

LINCOLNSHIRE HEALTH AND WELLBEING BOARD

Open Report on behalf of Glen Garrod
Executive Director of Adult Care and Community Wellbeing

Report to	Lincolnshire Health and Wellbeing Board
Date:	7 March 2017
Subject:	Service Users with Learning Disabilities

Summary:

The purpose of the Report is an information paper to update Health and Wellbeing Board on a Regional Improvement Programme in relation to support for people with Learning Disabilities and to provide a position statement for Lincolnshire against the agreed regional baseline standards. The Report also confirms additional work that is being taken forward to deliver further local, regional and National improvement.

Actions Required:

The Health and Wellbeing Board is requested to consider and note the contents of the Report.

1. Background

Introduction

People with Learning Disabilities can experience a number of challenges in maintaining good health and leading fulfilling lives. It is common for people with Learning Disabilities to have co-existing conditions such as Mental Illness and Physical Disabilities and the average life expectancy for people with a Learning Disability is lower than the general population.

However, care and support arrangements, medical advances and improved diagnostics, have resulted in an overall improvement in outcomes in recent years. In particular the number of people with Learning Disabilities (nationally and locally) is projected to increase in the medium to long term, particularly in the 65+ age group.

Many people with a Learning Disability may live long and fulfilling lives without the need for Care and Support from the Local Authority. For example, the latest Learning Disability JSNA [Joint Strategic Needs Assessment] Commentary estimates that there are over 15,000 people with a Learning Disability living in Lincolnshire, but that only 1,700 of these people will be eligible for Adult Social Care and receive care and support via the local Section 75 Agreement and pooled fund hosted by Lincolnshire County Council during 2016-17.

The updated JSNA chapter for Learning Disability, when formally published, estimates that there will be an overall increase of 3.2% of Adults with a Learning Disability in County by 2020, but with a predicted increase of 11.1% in Older People (Source: PANSI and POPPI National prevalence rates). Therefore the overall number of people with a Learning Disability projected to be eligible for Adult Care is also expected to increase as is the complexity of needs of these people. So, more profoundly disabled people being supported.

As well as additional demand pressures on the Council and the NHS, it is also likely to be more challenging to achieve consistent levels of performance outcome. In particular, there are ongoing difficulties with the recruitment and retention of Nurses and care staff within the care markets impacting on market supply. Complexity of needs of service users is impacting on market prices and presents additional challenges for commissioners in supporting people with Learning Disabilities to live a 'close-to' normal life. For example support into employment or alternative vocational opportunities.

National Policy

There has been no National Learning Disability specific policy publication since Valuing People (*Department of Health, 2001*) and Valuing People Now (*Department of Health, 2009*). Whilst the National Transforming Care Programme, especially the national service model published in October 2015 (NHS England, 2015, ADASS [*Association of Directors of Adult Social Services*], Local Government Association) has placed emphasis on reducing the number of people placed within NHS Inpatient provision, this policy has had a relatively narrow focus and on a relatively small number of people.

In the absence of updated National Policy, in consideration of Local Account information and in reference to the wider responsibilities of Local Authorities, a view emerged within the East Midlands Branch of the Association of Directors of Adult Social Services (ADASS), that there would be some benefit in having a regional improvement programme with a wider focus on the needs of people with a Learning Disability who may be eligible for Adult Social Care.

During 2016 - Nine Local Authorities across the East Midlands including Lincolnshire participated in a number of interviews undertaken by an independent consultant to establish a baseline position against which good practice could be noted and opportunities for improvement and sustained performance could be considered further.

Whilst the final report on the regional baseline position called "What is Happening for Adults with Learning Disabilities in the East Midlands?" is still being finalised, participating Authorities have had initial feedback from the consultant and a meeting of all East Midlands Authorities in November 2016 has agreed to a common set of standards that we

will work on together to benchmark good practice and focus further improvement work against. This report provides the Health and Wellbeing Board with a position statement for Lincolnshire against the 9 Standards agreed.

Overview of the initial Feedback to Lincolnshire

Whilst the overarching regional baseline report has still to be finalised, Lincolnshire has received some initial feedback from the regional consultant in relation to our current arrangements. This feedback is summarised below:

"The strategic context is characterised by excellent joint governance arrangements with the NHS at both commissioning and operational levels. There is a Joint Commissioning Board with Executive representatives from Health and Social Care. Four Delivery Groups report to the Board, including a Joint Delivery Board for Specialist Adult Services (Learning Disability, Autism and Mental Health Commissioning).

There is a Section 75 Agreement between the four Lincolnshire CCGs and Lincolnshire County Council (LCC) that facilitates a pooled budget that funds Adult Social Care and Continuing Health Care for people with a Learning Disability. The pooled fund is hosted by LCC. An integrated Assessment and Care Management Team is managed by a County Manager for Learning Disability Services. The joint teams deal with Continuing Health Care checklists and are working through issues of how to account for Continuing Health Care eligibility and associated issues of charging. This joint service is justifiably proud of delivering timely assessments and reviews and a track record of best value (evidenced by relatively low costs of services in a CIPFA analysis). This is a rare example of Local Authority systems leadership across the full range of Health and Social Care services in the County.

An emerging strategic issue in Lincolnshire is reducing Market Capacity (the market responded quickly to the need to urgently close the ATU in the County in 2015, but it is felt that this response would no longer be viable in today's conditions), relatively high staffing turnover rates in the Residential and Community Supported Living Market and difficulties in recruitment and retention of Nurses and Care Staff in these markets. It is understood that these may also be emerging regional and national issues."

The regional baseline work has identified that Lincolnshire has particular strengths across a number of the nine common regional standards. Other Authorities in the region are being asked to consider Lincolnshire as a site for good practice to inform their own local improvement plans. The feedback has also suggested areas of good practice in other Local Authorities that may be helpful for Lincolnshire to consider as areas for further development. The table below provides a summary of areas of strengths opportunity for further progress:

Regional Standard	Existing Area of Strength in Lincolnshire	Opportunity for further Development
Transforming Care	X	
Strategy and Partnership	X	
Choice and Control	X	
Preparing for Adulthood	X	X
Support for Family Carers	X	
Housing Options		X
Connecting into Communities		X
Supporting people to get a job	X	X
Co-Production	X	X

Lincolnshire Position Statement in relation to the 9 Regional Standards

This section of the Report provides a summary position statement for each of the regional standards from a Lincolnshire perspective.

Transforming Care

The National Transforming Care programme is led by NHS England and supported by the Local Government Association (LGA) and the Association of Directors of Adult Social Services (ADASS).

Lincolnshire has established its local Transforming Care Partnership (TCP) Board and has agreed a local Transforming Care Partnership Plan with NHS England, which includes targets for reduced numbers of people being supported within Inpatient Care. Pamela Palmer, Executive Nurse, South West CCG is the Senior Responsible Officer (SRO) for the Lincolnshire TCP with Justin Hackney, Assistant Director Adult Care as the Deputy SRO.

The following extract from the Lincolnshire Transforming Care Plan summarises the local vision:

"Early help, wellbeing and quality personalised care and support will be the foundation stones of our Lincolnshire Transforming Care Partnership offer. We will all passionately champion holistic and integrated community based support that minimises crisis and eliminates the need for inpatient care."

NHS England and Lincolnshire CCGs commission Inpatient Care for people with Learning Disabilities. The table below shows that the numbers of people in Inpatient Care commissioned locally by Lincolnshire CCGs at the time the TCP Plan was agreed and the latest position as at December 2016.

CCG Commissioned Inpatient Beds as at 31 March 2016	As at 31 March 2016	As at 19 Dec 2016
Specialist Learning Disability Hospitals	10	7
Mainstream Mental Health Hospitals	12	12
Total	22	19

It should be noted that the overall number of Lincolnshire people with a Learning Disability in Inpatient Care was already very low which, in relation to the Transforming Care agenda, is a marker of success. This low starting baseline is informed by prior integrated working linked to the original Winterbourne view national action plan.

Another mark of success for Lincolnshire is that reasonable adjustments have been made to facilitate the assessment and treatment of people with a Learning Disability in mainstream Mental Health Units rather than within Specialist Learning Disability Units where Inpatient Care is necessary.

The Lincolnshire CCGs have invested funding in developing community based specialist support for people with Learning Disabilities and are commissioning these new models of care directly from Lincolnshire Partnership NHS Foundation Trust (LPFT). It is understood that CCGs also plan to consult on the permanent closure of Long Leys Court in 2017. The CCG commissioned services complement the Integrated Assessment and Care Management Team provided via the Local Authority.

Lincolnshire has a strong leadership profile in relation to the Transforming Care agenda and Lincolnshire colleagues have presented at Regional and National Transforming Care events. NHS England have also utilised Lincolnshire in a number of video's demonstrating good practice.

Overall, there have only been 16 new admissions to Inpatient Care by Lincolnshire CCGs since 1 April 2016 and all of these requiring a Care Treatment Review prior of admission. Of the 16 Admissions only 3 have been to Specialist Learning Disability Units and the remainder within mainstream Mental Health Units.

Of the original cohort of 22 people in CCG commissioned Inpatient Care, there are only 11 that remain in hospital and 7 of these people are subject to Ministry of Justice Sections. The TCP Plan target is to have a maximum of 11 people in Inpatient Care by the 31 March 2019. Whilst this may be very challenging to achieve, given the complex needs of the individuals concerned, it is an ambition that locally the TCP is committed to.

Strategy and Partnership

Whilst the Lincolnshire Transforming Care Plan does have a clear focus on minimising Inpatient placements for people with a Learning Disability, it also sets out the wider strategy and integrated working arrangements in Lincolnshire for People with a Learning Disability.

A key strength of existing integrated arrangements is the Section 75 Agreement between the four Lincolnshire CCGs and the County Council. This agreement facilitates a pooled

budget which is hosted and operated by the Council. It provides for an Integrated Assessment and Care Management Team that facilitates personal budgets and care and support plans for Adults with a Learning Disability with eligibility for Social care and or Continuing Health Care.

The Section 75 Agreement has reduced disagreements between responsible commissioners about who should pay for care and support and instead has a keen focus on what outcomes are needed and how best they may be achieved.

The Section 75 Agreement is supported via strong governance arrangements, including the Lincolnshire Joint Commissioning Board and the Specialist Adult Services Delivery Board. A number of other Authorities continue to contact Lincolnshire with an interest in learning from our local arrangements, with a view to developing stronger local working for the benefit of their own local populations.

Choice and Control

Adult Care has facilitated a significant increase in choice and control for Adults with eligible need through the implementation of personal budgets and related care and support plans.

The latest Lincolnshire performance information for Learning Disability suggests that 100% of people now have a personal budget. Approximately 39% of people choose to take their personal budget via a direct payment, which allows people to commission provision directly to meet agreed needs. The remaining 61% of people have chosen for the Local Authority to commission services on their behalf. The 2015-16 - National Data All England Average confirms that 40% of people choose to have a direct payment, which is roughly in line with the position in Lincolnshire.

Lincolnshire is also one of 9 National Demonstrator sites for the implementation of Integrated Personal Commissioning (IPC). We were selected from a large number of areas that applied and were identified as a demonstrator site via a selection process facilitated by the Department of Health. IPC offers the opportunity for people to combine their personal budget via Adult Care with a Personal Health Budget funded by CCGs. CCGs have national targets to develop the expansion of Personal Health Budgets at pace. Lincolnshire's pooled budget arrangements have been of assistance in delivering integrated personal budgets for people with a Learning Disability.

Lincolnshire is demonstrating a high level of leadership in relation to choice and control at a Local, Regional and National level. Our teams continue to promote the take up of direct payments to improve choice and control, particularly for young people in transition where these can assist with the continuity of care.

Preparing for Adulthood

In Lincolnshire, we have good working relationships between the Adult Care Intake Team and Children's Services in relation to the transition of young people to Adult Care. However, preparing for Adulthood has a significantly wider scope than purely transition to Adult Care. In recognition of this, Lincolnshire have a Preparing for Adulthood Commissioning Strategy led by Children's Services.

We have also invested Better Care Funding (BCF) with Children's Services to provide initiatives that promote independence as part of the preparing for Adulthood. This has included the development of information and advice materials for young people and parents, independent travel training, day opportunities, providing learning to cook and other independent living skills training. Some young people have also been helped to secure their own mortgage to support independent living.

Preparing for Adulthood is a standard that the Regional Group recognises as a common area for additional focus in all Authorities. Whilst we do have some clear strengths in Lincolnshire, Preparing for Adulthood is also recognised as an area for further improvement.

In particular, there is a dependency on the implementation of Mosaic to improve the provision of planning information to inform preparing for Adulthood activities. We are currently initiating a project to review and update the transitions protocol for young people likely to be eligible for Adult Services.

The young people that are in transition to Adult Care are presenting with an increased complexity of needs. Earlier engagement by Adult Care with young people and their families prior to transition to help them to plan for the future, has the potential to improve outcomes and value for money, but may need some further investment. There is a need to better explain the differences in support that is available to young people (and their Carers), once they become Adults in comparison to what is available when a Child.

There is also an opportunity to consider further the support offer to Carers of young people with a Learning Disability, at the time when educational provision ends and there are additional pressures on Carers capacity.

Support for Family Carers

Lincolnshire has recently reviewed and has completed a re-provision of the local Carers Support Services. Consideration of the Care Act 2014 (and a Carer's right to an assessment of their own needs), was included in the re-provision. Adult Care has also developed a specific commissioning strategy for Carers. An outline of the current support offer for Carers, including Carers for people with a Learning Disability is provided below.

Enquiries for Carer support are initially handled by the Council's Customer Service Centre (CSC) provided by SERCO. SERCO will offer information and advice to Carers who contact them. If a Carer's assessment is requested, SERCO will also support the Carer via a telephone assessment, or if a face to face assessment is preferred, SERCO will refer the Carer to Carers FIRST. If the Carer is eligible for support, they will be provided with a personal budget to meet assessment needs.

Carers of people with Learning Disabilities are also identified and referred to the Carers Service by the Adult Care Learning Disability Service. In addition, the Carers Service works with Children's Services to provide support for parent carers of Children with Learning Disabilities. Other Children in the family who are also providing care, called Young Carers, are initially supported by Children's Services. However, once they reach the age of 16 years, Carers FIRST works alongside Children's Services, the family and the Young Carer. This is to support the Young Carer during transition to becoming a Young Adult Carer. The Young Adult Carer will receive support from thereon to assist them in continuing their education or taking up employment.

Whilst the service is a generic Carers Support Service, activity is monitored for different Carer types. AIS Data suggests that over 240 Carers of Adults with Learning Disabilities (43 who are not receiving any direct support), have been provided with support so far this year, via the new arrangements.

Carers FIRST provides a range of additional Carers support activities. Support can be accessed by all Carers irrespective of whether they request an assessment of need, or are eligible for Local Authority support or not. Examples of some of this additional support activity provided by Carers FIRST includes:

- Supports to a group for Parent Carers in Lincoln on Birchwood, for Carers of Children with Special Educational Needs.
- Promotes a Learning Disability Carers Group that meets on the 3rd Wednesday of the month, 10am – 12pm, at The Pilgrim Lounge, Boston Football Club.
- As part of the initial marketing campaign, visited; the ADHD coffee morning on the Ermine in Lincoln, the Rainbow Stars Autism Carers Group in Sleaford and SNAP in Lincoln (we receive referrals from these groups). A Support Worker attended the Boston Disability Forum. Attended a workshop at the Parents and Autistic Children Together Conference on 15 November and have involvement with them also.
- Attended County Carers 'Count me in' event that was held at Butlin's, Skegness in September and are regularly at the same marketplace events together.
- Members of the Autism Partnership and Learning Disability Partnership Boards.

In addition to the core Carers Service, Adult Care have also utilised some BCF Funding in 2015-16 to do some targeted work with ageing Carers of people with a Learning Disability. The project was focused on helping ageing Carers to plan for emergencies and also to consider plans for the time when it may be difficult to continue their Carer's role. A support tool is also being finalised, which can be used by Carers to aid them in thinking about planning for the future.

An Adult Care Carers Emergency Response Service is available to all Carers and delivered by SERCO as part of the Customer Service Centre. Carers are able to register their emergency plan and this will be activated if the Carer is suddenly unavailable. For example, if a Carer is admitted to Hospital for emergency treatment, the arrangements set out in the emergency plan can be activated for the Adult that the Carer supports.

A new National Carers Strategy expected in Spring 2017, is anticipated to raise the profile of support for Carers to remain in employment. This is an area Specialist Adult Services will be exploring with the County Manager responsible for the Adult Care Carers Strategy, with a focus on Carer's for young people in transition. The point where formal education ends can be a critical time for family based care.

Housing Options

A high percentage of the people with Learning Disabilities we support in Lincolnshire live in community based settings, with a smaller proportion of people living in Residential or Nursing Care.

Some Authorities consider that a high percentage of people living in community based placements rather than Residential or Nursing Care is a positive outcome, as it may be a proxy measure of success in promoting independence. In Lincolnshire, we take a pragmatic approach to agreeing care and support plans that will best meet assessed needs, whilst also taking into consideration the availability of resources.

The Adult Social Care Outcomes Framework (ASCOF) has a proxy measure that can be used to see how we compare against others. The measure is: *The Proportion of working age (18-64) service users who received long-term support during the year with a primary support reason of Learning Disability support, who are living on their own or with their family (%)*. Detail of comparable performance from the 2015-16 latest data is provided below:

Comparator Group 2015-16	% Living on their own or with Family
Lincolnshire	74.7
Statistical Comparator Group (Average)	74.1
Shire Counties (Average)	73.9
East Midlands Region (Average)	76.1
England (Average)	75.4

Whilst Lincolnshire has a higher percentage of people living on their own or with family in comparison to our statistical comparator group and Shire Counties, we are slightly below the England Average and the East Midlands Average.

There are, however, a number of other factors to take into account when considering this measure. These factors include, but are not limited to complexity of need, personal choice, available resources and whether the comparator groups include two tier Authorities where housing responsibilities may sit outside of the Authority's direct control.

In Lincolnshire we do want to increase the overall proportion of people living in community based placements. Here, there are a range of options which include (but are not limited to), living with family, shared lives solutions, shared tenancy, extra care, Registered Social Landlord (RSL), Private accommodation, or privately owned solutions.

Until recently Public Health colleagues have held the direct relationships with District Housing Authorities and Housing providers on behalf of LCC. However, with the recent integration of Public Health functions with Adult Care, there are now also much stronger direct links being made between Adult Care and the Housing Sector.

In particular work is currently underway to develop a "Housing for Independence" Strategy with District Councils. This work is being led by Public Health colleagues, but with input from Adult Care to inform priorities. Specialist Adult Services are also working with a number of Districts and Housing providers to explore opportunities to increase housing capacity for use by the people we support. This may include adapting existing properties through the use of Disabled Facilities Grant (DFG), capital and or assistive technology or the development of additional housing opportunities via RSL's and or the Private Sector.

A key consideration for existing community supported living arrangements and future ones is dependency on the cap on Local Housing Allowance, which has to date excluded vulnerable people, but is suggested to be expanded to include them with effect from 2019. A Consultation on this extension of the capping arrangement is currently in progress and scheduled to close in February 2017. Adult Care and Community Wellbeing is co-ordinating a response to the Consultation.

Connecting Into Communities

Whilst the Section 75 Agreement for Learning Disability provides care and support for people who are eligible for Adult Social Care and/or Continuing Health Care (CHC), there are also a number of people living in Lincolnshire with Learning Disabilities who do not currently meet the eligibility criteria. The JSNA estimated that there may be more than 15,000 people with a Learning Disability living in Lincolnshire, whilst it is estimated that there are approximately 1,700 people who will meet eligibility criteria in 2016-17.

The Regional improvement work has identified opportunities for wider engagement with Local Communities to support improved outcomes for some people who are eligible for care and support, but also for those who may be at risk of needing care and support in the future.

Whilst in Lincolnshire we do have the Community Wellbeing Network and evolving Neighbourhood Teams, there is very limited capacity within Adult Care Assessment and Care Management Teams to do such outreach work with our Local Communities.

With the integration of Public Health with Adult Care and the development of Personal Health Budgets across the CCGs, this is a key area to revisit to explore additional opportunities for community capacity building and early intervention.

Supporting People to get a Job

Having employment not only provides an income, but offers the opportunity to develop new skills and knowledge. It also offers the opportunity for greater social inclusion, friendships, personal pride and a number of other benefits to support improved health and wellbeing.

The Adult Social Care Outcomes Framework (ASCOF) has a performance measure that considers what proportion of Adult Care service users are in more than 16 hours of employment per week. The table below shows how Lincolnshire compares or others (higher is better).

Comparator Group 2015-16	% of SU working 16 hours or more per week
Lincolnshire	4.5
Statistical Comparator Group (Average)	4.7
Shire Counties (Average)	5.3
East Midlands Region (Average)	3.3
England (Average)	5.8

This benchmarking information indicates Lincolnshire has a similar proportion of service users in 16 hours or more work per week as our statistical comparator group, a higher percentage than the East Midland average, but lower proportion in comparison to the Shire Counties average and the All England Average.

Adult Care has already identified that providing people with Learning Disability, Autism and or Mental Health the opportunity to secure a job, experience work and or participate in volunteering is a priority area for us locally.

We think the above measure is helpful to some extent to allow benchmarking, but the measure also has some limitations. In particular, the measure does not take account of the range of complexity of needs of service users in each comparator group. Given the Care Act now provides a single national eligibility criterion for Adult Care, there is limited understanding of the range of complexity of need across Local Authorities. Lincolnshire is, however, working on a tool that may help us to better understand the range of complexity across our respective client groups that may assist further with service and financial planning.

Interestingly the proportion of service users in employment in Unitary Authorities (7%) and Outer London (8%) and Inner London (5.7%), are higher than all of the Lincolnshire Comparison Groups which may indicate rurality and structure of employment market are key factors to consider. We know that Lincolnshire is very rural and that transport links can be a key dependency for securing and sustaining employment. We also know that many employers in Lincolnshire are small to medium sized companies.

An area of good practice that was identified as part of the Regional work was Lincolnshire's Step Forward project. Via funding from the Health and Wellbeing Board, funding was secured to support the provision of employment support services for Adults with Autism, a Learning Disability and/ or a Mental Health need.

Lincolnshire residents who are 18 or over and are unemployed can access a range of support including:

- careers advice and a personal activity plan;
- support with exploring suitable job options;
- CV and covering letter;
- identification and statement of personal support requirements;
- advice on disclosing requirements to employers;
- work experience placement to enable beneficiary to identify factors in a working environment that might impact on his/her ability to function effectively;
- support with accessing Better Off calculations for benefit claimants;
- some in work support for those that secure employment;
- Learners complete the Workstar22 (part of the Outcomes Star suite) at the start, middle and end of the programme to measure soft outcomes and 'distance travelled'.

In addition, commissioners are currently completing follow up work with some of the Local Authorities with a high proportion of service users in employment to identify how they are achieving those results and via what mechanisms. This will inform recommendations for further consideration in Lincolnshire.

Co-production

Our Learning Disability Partnership Group has been recognised as strength and co-production is a discipline we are committed to in Lincolnshire, for which there is a good track record. For example, the All Age Autism Partnership Group was identified as good practice example in the updated National Strategy.

We are currently working with the Autism Partnership Board and the Learning Disability Partnership to share good practice evident in both, and to explore the Learning Disability Partnership Board also taking on an all age approach. This may have specific benefits to the co-production in transition planning.

Working in partnership with the Lincolnshire CCGs, opportunities have been created for Experts with Experience to be employed to inform local integrated working. In particular, the CCG employed an expert by experience with Autism who

helps with the programme management of the Transforming Care Programme. The CCG and LCC also wish to explore with the Learning Disability Partnership Board, opportunities for the input of experts with experience to our wider commissioning activities. This is hoped to provide increased opportunity for work experience and volunteering by linking this work also to community capacity building and public health support.

2. Conclusion

Lincolnshire continues to demonstrate a range of strengths in supporting people with Learning Disabilities to achieve improved outcomes.

Projected increases in demand, complexity of need and changes in market conditions are likely to increase pressures on existing resources and increase difficulty in sustaining existing performance.

Working with other Authorities to identify common standards to drive forward opportunities for further development and improvement will help to mitigate these identified pressures.

3. Consultation

a) Have Risks and Impact Analysis been carried out??

No

b) Risks and Impact Analysis

The risk and impact analysis will be completed following receipt of the final report on phase 1 of the regional improvement programme, establishing a Baseline.

4. Appendices

These are listed below and attached at the back of the report	
	There are no Appendices

5. Background Papers

Document title	Where the document can be viewed
Valuing People (Department of Health, 2001)	https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/250877/5086.pdf
Valuing People Now (Department of Health 2009)	http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_093375.pdf
National Transforming Care Programme Service Model – Building the Right Support	https://www.england.nhs.uk/wp-content/uploads/2015/10/ld-nat-imp-plan-oct15.pdf
Lincolnshire's Transforming Care Partnership Plan – Building the Right Support	http://southwestlincolnshireccg.nhs.uk/about-us/transforming-care-in-lincolnshire
Learning Disabilities JSNA Commentary (Adult Care and Community Wellbeing, LCC)	Awaiting formal publication

This report was written by Justin Hackney, who can be contacted on 01522 554259 or justin.hackney@lincolnshire.gov.uk

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