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**Learning Disability**

**Professional Senate**

**Learning Disability Professional Senate**

**Minutes of the Meeting held on Monday 1st March 2021**

**Via MS Teams**

1. **Attendees**

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| **Name** | **Profession** |
| Karen Dodd | BPS & Co-Chair |
| Ashok Roy | Royal College of Psychiatrists and Co-Chair |
| Viki Baker | RCSLT |
| Rebecca Bauers | CQC |
| Sandy Bering | NHS Commissioners |
| Jane Bourne | British Association of Art Therapists |
| Briony Caffrey | British Diabetic Association |
| Ken Courtenay | RCPsych / CQC |
| Tom Crossland | BPS rep |
| Georgia Fair | Royal College of Occupational Therapists |
| Heather Hanna | NI rep |
| Nikki Henderson | LGA |
| Paula Hopes | Wales rep |
| Lynette Kennedy | UKLDNN |
| Kirsten Lamb | Royal College of General Practitioners |
| Rachel Lee | Specialist Trainee (ST4) to Ashok Roy |
| Isla McGlade | Scottish representative |
| Ann Norman | RCN |
| David Nuttall | DHSC |
| Nicola Power | Arts Therapy rep |
| Lisa Proctor | HEE |
| Siobhan Rogan | NI rep |
| Rowena Rossiter | BPS Child LD Network |
| Laura Elizabeth Shepherd | HM Prison and Probation Service |
| Olumide Sofuwa | Association of Chartered Physiotherapists |
| Margaret Young | BASW |

1. **APOLOGIES:**

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| **Name** | **Profession** |
| Viki Baker | RCSLT |
| Madeleine Cooper-Ueki | NDTi |
| Sophie Doswell | BPS |
| Jo Dwyer | College of Occupational Therapists |
| Bunny Forsyth | ODN North East |
| Sue Fox | NHSE Midlands & East |
| Sue Gale | LGA |
| Samantha Harker | BASW |
| Deborah Ivanova | CQC |
| Sunpreet Kandola | HM Prison and Probation Service |
| Martha Kaxton Lane | Child LD Network BPS |
| Julia King | NHSE |
| Trudi Piggott | NHSE |
| Wendy Ruck | Arts Therapy rep |
| Niggett Saleem | NHSE |
| Jenny Tinkler | Royal College of Physiotherapy |

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| **3** | **Minutes from Meeting held on the 07/12/2020**  The minutes were agreed as a true record. | |
| **4** | **Action Log** |  |
|  | The Action log was updated and is attached.   * **Locked Rehab** –Sandy Bering reported that the planned meeting with Dr Roger Banks has not yet taken place. The initiative is now linked to a parallel initiative in Mental Health and may need to be considered together. It was acknowledged that supply is outstripping demand and the commissioned capacity may increase. **Action: To bring back outcome to the June meeting of the Senate** * **Trauma Informed Care** – The final version of the Easy Read document has been circulated. This can now be placed on the Senate website and shared more widely. AR informed the meeting about the HEE trauma portal that is being developed for mental health services. Need to link with work of resilience hubs. **Action: To agenda for next meeting to consider role of Senate in this work.** * **QNLD**  - The revised inpatient standards are to be circulated soon. There is a conference on Thursday. **Action: KD will share link about the QNLD conference scheduled for 4.3.21** * **PHE –** There is now a LD Lead at PHE. **Action: David Nuttall agreed to share details of the new link person who will represent the reformed PHE.** | **Attached**  **SB**    **ALL**  **KD**  **KD**  **DN** |

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| **5** | **New Items** |  |
| 5.1 | **Policy related updates (David Nuttall)**   * Covid vaccination – David reported that the JCVI guidance for people with learning disabilities had been updated to cover all people on GP LD registers as GPs did not code for degree of LD. This guidance covers England, Wales and Northern Ireland but not Scotland. A query was raised about the possibility of offering home based vaccinations for people who could not attend vaccination centres. **Action: David agreed to look into this.** * Covid Death rates – David confirmed that up to date hospital death rates had been published and there was additional information from the LeDeR programmes. Death rates of people with LD were lower in the second wave than in the first. This has been confirmed by ONS. * Vaccination uptake – Uptake in the LD population was being measured and the figures have not yet been published. This will include uptake rates of main carers. * Autism Strategy – This document is being finalised for publication but cannot be published during the forthcoming parliamentary recess and the period leading up to the local elections in early May 2021. Publication of the strategy is likely to take place following this period * Building the Right Support (formerly Transforming Care) – A new Delivery Board has been created to provide improved governance for the programme. The Board is chaired by the minister and has representation from most major national bodies and is setting up new workstreams. There will be an Advisory group of Experts by Experience. There will also be a Stakeholder Forum. Building the Right Support is now giving greater priority to building up community services rather than on discharges of inpatients. * Other developments – The Cabinet office led Disability Strategy Report and the Baroness Hollins Report on Long Term Segregation are due to be published soon. The Oliver McGowan Mandatory Training Pilot was running slightly behind schedule due to the Covid restrictions impacting on training trials. | **DN** |
| 5.2 | **Terms of reference**  Minor amendments were suggested and after these are incorporated the final version will be uploaded onto the Senate website with a two year review cycle. **Action: KD to do amendments**. Ann Norman was thanked by members for drafting the new document. | **KD** |
| 5.3 | **Inpatient Units work**   * Complicity with poor practice – Ken Courtenay starting by asking if clinicians were able to challenge poor practice locally. Psychiatrists reported that their organisations were often not quick to respond to concerns they raised. He felt that the clinical voice needs to be heard and acted on otherwise the clinicians may appear to be complicit. Clinical supervision was seen to be helpful in this context.   CQC has published recently a report “Identifying and Responding to Closed Cultures”. This report emphasises a Human Rights approach with more effective “whistleblowing”. It gives priority to direct observation and listening to the user voice. The Senate support this report which could be helpful in the whole of the UK. <https://www.cqc.org.uk/sites/default/files/20200623_closedcultures_guidance.pdf>  Paula Hopes talked about lunch and Learn seminars that she had held to discuss implications of closed cultures. **Action: Paula to share her powerpoint slides.**  Viki suggested that we could develop a ‘What to do if…’ document. **Action: Agreed that a small group would meet to formulate. To include Karen, Viki, Nicola, Heather, Margaret, Ken, Briony, Siobhan, Tom, Lynette**  A question was raised for CQC on whether there are special advisers for each profession in CQC. **Action: Rebecca and Ken to take forward.**   * Clinical Contract – Ken Courtenay put forward the view that there needed to be clear agreement between referrers and providers of inpatient services so that it was explicit as to what actions needed to take place during the admission within an agreed time scale as this would facilitate discharge. There would be inpatient services who expected community services to speed up discharge. A clinical contract would facilitate a discussion with mutually agreed actions and speed up the pathway of care. **Action: KC agreed to circulate the document.** Karen shared that similar thinking had been going on in her Trust re working with community based service providers. They have been developing a contracted care plan and pathway. **Action: KD to share.**   Karen wondered if CQC could use QNLD accreditation for inpatient units as a lever to improving standards.   * LD Inpatient standards – Karen Dodd reminded the Senate of the QNLD conference scheduled for 4. 3. 21 at the Royal College of Psychiatrists. KC reported that the ID Faculty of the RCPsych were setting up an inpatient psychiatrists group to share good practice and raise professional standards. He would like the group to include all clinicians with an interest in improving in patient services. Ashok Roy reported that there was interest from NHSE/I to develop an inpatient register to ensure that delays to discharge after assessment and treatment of inpatients was reduced to a minimum.   A small group will meet to revise the Senate Inpatient Standards document once the QNLD standards are published. **Action: KD to set up a group including Mahesh, Heather, Siobhan, Viki, Briony.** | **RB/KC**        **KD** |
| 5.4 | **Mental Health Act White Paper – Ken Courtenay**  Ken reported that the Mental Health Act White Paper had been published and the consultation period closes on 21st April 2021. He encouraged Senate members to provide feedback from members so that professional views and service perspectives would inform the consultation. Options relevant to the Senate included removal of the categories of Learning disability and of Autism from the civil sections of the Act, giving a stronger expectation to Local Authorities to develop community services, making the recommendations of Care and Treatment reviews legally binding etc. Concern regarding the exclusion of these groups from the scope of the Act could mean that some people with LD and Autism could be deprived of appropriate services. |  |
| **5.5** | Workforce issues   * HEE Re All England LD nursing – Ellie Gordon   Ellie reported that the All England plan on LD Nursing had been launched in 2020 to counteract decreasing numbers of nursing recruits especially in learning disabilities. She reported that for the last two years the numbers of pre-registration nurses including LD nurse had increased significantly. Concern was expressed about the extent of coverage of mental health and behaviour problems in the LD and other nursing curriculums. It was noted that the pre-registration curriculum was written by the Nursing and Midwifery Council which was more difficult to influence.  Briony Caffrey noted that people with LD are twice more likely to be malnourished than the general population and this was usually unrecognised. Similar problems existed for constipation.   * Collaborative working on recruitment to specialist posts in LD - Ken Courtenay   Ken shared concerns about ongoing difficulties to vacant LD psychiatry training posts. Some of this was due to insufficient early exposure to LD services while training.  Georgia Fear shared concerns about difficulties in recruitment to AHP training at both undergraduate and postgraduate levels. This can result in a mismatch between skills available and skills required with newly qualified therapists expected to carry out roles which were complex.  There was support for a structured approach to recruitment as well as the possibility of developing more composite roles e.g. associate practitioners.   * New and Emerging roles Update   Kirsten Lamb reported that progress is being made re the Advanced Clinical Practice. The credential for the role has been developed and is being commissioned at 2 Universities. A medical module will be added in consultation with the Royal College of Physicians.  Lisa Proctor reported that the work on New and Emerging Roles was nearly complete. The report would make specific recommendations on workforce development to deal with physical health problems in people with LD, early diagnosis and support for autistic people, improved transition, paid peer support workers and improved autism awareness amongst education staff. A new careers website had been developed by HEE. Project is to be completed by March 2021. | **Attached** |
| **6.** | **LeDeR**  Lynette will be attending the meeting on behalf of the Senate next week | **LK** |
| **7.** | **Update from Wales – Paula Hopes**   * The Improving Lives Programme draws to an end on 31 March 2021; it was a 3 year programme designed to improve how the public sector in Wales identified and responded to the needs of individuals with a learning disability, their family and/or carers.  The overall objective was to re-balance the health inequalities, reduce un-necessary deaths, improve quality of life – in brief to enable individuals to live as independently as possible and lead fulfilling lives – the same expectations we all have. * The advent of the pandemic has been a real challenge and it has delayed the delivery of many of the 24 actions in the programme.  Even without the impact of managing the pandemic, there has been a general acceptance there would be a long tail of work going forward – a continuum if you will.  For example, the work needed to implement the review of specialised services and the associated capital investment required will need to be an ever-present aspect for at least the next 2 possibly 3 years. * So – we have assessed the impact of C-19 on delivery of the programme to identify the legacy work and we are working with our LD Ministerial Advisory Group to identify new and continuing priorities.  This advice will go forward to ministers next month and further substantive advice will be prepared for the new Welsh Government following the elections.  Meanwhile, we continue to work to prepare the ground for moving forward as we recover from the pandemic and take forward the next programme of government. * Last week we published: Guidance on vaccination and people with learning disability or severe mental illness:   Promotes an inclusive approach using central list and the GP register and clinical judgement to add people to the list  [https://gov.wales/covid-19-vaccinations-prioritisation-individuals-learning-disability-or-severe-mental-illness](https://eur01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fgov.wales%2Fcovid-19-vaccinations-prioritisation-individuals-learning-disability-or-severe-mental-illness&data=04%7C01%7CHazel.Powell002%40gov.wales%7C01aed22159be444d51bd08d8da4afb7b%7Ca2cc36c592804ae78887d06dab89216b%7C0%7C0%7C637499362860982996%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=xIGuytqr%2BoJ9Leocqzuex5Qi8wcvCg3IEN5QoiVL4Eo%3D&reserved=0) |  |
| **6** | **AOB**   * A recurrent theme for the Senate is whether we also cover autism without LD. There are different views. It was agreed to invite Claire Dowling – Autism Programme Director; Ian Ensum – Autism National Clinical Advisor – Adults; Janine Robinson – Autism National Clinical Advisor – CYP and Dave Nuttall to the next meeting. * Ann Noman announced that she will be retiring in June. The chair thanked her for her contribution to the work of the Senate over the years and wished her well for the future. She would be replaced by Jonathan Beebee who will attend the next meeting with her. * A possible theme for a future conference would need to be agreed at the next meeting. | **AR**  **AN** |
| **7** | **Dates for LD Professional Senate meetings 2021**  **Monday 7th June 2021 09.00 – 12.30 via Teams**  **Monday 6th September 2021 09.00 – 12.30 via Teams**  **Monday 6th December 2021 09.00 – 12.30 via Teams** |  |