Joint Strategic Needs Assessment







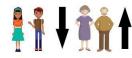
Learning Disabilities Last updated: September 2017

Summary



The Isle of Wight has more people with learning disabilities known to their GPs than most comparator areas.

The number of people, aged 18 to 64, with learning disabilities is falling, while the number of older people with learning disabilities is increasing.





The over 85 cohort is expected to more than double between 2017 and 2035.

The Isle of Wight has a higher number of adults with a learning disability receiving long term support from the local authority than other areas





25% of the Council's adult social care budget is spent supporting clients with learning disabilities.



Foreword

"**Our Vision:** 'All people with a learning disability living on the Isle of Wight will lead fulfilling lives'

People with a learning disability are people first with the right to lead their lives like any others, and they and their families and carers are entitled to the same aspirations and life chances as other citizens. In November 2015 NHS England published 'Building the Right Support', a radical plan to develop more community services for people with a learning disability, alongside a new published service model for commissioners that defines what good services should be like, and new guidance for care and treatment reviews.

Locally we are aware of the need to enhance services for the Islands learning disability population to ensure people are able to receive the right level and quality of support, in the right place at the right time that meets their needs and aspirations. In January 2017 the Isle of Wight Council and Clinical Commissioning Group, commissioned a peer review examining how we support people with a learning disability which recommended a root and branch reform of how we currently deliver support to ensure better outcomes for people with a learning disability and their families.

From this review we intend to deliver the following outcomes:-

- Personalisation
- Choice and Control
- Quality
- Information

We are committed to making our vison of strengths based, person-centred, co-ordinated health and social care a reality on the Isle of Wight. We intend to improve the outcomes and experiences of people, families and carers which will be achieved by doing things differently, to collaboratively harness the capacity of organisations, people and communities. To think creatively and build a sustainable health, social and community economy fit for now and for the future."

Ann O'Brien - Learning Disabilities Senior Commissioning Manager"

Background

"People with learning disabilities have poorer health than the general population, much of which is avoidable. These inequalities often start early in life and result, to an extent, from barriers they face in accessing timely, appropriate and effective health care. The impact of these health inequalities is serious."

http://fingertips.phe.org.uk/profile/learning-disabilities

Nationally, people with Learning Disabilities have a shorter life expectancy than the general population (18 years shorter for females, 14 years shorter for males).

The prevalence of some conditions such as epilepsy and diabetes is higher in people with learning disabilities, though cancer and coronary heart disease is less prevalent.

Obesity is twice as common in people aged 18-35 with learning disabilities, while people aged over 64 with learning disabilities are twice as likely to be underweight than the general population over 64.

Source: http://www.content.digital.nhs.uk/catalogue/PUB22607

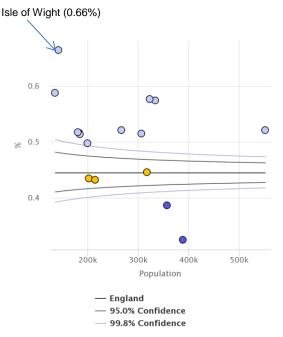
Prevalence

QOF prevalence is the percentage of people with a learning disability who are known to their GPs

The Isle of Wight has a higher QOF prevalence than all but one of the comparator groups. Eleven of the 16 groups are statistically higher than England. This isn't necessarily an indication of higher prevalence in the general population, it could be an indication of better recording practices or a less transient population.

On the Isle of Wight this equates to approximately 930 people.

Learning Disability: QOF prevalence (All ages) 2014/15



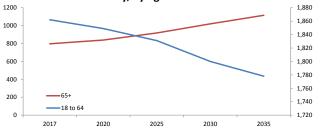
Source: PHE Fingertips Learning Disability Profile <u>http://fingertips.phe.org.uk/profile/learning-</u> <u>disabilities/data</u>

LD prevalence by GP is very varied – it is much higher in Tower House (Ryde) and Grove House (Ventnor), whereas Ventnor Medical and St Helens are much lower.

Area	Recent Trend	Count	Value		95% Lower Cl	95% Upper CI	
England	-	263,588	0.5	1		0.5	0.5
NHS Isle Of Wight CCG	-	945	0.7	н		0.6	0.7
J84012 - Tower House Surg	-	145	1.2		-	1.1	1.5
J84018 - Grove House Surg	-	44	1.2			0.9	1.6
J84014 - The Dower House	-	107	0.9			0.7	1.0
J84010 - Shanklin Medical	-	95	0.8			0.7	1.0
J84013 - Sandown Health C	-	92	0.8	H		0.6	0.9
J84017 - Medina Healthcar	-	68	0.7			0.6	0.9
J84004 - East Cowes Medic	-	55	0.6			0.5	0.8
J84005 - Esplanade Surger	-	63	0.6			0.5	0.8
J84011 - Carisbrooke Heal	-	61	0.6	H		0.4	0.7
J84008 - Argyll House	-	30	0.6			0.4	0.8
J84020 - Beech Grove Surg	-	26	0.5			0.4	0.8
J84015 - Cowes Medical Ce	-	60	0.4			0.3	0.5
J84016 - South Wight Medi	-	22	0.4			0.3	0.6
J84019 - West Wight Medic	-	39	0.4	H		0.3	0.5
J84003 - Ventnor Medical	-	16	0.3			0.2	0.5
J84007 - St.Helens Medica	-	12	0.2	H I		0.1	0.3

The number of people on the Island, aged 18 to 64 predicted to have a learning disability is expected to reduce over the next 18 years from 1,862 in 2017 to 1,778 by 2035, a reduction of 4.5%

At the same time, the number of people aged 65 and over with a learning disability is expected to increase from 797 to 1,115, an increase of 40%. The largest increases are in the over 85 cohort, which is expected to more than double between 2017 and 2035.



Population projections of people with a learning disability, by age 2017 to 2035

Source: Poppi and Pansi LD – Baseline estimates www.pansi.org.uk and www.poppi.org.uk

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This may have significant implications for the type and amount of support these people will need.

Employment and Accommodation

Just over 70% of adults with a learning disability on the Island live in settled accommodation. This is lower than the England figure of 75%.

(Residents who are in acute long stay residential healthcare, hospital, care homes and nursing homes are defined as unsettled accommodation for this indicator)

There is a difference between males and females, with far more males (74%) than females (66%) being in settled accommodation. Nationally, those who are in the least deprived areas have the lowest proportions of their learning disabled adults living in settled accommodation (around 70%), while those areas who are more deprived (in particular those in the second and third deciles) have much higher settled accommodation rates (around 80%).

Source: PHE Fingertips Learning Disability Profile http://fingertips.phe.org.uk/profile/learning-disabilities/data

5% of supported adults with a learning disability were in paid employment in 2014/15, and locally, as in the rest of England, the gap in the employment rate between those with a learning disability and the overall employment rate is widening.

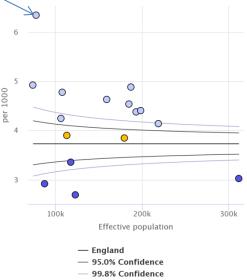
Social Care Support

The Isle of Wight has a statistically significantly higher number of adults, aged 18 to 64 with a learning disability, who are receiving long term support from the local authority, than all our comparators, and the rate is more than 1.5 times that of England (3.73). This equates to approximately 900 people.

The graph below shows that we are an outlier compared to all our comparator authorities. This could be due to several reasons – it may be that with a lower transient population on the Island more people with learning disabilities are known to social care and are not 'slipping through the net', and/or it could be that historical provision and expectations of local authority support are higher here, and/or it could be that the eligibility thresholds deployed by adult social care are lower than elsewhere. .

Adults (18 to 64) with LD getting long term support from Local Authorities (2014/15)

Isle of Wight (6.34 per 1,000)



Source: PHE Fingertips Learning Disability Profile http://fingertips.phe.org.uk/profile/learning-disabilities/data

In 2014/15 (the most recent published information on PHEs fingertips tool) the Isle of Wight had a higher rate of supported adults (age 18 to 64) receiving direct payments than all of its comparator groups.

Area	Value			Lower Cl	Upper Cl
England	17.4			17.2	17.6
Isle of Wight	60.2		H	55.8	64.4
Bournemouth	30.3	H		25.6	35.5
Southend-on-Sea	28.9	H		24.9	33.2
East Riding of Yorkshir	26.0	H-1		23.2	29.1
Torbay	21.9			18.0	26.4
Cheshire East	20.4	H		17.9	23.2
North Somerset	19.0			15.4	23.1
Herefordshire	16.5	H		13.5	20.0
Poole	15.7			11.7	20.7
Cornwall	14.4	⊢ ⊣		12.3	16.7
Wirral	13.1	H-I		11.1	15.5
Sefton	12.2	H-H		10.1	14.8
Cheshire West and Chest	12.0	H-H		10.0	14.3
Bath and North East Som	9.1	⊢ ⊣		6.7	12.1
Northumberland	8.3	F		6.6	10.4
Shropshire	8.0	H		6.2	10.2

ource: Health and Social Care Information Centre; NASCIS - SALT

In 2016/17 the total gross expenditure on adult social care on the Isle of Wight was just under \pounds 75 million, of which £19 million was spent on people with learning disabilities – this is 25% of the spend.

Source: Isle of Wight Council finance department

Over half (60%) of all supported adults (aged 18-64) are receiving their support via direct payments – this is significantly higher than all of our comparator areas

As at July 2017 there were 608 people with a primary support reason of learning disability recorded on the local authority social care system, of those, 143 (almost 1 in 4) also have autism recorded as a need.

175 of those people supported by social care are living in residential placements.

Comparison of the Adult Social Care Outcomes Framework reveals that at the end of 2016/17, 44.3 per 100,000 working age adults (aged 18 to 64) were living permanently in residential care on the Isle of Wight compared with 13.3 per 100,000 nationally across England. This suggests that there is an issue with provision of community based alternatives to residential care for people with learning disabilities, this could be due to services such as 'Shared Lives' and 'Supported Living' not having previously been commissioned on the Island. These services are in place in other areas of the country and could be potential options for the future provision locally.

In 2017 there were 31 clients funded under continuing healthcare, with 4 under section 117 arrangements.

These are increases on previous years (in 2013 for comparison there was 1 section 117 and 18 continuing healthcare clients).

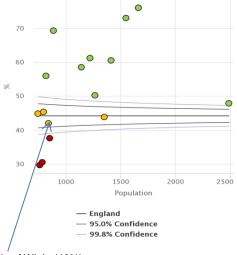
Medical needs

Health checks for learning disability residents are important as they can help to identify any medical issues early (as people with learning disabilities are sometimes not able to communicate or recognise their medical issues in the same way as the general population). At the end of March 2017 there were 902 patients with LD registered with GPs, and 42% of these (382) had received a health check.

The PHE fingertips tool has comparisons of this data from 2013/14 and at the time this was lower than all but three of our comparator groups. On

the Island some practices perform very well (with 100% of LD patients receiving health checks) and some perform very poorly (with less than 5% of patients receiving health checks).

Proportion of eligible adults with learning disability having a GP health check 2013/14 $\,$



Isle of Wight (42%)

Source: PHE Fingertips Learning Disability Profile http://fingertips.phe.org.uk/profile/learning-disabilities/data

Screening is important for early detection of serious diseases such as cancer. People with learning disabilities often have much lower screening rates than the rest of the population.

Most women without learning disabilities (69%) have had a cervical smear, compared with less than a third (28%) of women with learning disabilities.

Almost two out of every three women without learning disabilities (59%) have had breast screening in the past three years, compared with only two in every five (40%) women with learning disabilities.

Nearly half (44%) of women without learning disabilities have had bowel screening in the past 2 years, whereas only a fifth (20%) of women with learning disabilities have had bowel screening in the past 2 years.

There is no readily available data about the percentage of people with learning disabilities who have received the relevant immunisations (for example the flu jab).

40% of those people with LD who had a record of their BMI, were obese (BMI over 30) compared with 25% of the general population as a whole.

IRIS (the Islands substance misuse service) had 17 clients with learning disabilities over the past year which is approximately 2% of their total clients (around 530 per year).

In 2013 /14 less than 1% of A&E attendances were due to people with LD (329 instances) but over a quarter of these were due to repeat admissions (3 or more) for 28 people.

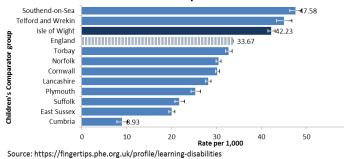
Children and Young People

The following table shows the rate per 1,000 children with a learning difficulty on the Isle of Wight (2014 data) along with a comparison with the South East and England. There are higher rates of children with all types of learning difficulties than across the South East and England.

Summary of levels of Learning Difficulties per 1,000 children								
	Isle of Wight	South East	England					
Moderate	34.63	26.38	28.58					
Severe	5.74	3.44	3.8					
Profound/Multiple	1.86	1.01	1.29					
Totals	42.23	30.83	33.67					

As compared to our comparator group, the Isle of Wight has the third highest rate of learning difficulties:

Rate per 1,000 of children with learning difficulties known to schools: Isle of Wight, England and Children's comparators 2014



Known data gaps and future analysis requirements

There are still some areas where we would like to carry out further data collection and analysis in future – the intention will be to include these next time this factsheet is updated.

- Disease prevalence for LD clients with long term conditions (such as diabetes) compared with the general population
- Location of clients to allow for geographical mapping and an understanding at locality level of any variation in need
- Long Term hospital stays for LD clients
- More recent A&E admissions data

References

PHE Learning Disabilities Profiles <u>http://fingertips.phe.org.uk/profile/learning-</u> <u>disabilities</u>

PHE Learning Disabilities Observatory (2015 data tables)

https://www.gov.uk/government/uploads/system/ uploads/attachment_data/file/613183/PWLDIE_2 015_data_tables_NB090517.pdf

NHS digital Learning Disability health checks (Q4 2017) <u>http://digital.nhs.uk/catalogue/PUB30047</u>

GAP Analysis 2013

https://www.improvinghealthandlives.org.uk/publi cations/1174/Joint_Strategic_Needs_Assessmen ts: How well do they address the needs of p eople_with_learning_disabilities