



Bromley Clinical Commissioning Group



THE LONDON BOROUGH
www.bromley.gov.uk

BROMLEY JOINT STRATEGIC NEEDS ASSESSMENT

Learning Disabilities JSNA Chapter Update 2019

For more information visit www.bromley.gov.uk/JSNA or contact
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Introduction

This section focuses on the needs of the Borough's adults with learning disabilities. For this Joint Strategic Needs Assessment it particularly focuses on the following areas:

- Demographic information
- Issues and impact
 - Health
 - People supported by adult social care
 - Employment and social inclusion
 - Disability hate crime

Demographic Information

National Information

It is estimated that in 2015, there were 1,087,100 people with learning disabilities in England¹. This includes:

- 170,975 children (including those with a statement of special educational needs (SEN) or an education health and care plan and were identified as having a primary SEN associated with learning disabilities and those identified in the School Action Plus category identified as having a primary SEN associated with learning disabilities but not a statement or EHC plan). Nationally around 2.5% of children have a learning disability².
- 930,400 adults (18+). 2.4% of working age adults (18-64)³, and 2.1% of people over 65 have a learning disability⁴.

274,000 (25%) people of all ages with learning disabilities were recorded on GP registers in 2016/17 suggesting a hidden majority.

Local Information

The projected figure for the number of adults up to the age of 64 with a mild, moderate or severe learning disability in Bromley in 2020 is 5,003 or 2.4%; this is predicted to increase by 3.9% over the following 5 years⁵. Around 1,250 or 2.1% of adults 65 and over are estimated to have a learning disability in Bromley and that number is predicted to increase by 7.3%. Medical advances mean that more young people with profound and multiple disabilities are surviving to adulthood and those with complex and multiple disabilities are living longer. The number of children making the transition to adult services is also growing.

¹ Public Health England - People with Learning Disabilities in England 2015

² People with learning disabilities in England 2015: Main report. PHE. 2016. Available from: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/613182/PWLDIE_2015_main_report_NB090517.pdf

³ PANSI 2019 England baseline estimate applied to ONS 2016-based 2019 SNPP. Available from: <https://www.pansi.org.uk/>

⁴ POPPI 2019 England baseline estimate applied to ONS 2016-based 2019 SNPP. Available from: <https://www.poppi.org.uk/>

⁵ Projecting Adult Needs and Service Information Systems, April 2019

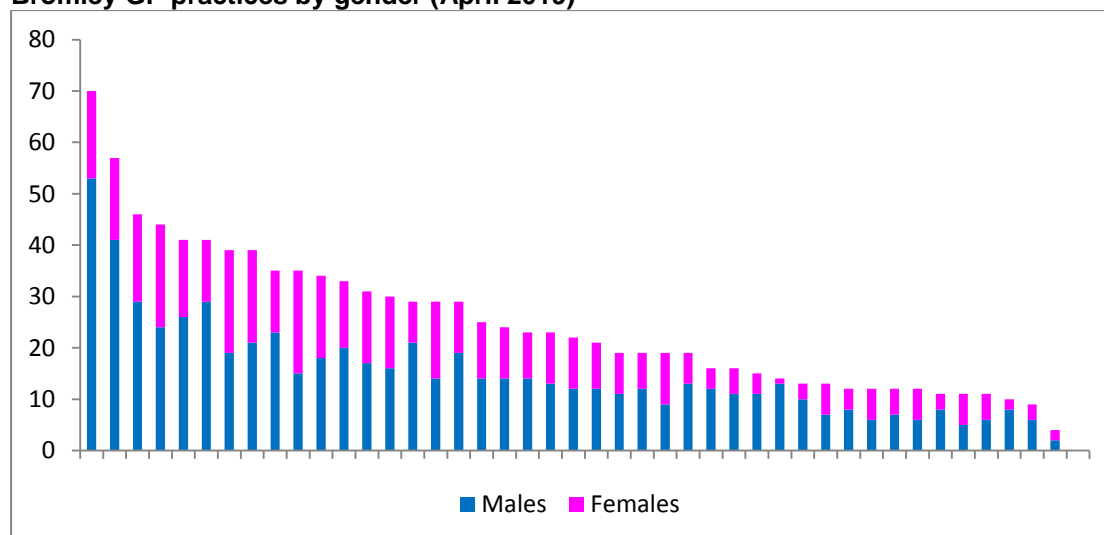
Table 11. 1

	Bromley		England	
	2020	2025	2020	2025
Learning disability (18-64 yr)	5,003	5,220	830,522	839,368
Moderate/Severe Learning Disability (18-64 yr)	1,147	1,200	189,286	191,859
Autistic Spectrum Disorder (18-64)	2,004	2,094	340,725	344,908
Learning disability(65+)	1,252	1,361	221,463	244,115
Moderate/Severe Learning Disability (65+)	166	178	29,648	32,125
Autistic Spectrum Disorder (65+)	544	601	99,142	110,376

Source: Projecting Older People Population Information System and Projecting Adults Needs Service Information April 2019

Of those adults 18-64 with Learning Disabilities, 1,147 are estimated to have moderate or severe Learning Disabilities and 2,004 autistic spectrum disorder⁶. This compares to 492 adults with learning disabilities receiving community based services from Bromley in 2017/18. Just over 1,400 or 2.5% of children known to schools have a moderate, severe or profound and multiple learning disability, 130 of whom have profound and multiple learning difficulties⁷. 670 primary, 350 secondary school children are estimated to have a moderate, severe or profound and multiple learning difficulty in Bromley with an additional 400 in special schools⁸. Approximately 260 children in need with a recorded learning disability were known to Bromley in 2017/18. 1067 people of all ages were recorded on the GP learning disability registers in Bromley in April 2017/18 as shown in Figure 11.1. Just over 61% are male. QOF data for 2017/18 reports a prevalence of 0.29% which compares to the England prevalence of 0.49%.

Figure 11.1: Distribution of people registered as having a learning disability by Bromley GP practices by gender (April 2019)



Source: Bromley CCG

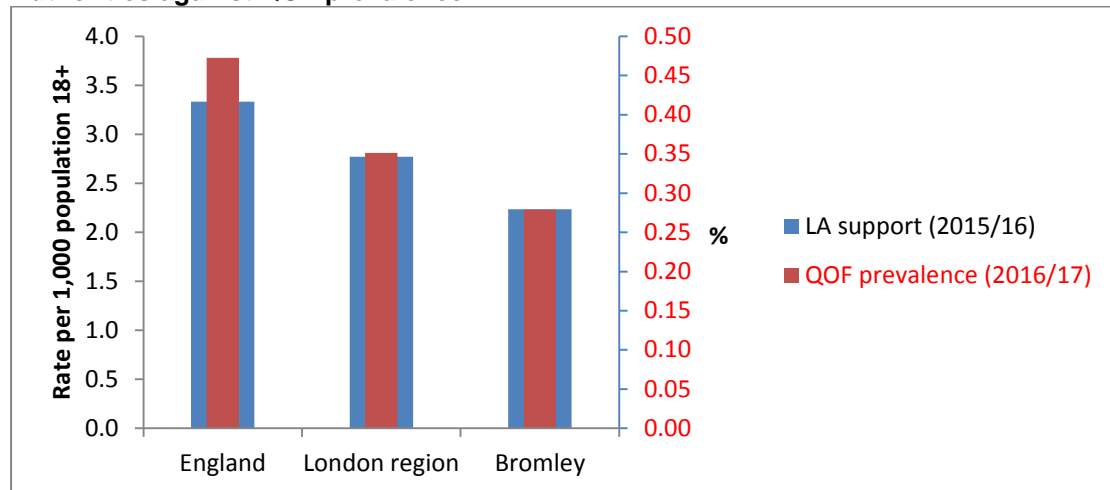
⁶ Projecting Adult Needs and Services Information Systems June 2015

⁷ PHE Fingertips Learning Disabilities Profile. Available from: <https://fingertips.phe.org.uk/profile/learning-disabilities>

⁸ Bromley Children and Young Person JSNA 2018. Section 4: Children and Young People with Established Needs. London Borough of Bromley. 2018. Available from: https://www.bromley.gov.uk/downloads/file/3521/children_and_young_people_jsna_-_established_needs

Those receiving support from the local authority is shown in Figure 11.2. The proportion of those receiving support in Bromley is lower than the England average but can be considered against the proportion of people with a learning disability in the area.

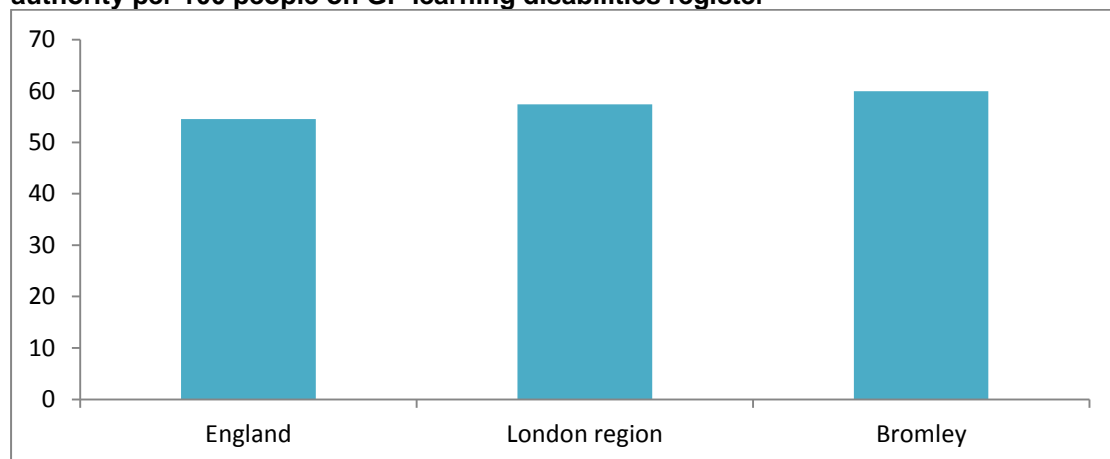
Figure 11.2: Adults (18+) with learning disability getting long term support from Local Authorities against QOF prevalence



Source: PHE Learning Disability Profile

Figure 11.3 shows the proportion of adults receiving long term learning disabilities support per 100 people on the GP learning disabilities register is higher for Bromley compared to England and the London region.

Figure 11.3: Adults receiving long term learning disabilities support from local authority per 100 people on GP learning disabilities register



Source: PHE Learning Disability Profile

There is therefore an indicated discrepancy in identification of people with Learning Disabilities which has implications for the health and social care provision to this patient group, some of which are explored in the next section.

Issues and Impact

Health

Nationally, there were just over 274,000 patients on the Quality Outcomes Framework (QOF) Learning Disability Register in 2016/17, with 134,000 Health Checks carried out (49%). In Bromley, 42 out of 44 practices have opted to participate in the Direct Enhanced Scheme and of the 965 eligible cohort, 549 checks were carried out in 2016/17 (57%) (figure 11.4). This compares to a percentage of 45% in 2014/15. There can be practical difficulties that make completing health checks for this population difficult such as gaining trust of patients and having to spread the checks over a number of appointments. This should be borne in mind when considering this data. Nevertheless, the need to complete health checks and to monitor aspects of health such as blood pressure, BMI, cancer screening and reviews of relevant aspects of care is recognised.

Some health conditions associated with learning disability increase the risk of premature death, for example, people with Down's syndrome have higher rates of congenital heart disease. People with learning disabilities have a higher prevalence of certain health problems such as epilepsy, dementia, gastro-oesophageal reflux disease and gastrointestinal cancer. They also have more difficulty than others in recognising health problems and getting treatment for them, therefore, it is advisable for GPs to offer regular health checks to make sure that important health problems are identified and treated. The Confidential Enquiry into Premature Deaths of People with Learning Disabilities (CIPOLD) found that the most common underlying causes of death were heart and circulatory disorders (22%) and cancer (20%) although they were less prevalent than the general population (29% and 30% respectively).

A national mortality study in 2015/16 found the three most common causes of death for people with learning disabilities were circulatory diseases (22.9% of deaths), respiratory diseases (17.1%) and neoplasms (cancers) (13.1%). In comparison to what would be expected from general population death rates, there were 2.8 times the expected number of deaths from circulatory diseases and 4.9 times the number of deaths from respiratory diseases. The number of cancer deaths was close to the expected figure, although the profile of cancer types was distinctly different with an unexpectedly high number of deaths from colorectal cancer⁹.

⁹ See also Health Inequalities and People with Learning Disabilities in the UK, 2015

Table 11.4: Proportion (%) of eligible adults with a learning disability having a GP health check (2016/17)



Source: PHE Learning Disabilities Profile

As well as these problems, people with learning disability are susceptible to the same health risks as the rest of the population, for example obesity and physical inactivity. Both of these are exacerbated by a sedentary lifestyle and a restricted range of opportunities to exercise or eat healthily.

Nationally, in 2014 the median age at death, using death certificate data, for men with Learning Disabilities was 60 or 19 years less than for those men without. For women, the median age at death was 58, a gap of 26 years compared to women without a learning disability. The findings into the Confidential Enquiry into Premature Deaths of People with Learning Disabilities (CIPOLD), published in 2012, reported a slightly higher median age at death (65 years for men and 63 years for women). The median age at death was lower for more severe degrees of learning disability¹⁰.

A further consequence of low levels of identification of adults with LD is reflected in admission rates to hospital. Data is not immediately available on admissions for people with LD but PHE found that in the 2 largest consultant specialities, medicine and surgery, people with learning disabilities used highly significantly more hospital care than others. Three specialities, paediatrics, dentistry and psychiatry, stand out as areas where the numbers of both care episodes and bed days used by people with learning disabilities far exceeded their proportion in the population.

Hospital care can be complicated for those with LD given difficulties in communication and understanding, but also as staff do not recognise the needs of this population. Emergency admissions do not allow for advance planning to accommodate the needs of people with learning disabilities in hospital¹¹.

There is a high prevalence rate of sight loss amongst adults with learning disabilities. An estimated 96,500 adults with learning disabilities in the UK, including 42,000 known to the statutory services, are blind or partially sighted.

¹⁰ See also Health Inequalities and People with Learning Disabilities in the UK, 2015

¹¹ See also Health Inequalities and People with Learning Disabilities in the UK, 2015

This means that nearly one in ten adults with learning disabilities is blind or partially sighted. Adults with learning disabilities are 10 times more likely to be blind or partially sighted than the general population¹².

People Supported by Adult Social Care

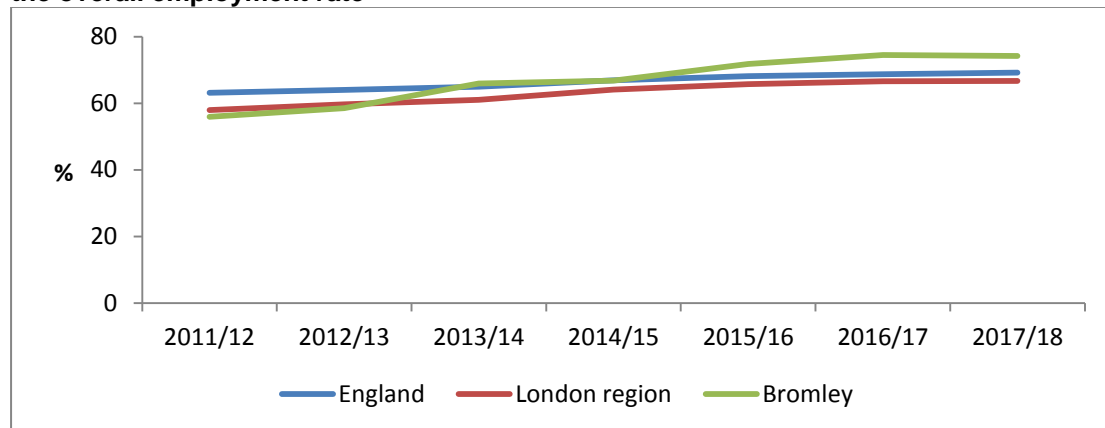
During 2017/18,

- 492 adults with a learning disability received community based services¹³. 110 of these chose to manage their support package through a direct payment
- 184 received permanent residential care, with 15 new placements made during the year¹⁴
- 11 received nursing care, with no new placements made during the year¹⁵

Employment and Social Inclusion

In 2017/18, 3.3% of adults with learning disabilities in Bromley were reported to be in some form of paid employment. Nationally, the Public Health Outcomes Framework (PHOF) estimates that in 2017/18, the gap between the employment rate of those with a learning disability and the overall employment rate was 69% (London 66.7%), and in Bromley 74.2%. The gap in Bromley has overtaken that in England and London since 2015/16.

Figure 11.5: Gap in the employment rate between those with a learning disability and the overall employment rate



Source: PHE PHOF

¹² Emerson and Robertson, 2011

¹³ Total of the Learning Disability rows for Community based services in Table 1a and 1b of LTS001a of the SALT return. This data is not to be compared with the old Rap return

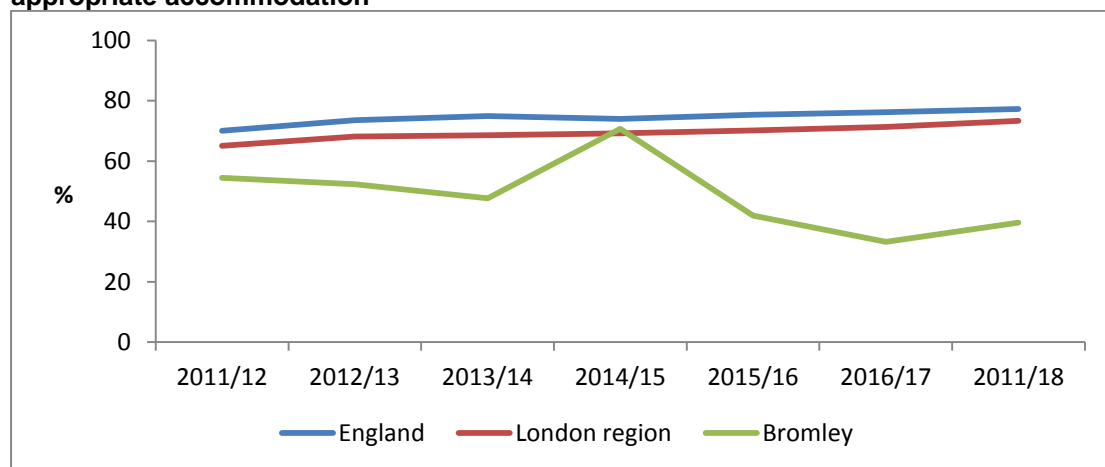
¹⁴ Total of the Learning Disability rows for Residential placements in Table 1a and 1b of LTS001a of the SALT return. This data is not to be compared with the old Rap return.

¹⁵ Total of the Learning Disability rows for Nursing placements in Table 1a and 1b of LTS001a of the SALT return. This data is not to be compared with the old Rap return.

During 2014/15, the Bromley Mencap Jobmatch service received 96 referrals and supported 36 candidates to enter paid employment. A further 37 candidates were on the main Jobmatch waiting list to receive support.

Living in settled accommodation is deemed to improve safety and reduce the risk of social exclusion. Maintaining settled accommodation and providing social care in this environment promotes personalisation and quality of life, prevents the need to readmit people into hospital or more costly residential care and ensures a positive experience of social care. The Public Health Outcomes Framework (PHOF) reflects that in Bromley in 2017/18, 39.6% of adults with a learning disability lived in settled accommodation compared to 73.3% in London and 77.2% in England.

Figure 11.6: Percentage of adults with a learning disability who live in stable and appropriate accommodation



Source: PHE PHOF

Disability Hate Crime

The combined 2015/16 to 2017/18 Crime Survey for England and Wales dataset estimates that there were 52,000 disability motivated hate crimes per year.

In 2017/18 the police recorded 7,226 disability motivated hate crimes. This is a 30% increase on the year before although improvements in recording and reporting might account for that. Disability hate crimes were reported in 8% of hate crimes recorded. 28% of disability hate crimes involved violence against the person; of these offences 36% involved injury. Public order offences accounted for 36% of disability hate crimes.

Additional Work

Bromley is working on implementing changes to the Care Act. 88 children and young adults with Special Educational Needs have completed the travel training programme to become independent travellers, opening up opportunities to participate in further and higher education, work experience/employment opportunities.

Children and Families Act

For detail on implementation of the Children and Families Act, which has signalled far reaching reforms for children and young people with special educational needs and disabilities, and their families, as part of a new birth to age 25 Special Educational Needs system, please see Section 8.

What does this mean for Bromley residents?

- There is a need to improve the identification of people with learning disabilities in primary care
 - promote the use of patient held Health Action Plans and hospital passports where appropriate
 - raise awareness of the liaison nurse role/contact details within the local hospital(s).
- There is a considerable shortfall in the number of people identified with learning disability who have had an annual health check.
- The NHS Health Check has been adapted for people with a learning disability and is being undertaken by members of the integrated team.
- Further work to be undertaken to raise awareness with GPs of Health Checks and to establish reasons for non-attendance.
- Promoting independence of people with learning disabilities through schemes such as the travel training programme.
- Further work needs to be undertaken to increase the number of adults with a learning disability who live in stable and appropriate accommodation.

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