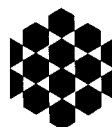


From the Chief Medical Officer  
**Dr Michael McBride**



Department of

**Health, Social Services  
and Public Safety**

An Roinn

**Sláinte, Seirbhísí Sóisialta  
agus Sábháilteachta Poiblí**

[www.dhsspsni.gov.uk](http://www.dhsspsni.gov.uk)

Mr Dominic Burke  
Chief Executive  
Western Health and Social Service Board  
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Londonderry  
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Belfast BT4 3SQ  
Tel: 028 90 520658  
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Email: [michael.mcbride@dhsspsni.gov.uk](mailto:michael.mcbride@dhsspsni.gov.uk)

Your Ref:  
Our Ref:  
Date: 3 October 2007

Dear Mr Burke

**RE: SERVICE FRAMEWORK – LEARNING DISABILITY**

On behalf of the Department we would like to thank you for agreeing to the Western Health and Social Services Board leading on the development of the service framework for learning disability which will be chaired by Mr Jim Simpson. Attached are the terms of reference for the service framework. A resource of up to £30k will be available to assist in project management and service/public engagement. Veronica Gillen, based in the Department, [veronica.gillen@dhsspsni.gov.uk](mailto:veronica.gillen@dhsspsni.gov.uk), is the project manager for all service frameworks, and may be able to assist by providing some additional business support to develop the learning disability service framework approach.

Whilst not wishing to be prescriptive about the configuration of your steering group or any sub groups, we would ask you to ensure that the service framework:

- a. is evidence based;
- b. has appropriate multidisciplinary participation to include clinicians, social care, public health, senior management, financial/commissioner expertise and user/carer representation;
- c. recognises that the majority of care is delivered in the primary/community sectors with active participation of individuals and carers;
- d. acknowledges that care goes beyond traditional HSC boundaries; and,
- e. has an external quality assurance mechanism.

It is also important that the framework is developed in collaboration with all key stakeholders including the recently established Mental Health and Learning Disability Board.

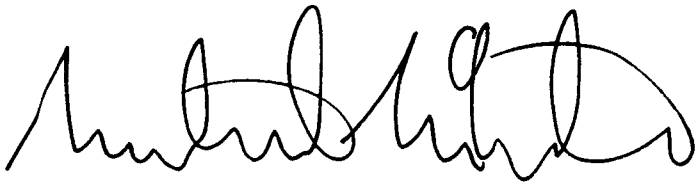
We will shortly provide you with relevant policy documents following a trawl through the Department and external trawl. In addition, a standardised template will be sent to you to ensure consistency of approach across all service frameworks.



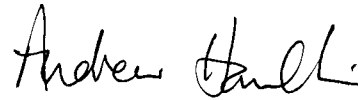
We fully understand that completion of this work requires considerable work by you and your colleagues. Should, at any time, you feel that you would wish to clarify arrangements or to highlight concerns, please do not hesitate to contact us

As the development of service frameworks is a new journey for both the Department and the HSC, we would be most grateful if there could be Departmental representation on your steering group. This is to ensure that we learn from your experiences and adapt the service framework methodology, as appropriate.

Yours sincerely



**Dr Michael McBride**  
Chief Medical Officer



**Mr Andrew Hamilton**  
Deputy Secretary

cc: Dr Briscoe  
Project Team  
Mr Simpson

## SERVICE FRAMEWORK FOR LEARNING DISABILITY

### 1.0 Introduction

A Service Framework is a document which contains explicit standards underpinned by evidence and legislative requirements. Service Frameworks will set standards, specific timeframes and expected outcomes designed to:

- improve the health and social wellbeing of the population of Northern Ireland;
- reduce inequalities and promote social inclusion;
- improve the quality and safety of care;
- safeguard vulnerable individuals and groups; and
- improve partnership working with other agencies and sectors.

Each Service Framework document will be the subject of public consultation and will be developed in collaboration with HSC staff and through engagement with patients, clients, carers, the wider public and other key stakeholders.

This Service Framework will be used by the public, HSC commissioners, HSC and other providers, and those organisations which are required to report on the performance and quality of services and care.

### 2.0 Aim

The overall aim of the Learning Disability Framework is to improve the health and wellbeing of people with a learning disability and their families in Northern Ireland through promoting social inclusion, reduce inequalities in health and wellbeing, and improve HSC quality of care.

Of particular importance is the need to value the uniqueness of the individual and to promote integration into society so that individuals with learning disabilities can participate in the families and communities in which they live and can access the full range of opportunities open to everyone else.

Achievement of these aims goes beyond traditional health and social care boundaries and is strongly influenced by population/individual attitudes and behaviours, and the contribution of carers and other sectors.

### 3.0 Definition

The Learning Disability Service Framework will be based on:

- enabling people with learning disabilities to live full and meaningful lives and have access to a wide range of continuing education, training, employment, social and leisure opportunities;
- promoting independence, self help and self directed support, where appropriate, through the active participation of the individual, their family and the wider community;

- securing improvements in the physical, mental health and wellbeing of those with learning disabilities, with particular reference to complex conditions and the need to promote healthy aging;
- supporting families and carers to assist in the development of the individual and in their integration into society;
- the best available evidence; wherever possible, this will be well-conducted, up to date, systematic reviews of valid, relevant evidence;
- the prevention (primary, secondary and tertiary), protection, assessment, diagnosis, treatment, monitoring, care, review, support, and rehabilitation relevant to those areas identified in paragraph (4.0) below, to include treatment and care in the primary, community and secondary sectors, promoting intersectoral and multidisciplinary working, where appropriate;
- existing policies and strategies already endorsed by the Department through formal publications or circulars and links with national standard setting bodies; and
- the standardised template as agreed by the Departmental Service Framework Steering Group (this includes a definition of a standard, performance indicators and audit criteria).

#### **4.0 Scope**

The Learning Disability Service Framework will promote partnership working and the need for multidisciplinary assessment, diagnosis, treatment, ongoing care and regular review. It will promote the independence of the individual and will recognise the need to support the family/carer throughout the life of the individual, where appropriate, especially during the period of transition from childhood to adolescence and from adolescence to adulthood. It will focus on supporting equity of access to primary, secondary and specialist services appropriate to the needs of the individual and the family, in order to promote and maintain healthy living and prevent disease. The Learning Disability Service Framework will include specific standards for:

##### CHILDREN

- challenging behaviour.
- complex physical health care and social care needs.
- transitional arrangements from:
  - hospital to home;
  - home to preschool and school;
  - childhood to adolescence; and
  - adolescence to adulthood
- supporting children and families:

- enhancing the interface between social care provision and educational needs;
- social and leisure activities;
- lifestyle choices including diet and physical activity; and
- respite care.

## ADOLESCENCE

- enhancing physiological and psychological wellbeing.
- developing and maintaining positive mental health
- promoting social care provision which maximises opportunities for vocational training
- Promoting independence in decision making in preparation for transition from adolescence to adulthood.

## ADULTHOOD

- supporting individuals:
  - enabling choice and independence;
  - promoting social, educational, employment and leisure activities; and
  - multiagency engagement on accommodation and housing needs.
- complex health and social care needs:
  - prevention, early intervention and management of comorbidities e.g. coronary heart disease, respiratory disease and mental health conditions; and,
  - promoting healthy aging
- supporting people as they grow older
- supporting families:
  - respite care;
  - support for carers in their changing roles; and
  - coping with bereavement.

It will link with national evidence based standards and key policy documents including the *Reform and Modernisation of Mental Health and Learning Disability Services* (May 2007) and *Equal Lives* (September 2005), the forthcoming Government response to the *Bamford Review* (Autumn 2007); the Social Services Inspectorate report "Care at its Best – A Multidisciplinary Inspection of Services for Disabled Children in Hospital" (DHSSPS, 2005); policies and procedures relating to the protection of children and vulnerable adults.

### **5.0 Timed Objectives**

The development work on the Learning Disability Service Framework will be co-ordinated via the Western Health and Social Services Board. The chairmanship (health and social care) of the Learning Disability Steering Group will ensure active service user and carer participation, a range of social, clinical, public health, commissioners, senior management

and financial expertise, taking account of the need to engage across the primary and secondary care interface and drawing on already established networks and groups. The chair will:

- provide a short project plan setting out details of proposed methodology;
- provide the Department with monthly progress reports (no longer than 1 page), which should identify any potential major cost consequences arising, taking account of paragraph 1.7 of the Service Framework Template on resource implications;
- engage with the Departmental Steering Group, as required;
- ensure external quality assurance (at national level) of the draft document, to include at least two recognised experts;
- submit a finalised consultation document to the Department by 30 June 2008; and,
- thereafter, engage with the Department, (which will be responsible for consultation), regarding analysis of consultation responses and finalisation of document by 30 December 2008.

A resource of up to £30 K will be provided to assist in project management and service/public engagement, subject to the proposed financial commitment being endorsed by the Safety, Quality and Standards Directorate.

**Safety, Quality and Standards Directorate**  
**29 August 2007**