No.	Recommendation	Resp	Assessment of progress June Categories 1-4	Evidence of progress Presented to Committee on Dec 2017	Assessment of progress Dec 17 Categories 1-4	Evidence of progress Presented to Committee on June 2018	Assessment of progress June 2018 Categories 1-4
1	a) Practices performing well on GP-led health checks for people with learning disabilities should share good practice with others in the Borough, and;	Clinical Commissioning Group (CCG)	2	Training has now been received within all but 4 practices.	2	There are 22 GP Practices in Stockton locality.  One of the GP Practices have taken up LD awareness training from the Tees Community Learning Disabilities Service since January 2018. There is a programme of engagement underway with the Community Learning Disabilities Service to increase level of engagement and uptake of the training.  As part of the annual practice visits undertaken by the CCG Primary Care Team and CCG Clinical Locality Lead (GP), LD health checks are discussed using information taken from RAIDR. Best practice is shared in order to encourage practices with a low performance of annual health checks (AHC).  Data from 17/18 suggests 51% of AHC are completed, with 7 practices achieving over 75%.	2
	b) Information on the role of Health Facilitators and other sources of support be circulated to all Practices and health providers	Clinical Commissioning Group	2	This is ongoing through the work of the Keeping Healthy Group and part of the work of the Enhanced Tees Community Learning Disability Service		This is ongoing through the work of the Keeping Healthy Group and part of the work of the Enhanced Tees Community Learning Disability Service  The CCG has mechanisms through the Primary care team to disseminate	1

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		SBC Adult Services		Health facilitators will be scheduled at the next provider forum on 24th January 2018 to discuss how they should work in partnership with Care Home and Home Care providers.	2	information to Practices via email, clinical reference groups and time out learning events.	
2	b) the CCG should take steps to address the gap in performance management activity, and	Clinical Commissioning Group	2	This continues to be an area for development that is taken forward as part of the Keeping Healthy Group and also through the day to day work of the Enhanced Community Learning Disabilities Service.  Interim information for the period 01.04.17 – 30.09.17 indicates that  47% of the eligible population has received breast screening in the last 3 years.  23% of the eligible population has received cervical screening in the last 3/5 years.	2	This continues to be an area for development that is taken forward as part of the Keeping Healthy Group and also through the day to day work of the Enhanced Community Learning Disabilities Service.  Updated figures 01.04.17– 31.03.18  - Note improvements/increased uptake in ALL domains:  AHC – 51%  Screening: Bowel = 75% Breast = 48% Cervical = 27%  Immunisations Flu vac = 47%	2

## Progress Update – Review of Access to Services for People with Learning Disability and/or Autism

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No.	Recommendation	Resp	Assessment of progress June Categories 1-4	Evidence of progress Presented to Committee on Dec 2017	Assessment of progress Dec 17 Categories 1-4	Evidence of progress Presented to Committee on June 2018	Assessment of progress June 2018 Categories 1-4
				Only 9% of the eligible population has had flu immunisation in the period  72% of the eligible population has received bowel screening in the period		There are still a number of practices yet to share data with the Bowel Screening Hub. Primary care commissioners have sent letters to each practice to encourage provision in order to progress uptake further.  As part of the annual practice visits undertaken by the CCG Primary Care Team and CCG Clinical Locality Lead (GP), LD health checks are discussed using information taken from RAIDR. Best practice is shared in order to encourage practices with a low performance of health checks.  Data from 17/18 suggests 51% of AHC are completed, with 7 practices achieving over 75%	
	c) Practices should be publicly identified in relation to their health check performance	Clinical Commissioning Group	2	This continues to be an area for development that is taken forward as part of the Keeping Healthy Group	2	Practice level data is available to Primary Care Commissioners and to Community Learning Disabilities Services to ensure that work, engagement and intervention can be targeted.  However the Data Collection and Sharing Agreement for the Learning Disabilities reporting does not allow NECS to share these details with the LA or publically.	4

## Progress Update – Review of Access to Services for People with Learning Disability and/or Autism

Item 5 – Appendix 4
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No.	Recommendation	Resp	Assessment of progress June Categories 1-4	Evidence of progress Presented to Committee on Dec 2017	Assessment of progress Dec 17 Categories 1-4	Evidence of progress Presented to Committee on June 2018	Assessment of progress June 2018 Categories 1-4
3	The new Hartlepool and Stockton-on-Tees (HaSH) GP Federation should work in partnership with its shareholders to make the uptake of the GP-led health checks an early focus of its performance improvement activity	CEO, HaSH Federation	2			TBA	
4	Each Practice should have a named clinical lead for Learning Disabilities	Clinical Commissioning Group	3	Analysis underway to identify clinical leads in all Practices. Feedback is awaited from some Practices.  Clinical lead required to be in place at all Practices who will act as point of contact for ongoing initiatives.	3	Analysis underway to identify clinical leads in all Practices. Feedback is awaited from some Practices.  Clinical lead required to be in place at all Practices who will act as point of contact for ongoing initiatives — this is an NHSE requirement under the DES Scheme. Work is ongoing to review the accountability and review processes. It is known that there are Clinical Leads identified in 8 of the 22 Stockton Practices at present.  Work will be progressed though the Keeping Healthy Group to be able to identify the roles and responsibilities of the LD GP Practice Champion (including being a point of contact for ongoing initiatives) to hopefully increase the uptake and participation with this in GP Practices.	3

Adult and relationships   Adult and relationships   Adult and services (for example, but not limited to, Public Health) should engage with providers and establish a position on what is expected for services to people with Learning Disabilities / Autism, including reasonable adjustments.   Adult and the lating the providers and establish and position on what is expected for services to people with Learning Disabilities / Autism, including reasonable adjustments.   Adult and the lating the lating the lating that the lating that the lating that the lating that the lating lating the lating that the lating lating that the lating lating lat	No.	Recommendation	Resp	Assessment of progress June Categories 1-4	Evidence of progress Presented to Committee on Dec 2017	Assessment of progress Dec 17 Categories 1-4	Evidence of progress Presented to Committee on June 2018	Assessment of progress June 2018 Categories 1-4
Engagement is on-going	6	relevant universal services (for example, but not limited to, Public Health) should engage with providers and establish a position on what is expected for services to people with Learning Disabilities / Autism, including	Health Services initially, before roll out to commissione rs of other	2	use and can be shared with other commissioners within the council.  The Reasonable Adjustment Commissioning Guidance has been shared with the Procurement Team.  In addition, the Learning Disability Partnership Board (LDPB) will be consulting with people on the following themes  • Care and support • Good Health • Being Safe • Housing • A good day • Family and relationships  This will form a plan for the Learning Disability Partnership to engage with providers and universal services and will cover reasonable adjustments, safe places, annual health checks etc.		developed a Tender Management Plan to support commissioners when require to procure services. Within the plan, there is a question on 'reasonable adjustment' to ensure commissioners to consider the requirement around reasonable adjustment when commissioning services. This will be supported by the Reasonable Adjustment Commissioning Guidance developed	1

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				and will continue to be promoted on a regular basis.  This will also link into the development of the 2018-21 Market Position Statement, (MPS) which, cognisant of the outcome of the work of Public Health and the LDPB, will influence future service design.			
10	a) Committee supports and encourages the work to further develop and raise awareness of the Safe Place Scheme	Teeswide Safeguarding Adults Board	3	The scheme continues to be promoted as previously stated through the TSAB Newsletters, Annual Report, Social Media accounts and linked work through the Board's Communication and Engagement Sub-Group.  Safe Place Scheme locations are asked to help self-promote the scheme, which is being reinforced by every location receiving a letter/invitation to complete a self-audit between now and Jan 18.  Middlesbrough Football Club has now (in November after some delays) joined	2	TBA	

## Progress Update – Review of Access to Services for People with Learning Disability and/or Autism

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No.	Recommendation	Resp	Assessment of progress June Categories 1-4	Evidence of progress Presented to Committee on Dec 2017	Assessment of progress Dec 17 Categories 1-4	Evidence of progress Presented to Committee on June 2018	Assessment of progress June 2018 Categories 1-4
				the scheme along with Teesside Shopping Retail Park in Stockton-on-Tees early this year, is expected to help to increase the profile of the scheme.			

- 1 Fully Achieved
- 2 On Track
- 3 Slipped 4 Not Achieved