

Trust Strategy

Learning Disabilities Strategy

Key Points

- To set out the principles and framework for the management of patients with Learning Disabilities and their carers within Frimley Health NHS Foundation Trust.
- To set out clearly defined roles, responsibilities and assurance requirements for the management of patients with Learning Disabilities.
- To enable context to be applied to the long term planning and service provision for people with learning disabilities and their carers' in line with National Standards.

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1.0 Introduction

1.1 The Trust is committed to delivering care to patients that meets their individual needs and recognises that some patients may be disadvantaged in accessing care and treatment due to disability or other health inequalities.

The Equality Act 2010 (incorporating the Disability Discrimination Act 2005) places responsibility on all public services to ensure that no discriminatory practices exist within their organisation and that services meet the needs of the individual. NHS Organisations have a clear 'duty of equality'. This does not mean treating everybody the same but rather those organisations must make 'reasonable adjustments' to meet the needs of disabled people.

People with learning disabilities, autism or both and their families and carers should be able to expect high quality care across all services provided by the Trust. They should receive treatment, care and support that are safe and personalised; and have the same access to services and outcomes as their non-disabled peers. Furthermore, those opportunities, for them to feel listened are given and appropriate actions then taken and implemented moving forwards.

2.0 Purpose/ Scope

2.1 The purpose of this Strategy is to describe how and ensure that people with learning disabilities and their carers' are able to access high quality health care with positive outcomes when using services within Frimley Health NHS Foundation Trust and that services continue to evolve in line with recognised requirements. In order to achieve this it is acknowledged that people with a learning disability will need to have access to reasonably adjusted pathways to meet individual needs and requirements.

This Strategy will align the NHS Improvement requirements and commit to the development and finalisation of a Trust policy which will enable us to provide optimal care provision for this patient group. This in turn will inform and enable staff across the professional boundaries to develop a better understanding of people with learning disabilities and to equip them to deal more effectively with the particular needs of each individual.

The Strategy will also define the key roles and responsibilities of specialist staff within the trust and the reporting relationships between the key committees with the responsibility and accountability for regulatory assurance in regards to delivery of care for Patients with Learning disabilities.

2.2 This Strategy is applicable to all members of staff within the organisation, both temporary and substantive. The strategy is also applicable to all staff contracted to provide services to the trust including honorary contract holders and to all workers of other organisations visiting the trust sites in the course of their employment or studies.

3.0 Definition

- 3.1 A learning disability affects the way a person learns new things throughout their lifetime and affects the way a person understand information and how they communicate. This means they can have difficulty:
 - Understanding new or complex information
 - Learning new skills
 - Coping independently

4.0 Background Information

- 4.1 Around 1.5 million people in the UK have a learning disability. It is thought up to 350,000 people have a severe learning disability. This figure is increasing. We know that people with a learning disability do not have good health as other people.
- 4.2 Some people with a learning disability have extra health and support needs.
 - People with profound and multiple disabilities
 - People who have behaviours that can be challenging
 - People may also need extra support with things other than their learning disability; this
 might be things like mental health issues or alcoholism.
- 4.3 Frimley Health is committed to transforming care for people with learning disabilities and learning disability with autism. We have made good progress but more needs to be done. Frimley Health is committed to support people with learning disabilities to:
 - Live long and healthy lives
 - Have the right to choose and be in control of their daily life
 - Feel happy, safety and supported
 - Lead fulfilling and active lives
 - Enjoy the best health and well being
 - Be respected and treated with dignity

5.0 Key Roles and Responsibilities

5.1 Director of Nursing and Quality

The Director of Nursing and Quality is the Executive Lead with responsibility for managing the strategic development and implementation of the Trust's Quality Strategy and Trust's Corporate Assurance Framework. They are accountable for ensuring there is a robust system in place for monitoring compliance with the Care Quality Commission Outcomes of Quality & Safety. The Director of Nursing and Quality is responsible for managing quality, patient safety, complaints, and medical negligence claims and setting the quality standards. This includes the implementation of the Trusts Learning Disabilities Strategy.

5.2 <u>Lead Nurse Safeguarding</u>

- 5.2.1 There are two Lead Nurses for Safeguarding that support the Frimley and Heatherwood\Wexham Park Sites; they are responsible for the supporting staff and patients where safeguarding issues are raised or suspected
- 5.2.2 The Lead Nurse Safeguarding will work with the Acute Liaison Nurse for Learning Disabilities as part of the Trust Safeguarding Team to ensure a multi-dimensional and patient centric service to ensuring their needs are met; including ensuring that patients with Learning Disabilities are not exploited by relatives and carers.

5.3 Acute Nurse for Learning Disabilities

- 5.3.1 There is an Acute Liaison Nurse for Learning Disabilities who supports people with a learning disability when they are in hospital to make sure they get the care they need and will liaise with community services to support the patient, family carers and hospital staff.
- 5.3.2 It is important that the nurse meets all patients with learning disabilities and their carers if appropriate. This is so that the nurse can find out as much as possible about the patient and understand the help they may need while in hospital.

The Acute Liaison Nurse for Learning Disabilities reports into the Lead Nurse for Safeguarding (Adults).

5.4 <u>Governance / Assurance Committees</u>

5.4.1 Board of Directors

The Board of Directors attaches great importance on ensuring that the Trust operates to high ethical and compliance standards. In addition it seeks to observe any principles set out by NHS Improvement, Care Quality Committee and professional bodies as appropriate.

The Board is responsible for the management of the Trust and for ensuring proper standards of corporate governance are maintained. The Board accounts for the performance of the hospital and consults on its future strategy with its members through the Council of Governors.

The Board of Directors receives exception reports against performance standards and these have been introduced to assist the Board in identifying areas of high risk.

The Board of Directors is responsible for:

- Monitoring progress against the Trust objectives, both strategic and operational for Learning Disabilities.
- Identifying the significant risks that may threaten the achievement of the Trust objectives in reference to the treatment of Learning Disabilities.

 Maintaining dynamic risk management arrangements including, crucially, a wellfounded Risk Register and Corporate Assurance Framework, reviewed quarterly by the full Board of Directors.

It is crucial that the Board knows what the key risks are and are satisfied that they are being properly managed.

5.4.2 Quality Committee

- To coordinate and implement all the responsive actions being taken by the
 organisation in relation to Learning Disabilities and provide monthly assurance to the
 Board that the Learning Disability Policy (to be developed) is being embedded in line
 with the Learning Disability Strategy and that performance is measured and monitored.
- To ensure the Trust is providing a high quality service that is responsive to the individual needs of patients with Learning Disabilities.
- To be responsive to Learning Disability safety risks.
- To oversee, monitor and review the quality of services provided by the Trust.
- To review internal core and speciality dashboards and external quality improvement targets:
 - Clinical outcomes
 - Patient Safety
 - Patient Experience
- To identify key quality and patient safety risks from review of mortality data and undertake mortality and morbidity review at both speciality and Trust level for all Patients who die with Learning Disabilities as well as being reviewed via the "LeDeR Programme".
- To ensure progress in implementing action plans to address shortcomings in the quality of services, should they be identified with the treatment of patients with Learning Disabilities.

5.4.3 Safeguarding Adult and Paediatric Board

- To coordinate the Learning Disability Improvement Plan.
- To ensure the Trust is provided a high quality service that is responsive to the individual needs of patients with Learning Disabilities.
- To monitor Training and Education programme for Learning Disabilities.
- To receive and review Audit Programmes relating to Learning Disabilities.

6.0 Frimley Health Commitments

- To ensure that people with learning disabilities and learning disabilities with autism in the hospital that could be supported in the community are discharged safely into a community setting as soon as possible.
- To ensure a robust admission gateway processes, so that when an admission to hospital is considered for someone with a learning disability and learning disability with autism, a challenge process is in place to check that there is no available alternative –

and where an individual does need to be admitted, they have an agreed discharge plan from the point of admission.

- To ensure that there is a care passport completed and if one does not exist it will be completed on admission.
- Make sure people get equal timely access to good health care.
- Train people working in health to understanding learning disabilities.
- Allocate more time for health appointments, to address individual needs.
- Make sure that there is good information and advice so that people know what to expect.
- Information and advice should be available in a words pictures and videos which people understand. Each ward has a yellow resource folder.
- Make sure that people do not have to wait longer for services and have special arrangements in outpatients and the emergency department to minimise waiting times.
- Work with people and carers with learning disabilities to assist the organisation on changes and developments that are required to improve our services.
- Find out what is important to people to make sure that they achieve the outcomes they
 want.
- Work in a person centred way. People will be at the centre of the decisions that are made.
- Work in partnership and collaboration with all the different groups and organisations.
- Make sure that decisions are based on an understanding of the information and evidence available.
- Information on learning disabilities in available to all staff on the intranet and on the Trust website for the public.

7.0 NHS Improvement: The Learning Disability Improvement Standards for NHS Trusts

- 7.1 The standards have been developed with a number of outcomes created by people and families. By taking this approach to quality improvement, it places patient and carer experience as the primary objective, as well as recognising the importance of how the NHS listens, learns and response in order to improve care.
- 7.2 There are four standards, which include:

- Respecting and protecting rights
- Inclusion and engagement
- Workforce
- Learning disability services standard (aimed solely at specialist mental health Trusts providing care to people with learning disabilities, autism or both)
- 7.3 Frimley Health is using the above standards to inform its quality improvement action plan for learning disability.

8.0 Conclusion

8.1 The Trust is committed to providing exceptional services for people with learning disabilities in order to ensure that care is delivered and best practice is encompassed across the organisation and in accordance with local, national and regulatory requirements.

Organisational vision and aims for care provisions for patients with learning disabilities and their carers is detailed in accordance within improvement plan, and in line with the NHS Improvement recommendations. (Appendix A).

Improvement Plan for Adults with a Learning Disability.

Lead Nurses Safeguarding - FHFT Updated August 2018

In 2014 the Trust reviewed the recommendations put forward by Sir Jonathan Michael in 'Healthcare for all' (2008) and implemented an action plan which was trust wide to address the recommendations and report progress made.

There has been work undertaken throughout 2014/15/16/17 and on in to 2018 to achieve compliance with the recommendations as well as on-going developments to evidence systems that are in place or in the process to enable the Trust to understand and meet the specific needs of people with a learning disability when they access services within an Acute Hospital.

The portfolio for Learning Disability sits within Patient Safety Team as part of the adult safeguarding work stream and is led by the Adult Safeguarding Leads on both sites via delegated responsibility from the Director of Nursing and Quality.

Frimley Park Hospital has a Learning Disability Acute Liaison Nurse for Acute Trusts employed by Surrey and Borders Partnership NHS Foundation Trust. This is funded by Surrey and Hampshire Clinical Commissioning Group's (CCG's) and has recently been increased to provide resource for three days a week.

There has been funding agreed by the Berkshire CCG's for a liaison nurse post to cover Heatherwood and Wexham Park Hospitals and to provide cover for Berkshire patients attending Frimley Park Hospital with a learning disability. The detail is currently being worked on to move this forward.

NHS Improvement published Learning Disability Improvement Standards for NHS Trusts in June 2018. These standards will be used to help organisations measure the quality of service they provide to people with learning disabilities, autism or both. The standards reflect the strategic objectives and priorities described in national policies and programmes, in particular those arising from "Transforming care for people with learning disabilities – next steps" and the "Learning Disabilities Mortality Review" (LeDeR) programme.

They also reflect the work of other arm's length bodies, in particular that of NHS England, the Care Quality Commission (CQC) and Health Education England (HEE). The CQC has embedded a human rights-based approach in its regulatory 4 Introduction framework since 2014. This has been a powerful driver for change in trusts.

The standards and improvement measures align with the eight key lines of enquiry that are central to the developmental reviews of leadership and governance using the well-led framework4 that trusts are charged with undertaking. This ensures these reviews specifically consider service delivery to people with learning disabilities, autism or both.

As a result the action plan has been reviewed to become the Improvement Plan for Adults with a Learning Disability to ensure three of the four standards within the Learning Disability Improvement Standards are included. The fourth standard is not relevant to the Trust as it does not have a specialist Learning Disability Service within the services it provides.

Progress on actions is reviewed regularly via the Acute Mental Health forum which meets monthly. It is also a regular agenda item for the Internal Adult and Child Safeguarding meeting where actions are monitored and reviewed. There is also the requirement to report progress from the Learning Disabilities Action Plan to the commissioners on a quarterly basis via the Contract and Quality meetings.

For governance purposes, the action plan is presented as part of the safeguarding work-stream to the Quality Committee and to the Hospital Executive Board. The progress from the plan also contributes to the Annual Adult Safeguarding Report yearly.

Recommendations from "Healthcare for all" (HCFA) and "Learning Disability Improvement Standards for NHS Trusts".

Recommendations	Current Position Heatherwood & Wexham Park	Current Position Frimley Park Hospital	Further Action Required	Target Date
Does the NHS Foundati Trust have a mechanisr place to identify and fla patients with learning disabilities and protoco that ensure that pathwa of care are reasonably adjusted to meet the health needs of these patients? Standard 1a Trusts must demonstrate they have made reasonable adjustments to care pathways to ensure people with learning disabilities, autism or both can access highly personalised care and achieve equality of outcomes.	teams in the Trust can identify patients with a Learning Disability (LD) For outpatients there is an alert on the front sheets for patient with LD which is flagged up by the patient records team. The nurses are then informed if a patient with LD has an appointment when the clinic is prepared. On the actual clinic, the patient will then be prioritised.	The PAS system is used for flagging those patients with a LD that all staff can access. Outpatient nurses have access to easy read documentation. Patients with LD are seen earlier to alleviate waiting. Patients accessing clinical areas such as wards, theatres etc. for assessment, treatment and procedures are flagged prior to admission for planned care and flagged on admission for emergency care. Pre-assessment clinics receive notification if patient with LD is coming for assessment. Longer appointment times are put in place to allow time for a full assessment. Care Passports are given out to encourage completion prior to	Roll out awareness of importance of using Care Passport	Completed for HCFA and standard 1a and 1b

Trus mec and lear autis poin thro and shar peop depart	sts must have hanisms to identify flag patients with ning disabilities, sm or both from the at of admission ugh to discharge; where appropriate, re this information as ple move through artments and ween services.	the Trust protocol for patients with a Learning Disability is being adhered.	attending hospital as an inpatient		
Trust availa comp inforr with I	the NHS Foundation provide readily able and prehensible mation to patients learning disabilities t the following	HWPH now has easy read documents including complaints, treatments and appointments. Developed a protocol and guidelines for admission, care pathways for teams within the trust. Local Care Passport developed and used Trust wide. Protocol includes pathways of care including the provision of additional care from known carers	Easy read documents have been developed in conjunction with the LD Liaison Nurse at FPH and now being used across FHFT. Developed a protocol and guidelines for admission, care pathways for teams within the trust. Local Care Passport developed and used Trust wide. In absence of this, "This is Me" can be used Protocol includes pathways of care including the provision of	TRUSTWIDE Trust Intranet page is currently being developed so that it will be one Intranet for all three sites within the Trust. Once completed this will be populated with LD information. TRUSTWIDE LD Policy to be developed	Completed for HCFA Completed for HCFA

Does the NHS Foundation Trust have protocols in place to provide suitable support for family carers who support patients with learning disabilities?	Staff use the patients' Care Passport to ensure all relevant information about their needs is incorporated in the assessment and subsequent care planning. Clear pathway has	The staff adhere to the care pathways for people with Learning Disability and at the point of admission, parents/carers and learning disability staff handover all relevant information regarding the support needs of the patient to the nurse in	TRUSTWIDE Monitor and review regularly.	Completed for HCFA
	patient with extra special needs for additional support when they come into hospital so they can have the best experience. HON has been spearheading this pathway and so far the Trust have had positive feedback	area. The degree and frequency of any additional support required is discussed, and agreement reached, as to how this will be provided out of existing or additional resources. Staff also use the patients' Care Passport to ensure all relevant information about their needs is incorporated in the assessment and subsequent care planning.		

4 HCFA

Does the NHS Foundation Trust have protocols in place to routinely include training on providing health care to patients with learning disabilities for all staff?

Standard 3a

Based on analysis of the needs of the local population, trusts must ensure staff have the specialist knowledge and skills to meet the unique needs of people with learning disabilities, autism or both who access and use their services, as well as those who support them.

Standard 3b

Staff must be trained and then routinely updated in how to deliver care to people with learning disabilities, autism or both who use their services, in a way that takes account of their rights, unique needs and health vulnerabilities; adjustments to how services are delivered are

A national document specifying training requirements for various levels of staff has been published.

Each clinical area has an updated Learning Disability Educational Resource file for all staff members to access.

"10 Top Tips" to working with people who have a learning disability has been distributed to all clinical staff.

Learning Disability Resource file contents are also available on the Trust Intranet. A national document specifying training requirements for various levels of staff has been published.

"10 Top Tips" to working with people who have a learning disability has been distributed to all clinical staff.

Training day organised in January 2017 for all Practice development nurses in Trust and designated key managers in clinical areas in FPH to undertake full training to cascade in work areas

Training being delivered by "speak out" weekly on WPH site which is delivered by service users HWP - Meetings in progress and visible attendance to Learning Disability meetings and forums with the Slough Borough council. Plans to have a bespoke LD Training session with Jane Knowles Specialist Learning Disability designated nurse with plans to incorporate LD awareness into our Safeguarding training.

FPH – LD included in all levels of safeguarding adults training for awareness.

TRUSTWIDE.

Bespoke full day sessions on LD, challenging behaviour Autism, MCA and Law in place. Training dates set at WPH HWH and FPH using resources for FPH currently. Further dates to be incorporated in to the MH training across site

Completed for HCFA and Standard 3a and 3b

Completed for HCFA and Standard 3a and 3b

Completed for HCFA and standard 3a and 3b

	tailored to each person's individual needs.				
5	Does the NHS Foundation Trust have protocols in place to encourage representation of people with learning disabilities and their family carers? Standard 2 a Trusts must demonstrate processes that ensure they work and engage with people receiving care, their families and carers, as set out in the NHS Constitution. Standard 2 c Trusts must demonstrate that they co-design relevant services with people with learning disabilities, autism or both and their families and carers.	There is a Carers group which has been established for a while which includes patient representation for LD along with other patient representatives. The progress for work for patients with LD is discussed there as well as the Internal Safeguarding Groups for Adult and Child Safeguarding. Have been receiving positive feedback from Carers forum and a lot of recommendations that have been brought up have been incorporated	There is a Carers group which has been established for a while which includes patient representation for LD along with other patient representatives. The progress for work for patients with LD is discussed there as well as the Internal Safeguarding Groups for Adult and Child Safeguarding. Have been receiving positive feedback from Carers forum and a lot of recommendations that have been incorporated		Completed for HCFA and Standard 2a and 2c
6	HCFA Does the NHS Foundation Trust have protocols in place to regularly audit its	The Trust fully participates in the National Clinical Audit and Patient Outcomes Programme of which	The Trust fully participates in the National Clinical Audit and Patient Outcomes Programme of which	TRUST WIDE Continue to participate in national audits as required.	Completed for HCFA
Version: 1.0	practices for patients with learning disabilities and to demonstrate the findings	patients with a learning disability are included, as well as the National Inpatient	patients with a learning disability are included, as well as the National Inpatient survey.	TRUSTWIDE# Continue review and monitoring of all deaths and SI's which involve	Completed HCFA

	in routine public reports?	survey.		patients with LD.	
	in routine public reports:	All deaths where a patient has a LD are systematically reviewed as part of the Mortality and Morbidity work programme and are	Adult Safeguarding Lead has undertaken LDR awareness training in Hampshire All deaths where a patient has a LD and	Internally and via LEDER programme	
		presented at the Trust M and M Committee.	systematically reviewed as part of the Mortality and Morbidity work		
		Lessons learned are shared and any gaps identified are taken forward to improve future experience for patients.	programme and are presented at the Trust M and M Committee. Lessons learned are shared and any gaps identified are taken forward to improve future		
		Any SI findings related to patients	experience for patients.		
		with LD are also taken forward to improve standards of care and experiences.	Any SI findings related to patients with LD are also taken forward to improve standards of care and experiences.		
7.	<u>HCFA</u>	Children and young	Children and young	HWPH	Completed for
	For the NHS Foundation	people with learning disabilities that have	people with learning disabilities that have	Senior Matron for Paediatrics to inform	HCFA and standard 1c
	Trust to have a process to	continuing nursing	continuing nursing and	LD Lead with contact	Standard TC
	ensure the smooth	and medical care	medical care needs have	details of BHFT.	
	transition from children's	needs have a named	a named community	complex care children's	
	care into adult care services.	community nurse and	nurse and Consultant	team	
	SCI VICES.	Consultant from	from SABPT. Any	HWPH	Completed for
	Standard 1c	BHFT. Any emergency or acute	emergency or acute medical or nursing care	BHFT Complex Care	Completed for HCFA and
	Trusts must have	medical or nursing	needs are provided by	Community Nurses to	standard 1c
	processes to investigate	care needs are	FPH ED, PAU or WardF1	liaise with GPs and	
	the death of a person with	provided by WP ED,	and their named	WPH Adult Care	

autism or both while using their services, and to learn lessons from the findings of these investigations. BHCh Te the GG Pro wo for adi the info Pa	AU or Ward 24 and heir named community nurse is aformed. Some of hese children and coung people would ave permanent open ccess to PAU/ Ward 4 HFT Complex Care hildren's Nursing eam are aware of he Ready, Steady, so Transition rogramme and could be "responsible for moving" them onto dult services around heir 19 th birthday and aforming WPH aediatrics about lans and dates - to	community nurse is informed. Some of these children and young people would have permanent open access to PAU/ Ward F1 SABPT Complex Care Children's Nursing Team are aware of the Transition Programme and would be "responsible for moving" them onto adult services around their 19th birthday and informing FPH Acute LD Liaison Nurse.	Services about the "Hello" part of the programme for a smooth transition.	
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8.	Standard 1d Trusts must demonstrate that they vigilantly monitor any restrictions or deprivations of liberty associated with the delivery of care and treatment to people with learning disabilities, autism or both	The Trust has a process in place for monitoring which areas are requesting a DOL's for specific patients and ensuring that these are correctly and lawfully authorized when required. The best interest principle is used where possible. This is monitored on a constant basis by the SG team.	The Trust has a process in place for monitoring which areas are requesting a DOL's for specific patients and ensuring that these are correctly and lawfully authorized when required. The best interest principle is used where possible. This is monitored on a constant basis by the SG team and the LD Liaison Nurse	N/A	Completed for Standard 1d
9.	Standard 1e Trusts must have measures to promote antidiscriminatory practice in relation to people with learning disabilities, autism or both.	The Adult Safeguarding Team have effective arrangements in place to ensure that diagnostic overshadowing is not an issue. Judgments about a patients quality of life need to be given further through particularly when completing DNAR	The Adult Safeguarding Team have effective arrangements in place to ensure that diagnostic overshadowing is not an issue. Judgments about a patients quality of life need to be given further through particularly when completing DNAR	TRUSTWIDE Further training to be given to medical staff re quality of life and discussion with patients with LD and DNAR. Audit to be completed to compare outcomes and experiences of people with LD with those of non-disabled peers	April 2019 April 2019
10.	Standard 2b Trusts must demonstrate that their services are 'values-led'; for example, in service design/improvement, handling of complaints,	The Trust Values are in place and staff appraisals are completed using these when evidencing care and experiences.	The Trust Values are in place and staff appraisals are completed using these when evidencing care and experiences. The trust has a PAL's team which work with the LD Liaison Nurse and the	N/A	Completed for Standard 2b

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	investigations, training and development, and recruitment.	The trust has a PAL's team which work with the LD Liaison Nurse and the Safeguarding Adult Teams in order to support patients with their concerns and complaints. Complaints involving patients with a LD are continuously monitored to make changes so that the episode of care is the best it can be for the patient. Patients with A LD are involved in training at HWPH	Safeguarding Adult Teams in order to support patients with their concerns and complaints. Complaints involving patients with a LD are continuously monitored to make changes so that the episode of care is the best it can be for the patient. Patients with A LD are involved in training at HWPH and this is planned to be rolled out at FPH on a regular basis. Patients with LD and their carers were involved in the recent LD Champions training.		
11.	Standard 2d Trusts must demonstrate that they learn from complaints, investigations and mortality reviews, and that they engage with and involve people, families and carers throughout these processes.	Recommendations from LeDer reviews, SI's, complaints and investigations are put in to an action plan and monitored via the governance processes in place. Under duty of Candor families, friends and carers are involved in discussions in order to maximise learning.	Recommendations from LeDer reviews, SI's, complaints and investigations are put in to an action plan and monitored via the governance processes in place. Under duty of Candor families, friends and carers are involved in discussions in order to maximise learning	TRUSTWIDE This is in line with the Trust's current Serious Incident policy and M&M process and liaising with the LD nurse where required to support a patient and family.	Completed

12.	Standard 2 e Trusts must be able to demonstrate they empower people with learning disabilities, autism or both and their families and carers to exercise their rights.	Staff are aware that people with LD and their families and carers need to be empowered to exercise their rights as long as it is the patients best interest. This is discussed in training	Staff are aware that people with LD and their families and carers need to be empowered to exercise their rights as long as it is the patients best interest. This is discussed in training	TRUSTWIDE Need to explore designated LD training specifically for induction and 3 yearly updates	June 2019
13.	Standard 3c Trusts must have workforce plans that manage and mitigate the impact of the growing, cross-system shortage of qualified practitioners with a professional specialism in learning disabilities.	Discussions are taking place with commissioners in Berkshire re future workforce and impact on Trust	Discussions are taking place with commissioners via the LD Steering Group for Surrey	TRUSTWIDE Work in partnership with the mental health trusts to support new, emerging roles such as advanced practitioners, apprenticeships, consultant allied health professionals and nurses, clinical academic roles and non-medical prescribers, and employing experts by experience/peer workers	April 2019
14.	Standard 3d Trusts must demonstrate clinical and practice leadership and consideration of the needs of people with learning disabilities, autism or both, within local strategies to ensure safe	Executive Lead is the Director of Nursing and Quality. The delegated responsibility is with the Adult Safeguarding Lead.	Executive Lead is the Director of Nursing and Quality. The delegated responsibility is with the Adult Safeguarding Lead. The SG lead at Frimley Park Hospital works with the LD Lead at SABPT to complete appraisals, supervision and support	The commissioners have agreed funding for the LD Liaison nurse for WPH. Once appointed for LD Service will be aligned across FHFT. Processes will need to be put in to place for appraisals, supervision	June 2019