.uk
East of England	Liz Williams	liz.williams@lbbd.gov.uk
London	Debbie Robinson	debbie.robinson@dh.gsi.gov.uk
South West	Sue Turner	sue.turner@dh.gsi.gov.uk
South East	Jo Poynter	jo.poynter@dh.gsi.gov.uk
	Jean Collins	jean.collins@dh.gsi.gov.uk

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- All figures requested below relate to *adults* with learning disabilities (aged 18 and above unless otherwise stated) who are known to services (local authorities and/or health services) and their families. (Care should be taken not to double count those people known to both local authorities and health services.)
- All information to be collated from April 2009 to March 2010 data.
- The quantitative data should be drawn from existing data collections (see Appendix D in the full guidance document *Good Learning Disability Partnership Boards* for a list of sources). Health and social care data from national returns to be taken from the August 2009 figures.

1 Name of local authority and Primary Care Trust(s)

Wokingham Borough Council (WBC) and Berkshire West NHS

2 Local picture

Please give descriptions using full sentences or bullet points. Please give both amounts AND percentages, in all cases (where appropriate/possible).

You may want to use information from your Joint Strategic Needs Assessment (JSNA) or Care Quality Commission Self-assessment return. If your JSNA does not currently include this information, you may want to use the information you collect here to help with future assessments.

2.1 Description of area covered.

Please include:

- geographical spread
- whether rural or city
- local authority type, such as shire county, unitary authority, metropolitan district, London borough
- NHS bodies in the area
- Prison Partnership Board.

Wokingham borough is located in Berkshire, in the Thames Valley, to the west of London. The borough is governed by Wokingham Borough Council which has been a unitary authority since 1998. It covers an area of 179 square kilometres and is ranked the second most affluent local authority area in England and Wales (1).

The Department for Environment, Food and Rural Affairs (DEFRA) classifies Wokingham borough as a “large urban” local authority.

The borough comprises of 25 wards, which are grouped into neighbourhood areas. The majority of the Borough’s residents live in Woodley, Earley and Wokingham town, while about one third of the population lives in smaller settlements in rural areas. Household projections produced by the Department for Communities and Local Government state that by 2011, there will be about 61,000 households in the borough (2).

The Wokingham borough falls into the Berkshire West Primary Care Trust, which in turn falls within South Central Strategic Health Authority. Berkshire Healthcare Foundation Trust provides some specialist learning disability services. Royal Berkshire Foundation Trust is our nearest acute trust.

There is no prison in the Wokingham area.

2.2 Description of *general* population.

Please include:

- total population of adults aged 18 and above
- a breakdown of socio-economic status
- number of young people not in employment, education and training (NEETs).

Wokingham borough has an estimated population of 156,600 people (3). Wokingham is a predominantly wealthy area with high levels of employment and economic activity, good economic prospects and high average earnings. However, there are pockets of relative deprivation where social circumstances and health outcomes are worse than for the rest of

the population.

Compared with the United Kingdom, Wokingham borough has a higher proportion of people aged 35 to 54 and slightly more school-age children. There are fewer people aged over 65 years than average for England, with about 13% of the population in this age group; this is expected to rise to nearly 20% by 2029. The estimated population of people aged 18 and above is 121,800 (4).

As of January 2010 the number of young people not in employment, education and training (NEETs) in the Wokingham borough is 186. (5)

The 2001 census reported that 6.1% of residents describe themselves as being from black or minority ethnic (BME) groups. A more recent analysis conducted in 2006/7 using ONS mid-point estimates demonstrated that this figure has risen to between 10%-12% (6)

Generally educational achievement is high, although it is significantly worse for children who have free school meals than for other children in the area.

Employment levels are above the national average and a high proportion of households are owner-occupied. While the proportion of council homes classed as non-decent has fallen, it is still higher than the national average (7).

2.3 Description of population of people with learning disabilities, aged 18 and above, known to services.

Please give the total population (number) of adults with learning disabilities known to services.

In 2008 WBC set its social care eligibility threshold at critical only. According to current records, 436 adults with Learning Disabilities have an open referral with the Community Care Service in Wokingham (8). Of these 436 people, 55 live outside of the Wokingham Borough. A significant number of people were resettled in the Wokingham community following the closure of two long stay hospitals in the Berkshire area. Wokingham Borough is also the location for a large intentional community, called Ravenswood Village. 133 people live in residential care homes on this site. 10 people have their social care needs met by Wokingham Borough Council, but they all make use of local community facilities and access local health services (9).

In the past year there have been 40 young people (aged 16-18 years) with a learning disability referred from Children's Services to the Community Team for People with Learning Disabilities (CTPLD). In addition to this, the planning information that we hold predicts there will be 45 young people (currently aged 14 and 15 years old) who are likely to require support from Community Care services when they turn 18 (10).

Anecdotally people with a learning disability in our area are living longer than ever before. The 2009 Joint Strategic Needs Assessment (JSNA) states the number of people with moderate to severe learning disabilities aged over 65 is expected to rise in coming years. There are 22 people aged 65 and over currently in receipt of services, in 2015 this number is predicted to rise to 75.

The Borough Council directly provides:

- Day services
- A supported housing service
- Prevention services
- Supported employment

The learning disability day service, currently serves 165 people (11). Wokingham's large centralised day centre has been replaced with 3 locality based services with an emphasis on integration and social inclusion. Consisting of a Wokingham base at the Acorn Community Centre, an Earley base at the Crescent Resource Centre, and a Woodley base at the Woodley Youth and Community Centre.

The Self Assessment Survey (SAS) from 2009 rated Wokingham Borough Council as outstanding for NI 146 (people with a learning disability in employment). Currently 17% of people with learning disabilities known to Wokingham Borough Council have paid employment. (12)

The majority of people with learning disabilities live within the family home or residential care (160 and 155 people respectively). Wokingham Borough

2.4 Number of adults with a learning disability who are known to services
(and percentages of total population as given in 2.3)

	Number	%
Age 18 to 64	414	95
Age 65+	22	5
Male	278	64
Female	158	36

Ethnic breakdown of adults with a learning disability (and percentages)

Asian/Asian British 9(2.1%), Black/Black British 7(1.6%), Mixed Any Other Mixed Background 2 (0.5%), Mixed White and Asian 2(0.5%), Mixed White and Black African 1(0.2%), Mixed White and Black Caribbean 2(0.5%), White British 368(84.4%), White Irish 4 (0.9%), White Other 34(7.8%), Other Ethnic Background=2(0.5%), Declined=1(0.2%), Not Recorded = 4(0.9%)

The following three categories marked with a * are mutually exclusive - please do not count more than once.

People with complex needs*	85	19
People who exhibit behaviour that challenges services*	65	15
People with learning disabilities who also have autism*	121	28
Living with family carers aged 65+	40 - 45	9 - 10
Who are parents	4	1
Aged 18 to 25 in part-time education	unknown	
Aged 18 to 25 in full-time education	unknown	
Aged 18 to 25 in local education	unknown	
Aged 18 to 25 in residential education	7	2

2.5 How are the specific needs of people with learning disabilities highlighted in your JSNA met? Please give examples.

The needs of people with a learning disability are not referred to specifically in the JSNA, but is included in commentary around social care customers in the borough. Some examples include:

Householders on low incomes are more likely to be unable to heat their homes sufficiently. Cold homes are linked to higher rates of winter mortality and cold damp conditions can promote fungi and mould growth linked to conditions such as bronchitis and asthma. WBC have invested in sign-posting and information services such as the Citizen Advice Bureau and prevention services. WBC also have a Benefits Advice Team to help vulnerable people maximise their income.

The Wokingham Crime and Disorder Reduction Partnership is responsible for identifying issues affecting public safety within the borough and creating a partnership plan to address key local priorities for the coming year. One of the identified priorities which particularly affects people with a learning disability is the reduction of hidden and hate crime.

The JSNA identifies people with learning disabilities at particular risk of developing the condition dementia. A local action plan is in place to address the objectives outlined in the National Strategy for Dementia and includes the development of a Joint Commissioning Strategy for services in all areas of NHS Berkshire West.

2.6 What is being done to improve information that informs planning and commissioning of services for people with learning disabilities.

- The Commissioning Forum is a multi-disciplinary panel of people (including a budget manager, social care practitioners and representatives from commissioning, contracts and finance teams). The purpose is to pool knowledge and intelligence to make decisions on things such as the setting of Personal Budgets and nominations towards housing vacancies.

- Joint working between Adults' and Childrens' Services. The Transition Mapping List is a list of all children and young people with a statement of educational needs, held by the Disabled Childrens' Team. Once a referral has been made to CTPLD the young person is placed on a future needs spreadsheet. This spreadsheet contains important planning information and aims to anticipate the financial implications once they have turned 18years. This enables us to forecast the needs of those moving in to the adult learning disability service and make plans/design services in order to meet those needs.

- The housing needs of people with a learning disability is currently recorded on a database. Individuals who either need to move or have requested a move are listed together with accommodation vacancies. Potential matches are identified at the Commissioning Forum. A new housing needs project is underway to improve the level of detail that is collected, and how this is utilised to inform Local Authority housing and strategy colleagues.

- In May 2009 a Strategy for Adults with an Autistic Spectrum Disorder living in the Wokingham Borough was published. The Wokingham Learning Disability Partnership Board commissioned a third sector partner to produce the report and funding was provided by Wokingham Borough Council. The results of a consultation involving local people with ASC their families and other relevant stakeholders formed the basis of the report. This strategy has already resulted in the roll out of a comprehensive training programme for all relevant stakeholders, including council staff and those from the private and voluntary sector and universal services. A further outcome has been the commissioning of accommodation based support for people with ASC, and a family support programme. An autism partnership will be launched in the next few months to draw together a specific action plan for the borough, engaging relevant stakeholders.

2.7 Please give details of any other progress made, including:

- people with learning disabilities in the criminal justice system
- people with learning disabilities detained under the Mental Health Act (local authorities and PCTs have this information)

WBC CTPLD currently supports 1 individual on license and 2 people detained by the Mental Health Act.

WBC has a newly appointed At Risk Coordinator. This post aims to support vulnerable people (including people with learning disabilities) who are in contact with the criminal justice system or at risk of offending, or experience high levels of risk for any other reason.

There is an established protocol for managing vulnerable adults whose needs don't "fit well" with community care teams, the 'case determination panel'. When a vulnerable adult initially presents to Community Care Services and does not fit the standard framework (i.e: does not have a diagnosed learning disability or persistent and enduring mental health needs) a panel of senior officers make a joint decision about which team will best meet that individual's needs. The At Risk Coordinator supports the panel and together they continue to track vulnerable adults for as long as necessary.

3 Partnership Board arrangements

3.1 Please give details of your Partnership Board.

Frequency of meetings

1x Core Group 1x Big Meeting 1x Self Advocate Workshop (every 6 weeks)

Details of sub-groups

The Wokingham LDPB currently has 9 active sub groups. Each sub group has adopted Terms of Reference and a working Action Plan. The sub groups are:

- Choice and Control (Personalisation)
- Housing
- Health
- Employment
- Transition
- Workforce
- Relationships
- Carers
- Advocacy

We also have links to groups outside of the Partnership Board structure, which are working to Valuing People Now objectives, including: A self advocacy group hate crime campaign, WBC community transport pilot and autism partnership.

Date of last review of Partnership Board arrangement

19th January 2010

3.2 Please give details of the structure and membership of the Partnership Board.

Roles and representatives

Wokingham Learning Disability Partnership Board (LDPB) has well-developed structures and governance arrangements to the point where we are seeking independence. In 2009 WBC and the LDPB selected a third sector User Led Organisation to host the Partnership Board. Primarily, this has provided the LDPB with an office base and access to banking facilities. This new arrangement took effect in January 2010, and the new base has provided opportunity for the Partnership Board to increase its information and sign-posting function.

The LDPB has a good working relationship and strong links to commissioning bodies (WBC and Berks West NHS) and other boards (such as the Wokingham Borough Strategic Partnership a group of public,

private, voluntary and community stakeholders working together to improve the borough). We are also developing links with the Older People Forums, Wokingham Ability Partnership (for people with physical and sensory needs) and the Mental Health Implementation Team.

2 self advocates from Wokingham represent the South East Regional Forum of People with Learning Difficulties on the South East Regional Programme Board.

The LDPB has established methods of including people with learning disabilities (see below for further information).

Since 2003 the chairing arrangements of the board have sat outside of the Local Authority and PCT. The LDPB is currently co-chaired by a person with learning disabilities and a senior manager from a local provider organisation. We have an established protocol to vote people in to chair. The co-chairs stand for a maximum 3 year term and elections take place at the Annual General Meeting.

The Partnership Board has a full time Development Manager whose role is to coordinate Partnership Board activity and oversee progress against agreed targets. A part time Administrator is responsible for Partnership Board communications.

The Wokingham LDPB operates an open membership policy. We have a wide spectrum of activity, all of which we view as the 'Partnership Board' (This makes it difficult to specifically answer the questions below about numbers of people involved and ethnic breakdown):

- The Big Meeting, regularly attracts between 30-40 people. It is an opportunity to share local and national information and consult on important issues.

- The Core Group, membership consists of people with learning disabilities, family carers, senior council officers, an elected member, head of strategic partnerships for the PCT and representatives from the private and voluntary sector. This is the only 'closed group' in so much that members have a seat due to their position or are chosen to represent a particular group. Last year we introduced an agreed roles and responsibilities document for core group members. The Core Group is responsible for the allocation of the Learning Disability Development Fund and monitors progress against Valuing People Now objectives. Where there is a major decision about structure or governance, the Core Group will present a proposal to the Big Meeting for 'sign-off'.

- The Self Advocate Workshops are meetings specifically for people with

learning disabilities. These workshops focus on one topic at a time and are delivered at a pace and level appropriate to the audience.

In addition to this the Board hosts an annual planning event for the leads of every sub group (The Leads Event), an Annual General Meeting and one-off events driven by local priorities, such as the Housing Conference in June 2009.

We also have over 260 people who subscribe to our mailing list. These people are kept informed via the Partnership Board website, a quarterly Partnership Board newsletter and weekly notices.

Number of people with learning disabilities	Male	12	Female	10
Number of family carers	Male	1	Female	4

Ethnic breakdown of people with learning disabilities and family carers

This is not info we have previously collected as we don't operate the LDPB on a membership basis. However, the Core Group has 2 male self advocates who identify as White British, One female carer who identifies as Black British and one male carer who identifies as White British.

Members that have complex needs	0
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3.3 Please describe how your Partnership Board has invested in, and supported, leadership, so that members of the Board and associated task groups who are people with learning disabilities or family carers have become real partners in the planning and decision-making processes alongside professionals.

Include examples and evidence

- The LDPB is the forum through which people with learning disabilities and family carers are consulted at a local level on major decisions and plans. An example of this is 2 consultation events hosted by the LDPB in February and March 2010 about the Council's proposed changes to Adult Social Care, as part of the Putting People First Transformation Programme. Information was presented in an accessible and interactive way. Feedback was collected and formally submitted to the Local Authority. The LDPB also worked in conjunction with the Council to produce easy read guidance based on the questions and issues raised at the 2 events.

- There is a clear decision making process for the allocation of the Learning Disability Development Fund, that involves people with learning disabilities and family carers.

- We worked jointly with a local self advocacy organisation to commission a Leadership Course, which LDPB Co-Chair candidates were invited to

attend (prior to Co Chair elections at the LDPB Annual General Meeting).

- The LDPB has 3 part time inclusion workers that ensure meaningful participation of people with learning disabilities in the work of the Board. This support is not only provided during meetings but also to help people prepare and follow up after a meeting has taken place. One of the inclusion workers that we employ has a learning disability himself.

- LDPB material is presented in a variety of formats and all documents are published in easy read.

- Meeting venues are accessible and support with transport arrangements is provided. Remuneration of travel expenses is available for family carers and people with learning disabilities involved in the work of the Board.

- Themes for self advocate workshops are selected by people with learning disabilities, to ensure the Board focusses on what is important to local people.

- People with learning disabilities take a lead role in the delivery of self advocate workshops and Big Meetings.

- Family carers are offered a standing agenda item at the Big Meeting.

- The Carers Sub Group is working to increase carer involvement in all aspects of the Board.

- A carer representative on the Core Group has determined the LDPB's primary campaign for 2010: Improving support to people with the most complex needs.

- Carers were involved in writing WBC's Carers Strategy.

- In addition to individual carer representatives, 3 local carers' organisations regularly attend LDPB meetings and share information with their respective members.

4 Overall budget

4.1 What is the overall budget for services for adults with learning disabilities across health and social care?

£ 12,946,091

4.2 Is it a pooled budget?

Yes No

4.3 Is there a Section 75 agreement in place?

Yes No

4.4 How is it spent?

Please give actual figures and percentages

	£	%
Residential care	4,896,110	38
Nursing care	115,270	1
Supported living	3,056,190	24
Hospital care, including where known:		
- acute hospital		
- specialist inpatient services	273,491	2
- NHS campuses		
Day services	1,008,237	8
Community Learning Disability Team	471,570	4
Advocacy arrangements and support	97,090	1
Other (please specify)		
See appendix for breakdown	3,008,553	23

4.5 Has there been an efficiency savings programme in learning disability services in 2009 -10?

Yes No

4.6 Is there a planned efficiency programme for 2010 -11?

Yes No

5 The health of people with learning disabilities

5.1 Have you completed the regional health self-assessment and performance framework?

Yes In progress No

5.2 If you have answered in progress or no, indicate when you expect this assessment to be completed or started.

Started Completed

5.3 If you have answered yes, please complete the following summary table based on the most recent results of that assessment.

RAG rating	Red	Amber	Green
NHS campus closure	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Addressing health inequalities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Making sure people are safe	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Continuing to achieve other <i>Valuing People Now</i> health commitments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5.4 If you have answered yes, please give details of the overall headline health needs of people known to services - from regional health self-assessment and performance framework.

In general the health needs of people with learning disabilities in Wokingham has improved over the last couple of years following developments that led to improved access to health services within the area. Development of new roles such as primary healthcare liaison role and an acute liaison post has enabled services to be more accessible and empowered people with learning disabilities to become more aware of their health and become involved in prevention and promotion strategies. Annual health checks have now been in operation for three years in the Wokingham area. The outcome from the health checks has enabled services to identify the composition of the overall health needs of people with learning disabilities within the area. These include Diabetes, weight management and nutrition, eye care, epilepsy, access to screening and personal care.

As a result we have been able to develop a number of actions that have evolved in good practice in meeting the health needs of people with learning disabilities in the Wokingham area. The areas of good practice are listed as follows:

- Diabetes: A link learning disability nurse undertook specialist training for diabetes and now works in partnership with the diabetic services both in facilitating people with learning disabilities with their care and identifying the number of people known to the service.
- Weight management: A weight management group was set up by the good health sub group to enable people with learning disabilities to learn about nutrition and have access to weighing facilities and advice. This project resulted in a number of people being successful in losing weight. As a consequence the project has now expanded to include physical activities and exercises and has been integrated into a community facility.
- Eye care: Annual health checks revealed that people with learning disabilities were not accessing services for eye checks. The good health sub group is currently working with local services and SeeAbility to conduct training with local services, raise awareness amongst people with learning disabilities and their carers with the aim of increasing uptake of screening.
- Epilepsy: A project has been in operation this year to deliver an educational and support group to people with learning disabilities and epilepsy with the aim of enabling people to gain a better understanding of their condition. The outcome led to people with learning disabilities developing their own recording resource to help them in managing their condition and for reference in consultations with health staff.
- Access to screening: In the last year we have worked very closely with the cancer services in improving access to this service for people with learning disabilities. The cancer nurse specialist has worked with all services in the Wokingham area to improve relationships and deliver training to staff. The findings have shown that people with learning disabilities are beginning to access this service.
- Health Action Plans: The development a few years ago of the health Action Plans enabled people with learning disabilities to have a plan of care that allowed them to make choices about their general health. As the resource has been in operation for a couple of years, it was an ideal opportunity to review it and explore its effectiveness. The local advocacy group carried out the review. Following their review the resource was adapted to fit in with their perceived needs. The booklet has been amended and further consultation was carried out with people with learning disabilities. The final draft is now ready for review. It has also been agreed by local services that a health action plan will now be offered to all new referrals the services receive.

5.5 If you have answered in progress or no, please provide the following information. Otherwise go straight to section 6.

Percentage of GP practices in your area that have signed up to provide annual health checks as a Directed Enhanced Service (DES).

 %

Percentage of adults with learning disabilities known to local authorities who were offered health checks in the year up to 31 March 2010.

 %

Percentage of adults with learning disabilities known to local authorities who received a health check in the year up to 31 March 2010.

 %

Are people with learning disabilities involved in learning disability awareness training to primary healthcare staff as specified in the DES?

 Yes No

How are family carers being involved as partners in improving healthcare for people with learning disabilities?

Percentage of people known to services who have health action plans that have been reviewed in the year up to 31 March 2010.

 %

What are the arrangements for strategic healthcare facilitation in your area?

How many General Hospital (Acute) Trusts are there in your locality?

How many General Hospital (Acute) Trust Learning Disability Liaison/Facilitator (or similar) posts are employed in your area?

Are the needs of people with learning disabilities and the health inequalities faced by them highlighted within each Trust's Disability Equality Strategies/policies (PCTs and provider Trusts)?

Yes No

Has your Partnership Board taken the opportunity to comment on the performance of local Trusts as part of the Care Quality Commission's (CQC's) annual health check?

Yes No

What progress have you made on the Green Light Toolkit for access to mental health services? What was your rating in the last CQC indicator set?

Is a local multi-disciplinary service in place to meet the needs of people whose behaviour challenges services, or is one being commissioned?

Yes No

Are there prisons or young offenders institutions or other secure settings in your area?

Yes No

If so, have you met with the Prison Partnership Board?

Yes No

Progress in carrying out the review recommended by the Ombudsmen's report (*Six Lives: the provision of public services for people with learning disabilities*) and report to Boards due by May 2010.

6 Where people live

- 6.1 Please use the data from your Adult Social Care Combined Activity Return (ASC-CAR) for NI 145 (see Appendix E for blank table), to give the numbers and percentages of individuals known to services (aged 18-64) who are defined as being in settled accommodation against the NI 145 categories.

Please give actual figures and percentages	Total	%
Owner occupier / Shared ownership scheme (where tenant purchases percentage of home value from landlord)	1	0.2
Tenant - Local Authority / Arms Length Management Organisation / Registered Social Landlord / Housing Association	50	12
Tenant - Private Landlord	10	2.4
Settled mainstream housing with family/ friends (including flat-sharing)	102	24
Supported accommodation / Supported lodgings / Supported group home (accommodation supported by staff or resident caretaker)	2	0.5
Adult Placement Scheme	3	0.7
Approved premises for offenders released from prison or under probation supervision (eg Probation Hostel)	0	0
Sheltered Housing / Extra care sheltered housing / Other sheltered housing	0	0
Mobile accommodation for Gypsy / Roma and Traveller community	0	0
Total	168	40.3

6.2 Please use the NI 145 data to give a similar breakdown for people (aged 18-64) defined as not being in settled accommodation.

Please give actual figures and percentages	Total	%
Rough sleeper / squatting	0	0
Night shelter / emergency hostel / direct access hostel (temporary accommodation accepting self-referrals)	0	0
Refuge	0	0
Placed in temporary accommodation by Local Authority (including Homelessness resettlement) - eg bed and breakfast	0	0
Staying with family/friends as a short-term guest	0	0
Acute / long-stay healthcare residential facility or hospital (eg NHS or Independent general hospitals / clinics, long-stay hospitals, specialist rehabilitation / recovery hospitals)*	2	0.5
Registered Care Home*	86	20.1
Registered Nursing Home*	2	0.5
Prison / Young Offenders Institution Detention Centre	0	0
Other temporary accommodation	0	0
Total	90	21.6

6.3 Please give additional data to show numbers:

In residential settings (see categories marked*) <i>in</i> local authority area	49
In residential settings (see categories marked*) <i>out of</i> area	41
Supported to live independently (NI 136)	280

7 Provider market

7.1 Does your provider market reflect the needs of your current and future population?

Yes No

7.2 If you have answered no, in what ways does it need to change?

In some ways the provider market reflects local need, but overall it does not.

There is too much residential care, a shortage of housing and not enough choice of providers. There is also still some difficulty supporting people locally who have very complex/high risk needs.

There are also some things that are currently changing: The Council is supporting micro enterprise, which is a really positive development. There is good support for people who have direct payments to manage that direct payment. The Council is also investing in User Led Organisation development, to increase support for people that would like to plan their own support and employ their own staff etc. The council has had an ongoing programme to modernise its day service. This has seen a re-provision to community based support. To develop the market further the council is intending to move all its directly provided services into a council owned trading company. This will allow for the further development of these services and the ability to trade with individuals directly to aid personalisation. The council has also increased its investment in prevention services which are actively supporting people with a learning disability and their families.

There are action plans to address all of the things that need to change.

7.3 What percentage of your market is: %

In house

Voluntary

Public sector

7.4 Do you plan to change these percentages?

Yes No

8 Employment

- 8.1 Please use the data from your Adult Social Care Combined Activity Return (ASC-CAR) for NI 146 (see Appendix E for blank table) to show the numbers and percentages of working age learning disabled people known to local authorities who are in paid employment (including being self-employed) at the time of their latest assessment or review, against the NI 146 categories.**

Please give actual figures and percentages	Total	%
Working as a paid employee or self-employed (30 or more hours per week)	1	0.2
Working as a paid employee or self-employed (16 to less than 30 hours per week)	2	0.5
Working as a paid employee or self-employed (4 to less than 16 hours per week)	19	4.6
Working as a paid employee or self-employed (more than 0 to less than 4 hours per week)	23	5.5
Working regularly as a paid employee or self-employed but less than weekly	1	0.2
Total	46	11
Working as a paid employee or self-employed and in unpaid voluntary work	0	0
In unpaid voluntary work only	4	1

8.2 Please also state the number of people in paid employment who work for:

The NHS	1
A local authority	5

8.3 How many people known to services are not working?

367

8.4 How many people known to services who currently work less than 16 hours a week are known to want to work 16 hours a week or above in the future?

data not collected

8.5 Do you have an up-to-date local employment strategy for people with learning disabilities in line with *Valuing Employment Now: real jobs for people with learning disabilities?*

Yes No

9 Advocacy and leadership

- 9.1 **Has your Partnership Board developed a clear plan for working with and supporting all communities of people with learning disabilities and advocacy groups in the ways outlined in the *Valuing People Now* Delivery Plan?**

Yes No

- 9.2 **Can your Partnership Board show how it has invested in, and supported, self-advocacy and peer advocacy leadership so all people with learning disabilities are represented on the Board and have become real partners in local planning and decision-making processes through this representation and via strong links to work programmes?**

This should include leadership and representation from all ethnic communities and the inclusion of people with more complex needs.

Advocacy support provided in the borough for vulnerable adults is being reviewed in line with Putting People First. At a recent event, local groups and organisations contributed to possible future models for advocacy. A procurement process will follow, which will be inclusive of people with a learning disability.

The LDPB spends Learning Disability Development Fund money on an inclusion worker. We are currently reviewing arrangements and the Core Group have decided to continue to support inclusion and decision making in that way. The intention is to shape the inclusion role specifically to widen the focus to include people with complex needs and from minority groups

CLASP (Caring Listening and Supporting Partnership) is a local self advocacy organisation, which is supported through LDDF but also in terms of the inclusion worker. In 2008 the LDPB assisted CLASP in the opening of their own office in the centre of Wokingham town. Where people with learning disabilities can call in for advice, find out what is going on in their local community and join in campaigns to fight for their equal rights.

The LDPB Inclusion Worker has been involved in shaping the 'Choice Champions' course. This initiative aims to give people with learning disabilities the skills and experience to act as local leaders and mentors for personal budgets and self-directed support.

The Take Notice Group (the campaigning arm of CLASP) supported by the LDPB is taking lead on a Council initiative, the 'Safer Places Scheme' that will benefit all vulnerable people in the borough.

We have been working to improve representation of people with learning disabilities on Neighbourhood Action Groups and the Independent Advisory Group. This is as a result of the LDPB's work with Thames Valley Police on

hate crime, where the police have realised the benefits of having self-advocates in their associated community groups.

The Partnership Board is hosted by an organisation that is highly inclusive.

This year's primary campaign is about the inclusion of people with the most complex needs. We consulted with our members and the feedback and ideas for the campaign are being drawn together into an action plan. The plan will aim to increase involvement of people with complex needs in decision making. To support this campaign we will be allocating a proportion of our LDDF grant for 2010/11 towards the delivery of this plan.

(See section 3.3 for additional information)

9.3 What is the combined local authority and NHS spend on advocacy?

£

10 Family carers

10.1 Has your Partnership Board developed a clear plan for working with and supporting all family carers of people with learning disabilities in the ways outlined in the *Valuing People Now* Delivery Plan?

Yes No

10.2 Can your Partnership Board show how it has invested in, and supported, family leadership so *all* family carers are represented on the Board and have become real partners in local planning and decision-making processes through this representation and via strong links to work programmes?

- Personal invitations to family carers, providing information about the Board have been widely distributed via the CTPLD and 3 local Carers' Organisations.

- The Carers Sub Group has 4 carer representatives and is working to ensure that every other sub group has at least one carer representative

- 52 family carers regularly receive relevant local and national information through the LDPB circulation list. This information is sent electronically and via the postal system, depending on preference.

- The core group has 2 very engaged carers who really do influence decision making in relation to the Partnership Board.

- The Carers Sub Group is hosted/lead by Wokingham Mencap staff who sit on the Partnership Board.

(See section 3.3 for additional information)

10.3 How is the Partnership Board engaging with the mainstream carers' work arising from the National Carers Strategy* work at a local level, and what outcomes have there been for family carers of people with a learning disability, including people with learning disabilities who are carers in their own right?

**Carers at the heart of 21st-century families and communities: A caring system on your side. A life of your own., HM Government (2008)*

The LDPB is linked to the national picture via representation from WBC Carers Lead and Wokingham Mencap. The WBC Carers Strategy was consulted upon and draws on the national strategy. An example of an outcome is a review of information available to carers in the borough and the production of a Carers' Guide.

10.4 How many carers' assessments were provided in the last year?

41

10.5 How many carers with learning disabilities are known to the local authority?

10.6 How many family carers have benefited from regular short breaks?

10.7 What is the percentage of carers of people with learning disabilities receiving a needs assessment or specific carers' service, or information and advice (NI 135)?

 %

11 Parents with learning disabilities

11.1 How many parents with learning disabilities are currently receiving services in your area?

11.2 Is there a joint planning process with children and family services to support parents with a learning disability?

Yes No

11.3 Are materials to support all parents produced in accessible formats?

Yes No

12 Transition

12.1 How many young people with learning disabilities *aged 13 -17* are there within your area?

12.2 How many of those young people are placed out of area?

12.3 How many of those young people have had person centred reviews and have a person centred transition plan?

12.4 Are these reviews/plans focused on paid employment as an outcome?

Yes No

12.5 What total percentage of young people with person centred reviews have you achieved by 31 March 2010?

 %

13 Personalisation

13.1 Does the Partnership Board have a current strategy to embed person centred planning and a check on the quality of person centred plans?

Yes No

How does this inform commissioning?

PCP is embedded in our mainstreaming of self-directed support. All people with changing need, new assessment and people through transition receive a personal budget and person centred support planning as a default position. People have increasing choice and more individualised services. For example: an independent brokerage and support service offering personalised solutions, private sector leasing, shared ownership, personal assistants, 8 new micro-enterprises supported by NAAPS, transitional commissioning plans (breaking down block contracts), providers with transparent costings and in-house day services with a fully costed brochure for people to select from.

13.2 Are person centred plans being re-focused on getting a paid job as a goal?

Yes No

13.3 How are you making sure that groups who might be left out (e.g. people from black and minority ethnic groups, older family carers, people with complex needs) are fully included and that person centred approaches reflect culture, age and specific communication needs?

Self directed support is now our only way of supporting people who are new to us or want to change what they currently get. We have some very good examples of where people have arranged their support to suit their culture and lifestyle, because of the flexibility of personal budgets.

13.4 How are people with learning disabilities involved in co-production in transforming adult social care?

The best way for people to co-produce is to have a personal budget and to be involved in the design of their support. As of the end of January 2010, 171 people with learning disabilities have a personal budget. In addition to this:

- People with learning disabilities and their families as witnesses to a formal council member scrutiny process around social care reform. This informed the resultant report recommendations for improvement.

- Independent brokerage run by a User Led Organisation. Offers one to

one help with support planning but also regular drop-in workshops.

- Consultations have informed Adult Social Care reform including In Control pilot evaluation and Direct Payments survey.

- Choice Champions Course is a leadership course for people with personal budgets. This programme aims to give people the skills to offer peer support and training around self-directed support (therefore providing employment opportunities).

- A self advocacy organisation has been commissioned to produce easy read guides on subjects such as 'ways to manage your personal budget'

- Held events and workshops about Putting People First

13.5 How many person centred plans include employment and accommodation?

not collected

13.6 What is the number (and percentage) of people in receipt of direct payments and personal budgets (NI 130)?

37

9.7

%

14 Workforce development

14.1 Does the Partnership Board have an up-to-date workforce plan?

Yes No

14.2 Can you give details of the workforce which supports people with learning disabilities in your area (from the Skills for Care National Minimum Data Set for Social Care (NMDS-SC), the Integrated Local Area Workforce Strategy (InLAWS), the Social Services Staffing Collection (SSDS001) and other sources)?

Briefly describe what progress you are making on:

- learning disability awareness training for the workers in mainstream services
- involving people with learning disabilities and family carers in all workforce issues
- promoting human rights and Valuing People Now principles in all learning
- preparing the workforce for personalisation
- developing the workforce locally to support all people with learning disabilities, including people whose behaviour challenges services, people with complex needs, people from black and minority ethnic communities etc

LEARNING DISABILITY AWARENESS IN MAINSTREAM SERVICES:

- Stories of people with a learning disability using personal budgets were included in a DVD. 300 copies were given out to all vulnerable adult groups and staff, also shown to over a 100 new employees of the council not in the Community Care department through corporate induction.

- Photographic display of positive images of people with a learning disability using a personal budget displayed in public area of the main council offices for a month in February 2010.

- Listen To Us! is a group of 7 people with learning disabilities who design and deliver training, which aims to improve the way people with learning disabilities are perceived and treated. They have developed a training course designed for people in community-serving roles, which aims to promote equality and reduce discrimination. They have also run a successful learning disability awareness workshop in local secondary schools, which has an emphasis on anti-bullying. The plan is to roll this training out to all year 8 pupils across 4 local schools.

- A rolling programme of learning disability awareness training is in place for health care professionals working in General Practices across the borough. This is delivered as part of the training for Annual Health Checks.

- The good health sub group is working with the national organisation, SeeAbility to conduct training to local optometrists with the aim of improving eye care services for people with learning disabilities.

- The learning disability day service regularly take on police students for a 3 day placement as part of the students induction programme.

- A group of self advocates were recently invited to deliver a disability awareness workshop to members of the voluntary sector and local residents, as part of a Community Safety Conference hosted by Voluntary Action Wokingham Borough.

- The Safer Places Scheme is an initiative where local shops and businesses display a sticker in their window to indicate they are a safe place to go if a vulnerable person finds themselves in difficulty or danger. Local businesses who have signed up to the scheme are offered disability awareness training.

INVOLVING PEOPLE WITH LEARNING DISABILITIES AND CARERS IN WORKFORCE ISSUES:

- We routinely involve people with learning disabilities in the recruitment and selection of staff - both for WBC and for partner organisations.

- Family carers and people with learning disabilities have been involved in consultation about the future structure of adult social care services and related workforce issues.

- A local provider organisation employs a person with a learning disability in the role of Consultant Quality Advisor. The role of the advisor is to seek feedback from people with learning disabilities about the quality of support they get.

PROMOTING HUMAN RIGHTS AND VALUING PEOPLE NOW PRINCIPLES:

- In 2009 the LDPB wrote to all local providers, to raise the profile of Valuing People Now and enlist their support in disseminating information about the importance of Valuing People Now to their staff teams.

- The LDPB wrote an article about Valuing People Now, which featured in the Staff Bulletin (a publication for WBC staff).

- We have run a series of workshops about Valuing People Now targeted at people with learning disabilities.

- Attended a training day for day service staff to raise awareness of Valuing People Now.

- Standard equality and diversity training is compulsory for all WBC staff, and is offered to third sector organisations via Strive (a project that provides support and advice to the Private, Independent and Voluntary Care organisations)

- The Listen to Us! Trainers deliver a training course called 'Our Values' which gives social care staff a challenging insight in to what it is like to receive support. This is rooted in the principles of Valuing People Now and human rights. Since April 2009 55 staff have attended this training.

- Commissioning intentions and actions over the past year are to deliver support locally. There is commitment to prevent any out of area placements because we are unable to serve the person locally, this now only occurs if the individual has made that choice. Being strong on supporting people in local communities by its nature encourages the development of a local skilled workforce.

- A three tier (awareness, investigation and chairing and leading) safeguarding programme is up and running and available on a rolling programme. For all WBC social care staff and is offered to partner organisations.

- WBC have made a very significant investment in Autism Training as a direct outcome from our local Autism Strategy. A series of one day awareness training courses were co-presented with someone with autism. A 2 day advanced course will be rolled out in the near future.

PREPARING THE WORKFORCE FOR PERSONALISATION:

- To support the implementation of Putting People First, Wokingham CTPLD set out to redesign and reshape their systems. This involved a review of role, function and structure of the team to ensure that it was fit to deliver the outcomes of the personalisation agenda. CTPLD staff were fully involved in the development of a new team model. The work was steered and proposals drawn up by a smaller project group. The new model resulted in a split into 2 main team functions: assessment and review (statutory function) and support brokerage and long-term support. Partnership Board members were consulted in early 2009 and the team re-structure took effect in the summer of 2009.

- WBC held 8 x 3 hour workshops during May and July 2009 attended by all Community Care staff (The Big Conversation), to communicate more about Putting People First and ensure staff involvement in shaping the way we do things in the future.

- In December 2009 WBC ran 4 x 2 hour staff communication sessions to explain Wokingham's preferred model for Community Care Services to deliver self-directed support.

- There is a comments box located in the Council office buildings and regular staff drop-ins are held for Q and A's.

- Self Directed Support Training Programme has been created which covers range of stakeholders. The training content includes: how to explain the self-directed support process, understanding how to operate in the new system, the legal framework of self-directed support and different ways to manage a personal budget.

- Brokerage Training run between September and December 2009 attended by 15 staff who were members of the in-house brokerage team and 2 independent brokerage services.

- WBC are in the process of recruiting a new Self Directed Support Trainer who will be responsible for implementing a training programme for WBC staff and partners from the private, voluntary and independent sector.

- A variety of guidance documents have been produced for the local workforce. Including 'support planning', 'ways to manage a personal budget' and a toolkit for support plan sign off.

14.3 What are the key workforce challenges in your local authority?

- Engaging all the independent providers and obtaining accurate information, primarily due to the Wokingham area in relation to neighbouring authorities and health boundaries.

- Due to the recession we are getting applicants from a wider range of people with limited experience of learning disability. These individuals need a higher level of induction and support.

15 Hate crime

15.1 Number of hate crimes/incidents reported against people with learning disabilities

15.2 What progress have you made in strengthening the link between the Board and your local Crime and Disorder Reduction Partnership?

The Crime and Disorder Reduction Partnership is known as the Wokingham Community Safety Partnership. The LDPB are well represented and are active members of the Hate Crime Delivery Group. This is a multi agency group, which works to prevent and respond to all forms of hate crime. This group reports directly to the Community Safety Partnership.

We also have representation on the Hate Crime Scrutiny Panel. This is a group of independent panel members from a range of diverse communities who meet four times a year and scrutinise criminal cases where lessons can be learned, recommendations are then made to the relevant body which lead to real improvements. The panel is chaired by the Crown Prosecution Service.

The LDPB is a member of the Independent Advisory Group (IAG). The IAG is chaired by the Local Police Area Commander for Thames Valley Police. This is a forum for community members to come and talk to Senior Police Officers, find out about crime in the borough as well as challenge and inform local issues.

15.3 Has your Board discussed the Cross-Government Hate Crime Action Plan* (launched in September 2009)?

Yes No

*Hate Crime - The Cross-Government Action Plan, HM Government (2009)

16 Quality assurance and monitoring

16.1 How are you including people with learning disabilities and family carers in assessing the quality of care and support in social and health care?

A local provider organisation Dimensions has produced an in depth audit tool, which assesses the quality of support provided to individuals within the service. As part of this project a person with a learning difficulty has been recruited as a Consultant Quality Advisor. The REACH 2 Standards (a set of 11 standards which look at the choices and opportunities available to people) provide a framework for this work. The audits involve speaking directly to the people who receive support to seek their views and feedback about the quality of support they get.

People with learning disabilities and family carers have been invited to comment on the quality of local health care, as part of this year's Learning Disabilities annual self assessment of West Berkshire NHS. A local self advocate who represents people with learning disabilities at the Regional Programme Board, has also been invited by South Central Strategic Health Authority to sit on the Validation Team.

The Strategic Health Authority have plans to introduce peer review for specialist health services. Peer review is a quality assessment tool that is used to review practice in a chosen area. The peer review process will be co-produced with family carers, people with learning disabilities, commissioners and providers.

16.2 Does the Partnership Board receive reports from the Adult Safeguarding Board?

Yes No

16.3 Is the Partnership Board informed of poor performance by local providers (e.g. from Care Quality Commission reports)?

Yes No

16.4 Have you done an equality impact assessment, in relation to people with learning disabilities and their families, covering:

- gender
- disability
- race
- age
- sexual orientation
- religion or belief

Yes No

If so, how has this informed service development and commissioning?

Transformation of Adult Social Care services through Putting People First will be designed and implemented to improve access to assessment and support for all. More opportunities and choices will be available through personal budgets and a personalised response available to people from diverse communities. There are Equality Impact Assessments on Putting People First, the Service Plan for People with a Learning Disability and the Commissioning of services.

16.5 How have people with learning disabilities and family carers been involved in this annual report?

The inaccessible format and content of the self assessment means that it has been difficult to meaningfully include people with learning disabilities and family carers in the completion of this template. However, our carer and self advocate representatives have been kept fully informed of the process.

A presentation was made at our AGM to inform members what information the self assessment requires. We also took this opportunity to begin to gather information for our local annual report, which we have produced in previous years. This report is published in an easy read format. At our AGM we asked people for examples of good practice which have helped deliver aspects of Valuing People Now in the last year, and ideas for the LDPB to work in for the next year. We repeated this exercise at a self advocate workshop. These contributions have formed the basis of the easy read report.

A draft of the self assessment was shared with members of the Core Group for comment. In addition to the Core Group the guidance for report sign off was shared at a Big Meeting. Consequently, a further carer and self advocate volunteered to review the draft report. Support was provided to understand the information presented in the report.

A total of 5 people with learning disabilities and 3 family carers reviewed the draft self assessment, many more were involved in the production of the easy read report.

16.6 Has this resulted in improved outcomes?

Yes No

17 Commissioning

17.1 Do you have a joint commissioning strategy?

Yes No

17.2 What improvements have been made in commissioning services for people with learning disabilities?

The establishment of a Joint Commissioning Team (learning disability and mental health) consisting of a full-time Manager, one full-time and one part-time Commissioning Officer.

The role of the team is to ensure that commissioned services, both new and existing, provide good quality at a fair price. The team leads on issues of Ordinary Residence, project management when commissioning for more than a single social care customer, they coordinate the population of a spreadsheet that estimates and anticipates future financial commitments which informs the budget setting process (called Future Needs). The team has helped develop Micro Providers and actively engages with existing providers to review their business strategies and charging policies, which ensures the changing needs of social care customers are addressed. The team are actively engaged in the process of de-registering care homes and prospecting ways of increasing the number of people in Settled Accommodation.

17.3 How have these resulted in improved outcomes for people with learning disabilities?

The work of the Commissioning Team is driving outcome focused care plans with providers, shortcomings with existing services are brought to providers attention and direct support is provided to improve their services. Some of this work has identified efficiencies whilst improving outcomes.

One project has seen two ex-long stay hospital clients move through registered care to now having tenancies in their own home with personal budgets paying for the staff they selected.

Shared ownership has been promoted by the Commissioning Team which has just been rewarded by the allocation of a grant to a Registered Social Landlord, which will create 2/3 shared ownership opportunities in the next 12 months.

Accommodation-based support for four people on the autistic spectrum has been successfully commissioned, resulting in the tenants all moving from traditional care settings to having their own tenancies and personal budgets living on the edge of the town with all the benefit this affords. The provider was selected by the tenants and their families as part of the commissioning process.

18 Future plans and targets

18.1 Have you agreed a local delivery plan for at least the next year?

Yes No

18.2 Does it include numerical targets where relevant around the following headings?

Yes No

If so, please set out against the headings below:

Health	<input type="text"/>
Where people live	<input type="text"/>
Employment	<input type="text"/>
Advocacy and leadership	<input type="text"/>
Family carers	<input type="text"/>
Transition	<input type="text"/>
Personalisation	<input type="text"/>
Workforce	<input type="text"/>
Including everyone	<input type="text"/>

19 Key success or best practice

19.1 Have you any particular achievements or good practice you would like to highlight that others can learn from? We are particularly keen to hear about successes in employment.

Please see attached - entitled Wokingham Learning Disability Partnership Board Easy Read Annual Report 2009-2010.

20 Declaration

We confirm that the data and information given in this report are accurate (as far as is known) and that this report has been agreed by Board members.

Chair of Partnership Board	Luke Joy-Smith
Co-Chair of Partnership Board	David Chaffe
On behalf of members with learning disabilities	Tim Murgatroyd and Leilah Zaheer
On behalf of family carers	Evreth Thompson, Ann Pask and Trevor Lyalle
Date	31 Mar 2010

[Revised template for sign off pages of annual report]

Name of Partnership Board: Wokingham

This report covers the period from April 2009 to March 2010.

It was formally agreed by the Core Group of the Partnership Board on 30th March 2010.

Signed (Co- chairs):

David Chaffe

(date) 29th March 2010

Luke Joy-Smith

(date).....

Signed (representatives of people with learning disabilities):

Timothy Murgatroyd and Leilah Zaheer

(date) 29th March 2010

Comments:

TIM: I think it is a successful report, its talks about a lot of good work. I think the Partnership Board is working well. The Big Meetings and Self Advocate workshops teach me a lot of new things.

DAVID: The style of this report means that it is hard to understand. Everything should be easy read.

It will be good to see what other areas are doing.

It's hard to say if I agree with the things in the report, because some of these

things are the Council's job – and our partnership Board looks at other things. We have not been able to talk about everything (all the good work the Partnership Board does).

LEILAH: It has been interesting to learn about things in more detail. The Partnership Board is brilliant because it gets lots of people involved.

Signed (Family Carer representative):

Ann Pask, Evreth Thompson and Trevor Lyalle

(date) 31st March 2010

Comments:

ANN: This is a comprehensive report, that gives a clear picture of where the service is at in these changing times. The experience gained by all following the introduction of this new template will prove to be a valuable resource when filling in the 2010/11 Report, and no doubt will highlight further areas which need to be included.

TREVOR: A comprehensive report which illustrates the efficacy of the Partnership Board and the sterling work which has been done with regard to improving the lives of people with a learning disability in the Wokingham Borough.

Data Sources:

Where appropriate and possible quantitative data was taken from existing data returns that have been validated, verified and published (i.e 2008/2009 data sets)

¹ **Source:** Indices of Multiple Deprivation 2007 – Department of Communities and Local Government (DCLG).

² **Source:** Joint Strategic Needs Assessment for Wokingham Unitary Authority Area 2009.

³ **Source:** Joint Strategic Needs Assessment for Wokingham Unitary Authority Area 2009.

⁴ **Source:** Joint Strategic Needs Assessment for Wokingham Unitary Authority Area 2009.

⁵ **Source:** Figure supplied by Connexions Berkshire, data collected in January 2010.

⁶ **Source:** Joint Strategic Needs Assessment for Wokingham Unitary Authority Area 2009.

⁷ **Source:** Joint Strategic Needs Assessment for Wokingham Unitary Authority Area 2009.

⁸ **Source:** Information supplied by WBC Performance Team, data collected on 17/02/2010.

⁹ **Source:** Information supplied by WBC CTPLD, data collected March 2010.

¹⁰ **Source:** WBC Transition Mapping List, data collected March 2010.

¹¹ **Source:** Figure supplied by WBC Learning Disability Day Service on 3rd March 2010.

¹² **Source:** Information supplied by CTPLD, current projection for NI136 2009/2010 data set.

Report Section 2.4 Source: Numbers of people and ethnicity provided by WBC Performance Team, data collected 17/02/2010. Information relating to people with complex needs, behaviour that challenges and autism extracted from CTPLD Future Needs spreadsheet. Of the 121 people described as having ASC, 61 people also have behaviour that challenges and 27 people with ASC have both complex needs and behaviour that challenges. Of the 85 people with complex needs, 25 people have challenging behaviour. We currently do not collect information about people aged 18-25years in further education.

Report Section 3.2 Source: The numbers of people involved in the Partnership Board and their ethnic breakdown is difficult to quantify due to how the Board operates. The figures supplied is based on individuals who attended the Annual General Meeting on 19th January 2010.

Report Section 4.1: Total Social Care budget for adult learning disability services (2009/2010) is £19,756,440 (£12,301,600 net expenditure and £7,454,840 income). This excludes internal recharges of £69,2570. The Health budget is an additional £644,491. Of which, £371,000 is attributed to the provision of CTPLD health staff. Plus, £273,491 for specialist inpatient services, which is calculated as follows: Berkshire Healthcare Foundation Trust provides specialist healthcare, costing £1,640,947 and with open access for all 6 localities in Berkshire (£273,491 is one sixth of the total amount).

Report Section 4.4: 2009/10 figures are net of income and do not include internal recharges for shared services offered centrally.

The category 'Advocacy and support' includes spend on external brokerage support.

The financial breakdown of budget in category marked 'Other' is as follows:

- Learning Disability Management £152,970
- Home Respite £539,870
- Shared Lives (Adult Placement) £133,460
- Sheltered Housing (Oakfield Court) £25,450
- Homecare and Support £165,440
- Community Activities Team £62,950
- Learning Disability Commissioning £132,280
- Community Transport £41,390

- Acorn Community Centre £79,043
- Prevention Project £53,750
- Other Care/Support £73,550
- Payment for Carers Services £59,210
- LDDF £97,490
- Purchased Day Care £1,020,700
- CTPLD Health Team £371,000

Report Section 5.1 and 5.3 Source: 2008/2009 regional health self assessment and performance framework.

Report Section 6: 2008/2009 statutory return (Information from the 6 month period 1st October - 31st March 2009)

Report Section 8.1: 2008/2009 statutory return.

Report Section 8.2: Information supplied by Wokingham Borough Employment Service, data collected March 2010.

Report section 10.4: 2008/2009 statutory return.

Report section 10.5: This is not information that is formally collected, however we have noted this as a priority area that requires significant attention.

Report section 10.6: 2008/2009 statutory return. Note: The figure is not an accurate reflection of short breaks provided. This is very significantly under-reported and is a recording issue that is currently being addressed.

Report section 10.7: 2008/2009 statutory return.

Report section 11.1: Data supplied by CTPLD, March 2010.

Report section 12.1: Data taken from the Transition Mapping List (list of all children and young people with a statement of educational needs, held by the Disabled Childrens' Team). Information provided in March 2010. Young people with dyspraxia, dyslexia and speech and language difficulties have not been included.

Report section 12.2: Information supplied by the Disabled Childrens' Team, 12/02/10. 7 of the young people in out of area placements are funded by social care and are looked after children.

Report Section 13.6: 08/09 statutory return. Note: This information only includes the number (and percentage) of people who were in receipt of direct payments, as personal budgets were not measured last year.

Report Section 15.1: Information supplied by the Community and Diversity Team at Thames Valley Police. Recording period April 2009 - March 2010.