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| Item No. | Classification : Open | Date: 23 January 2012 | Meeting Name: Scrutiny Committee |
| Report title: | | Transition planning for young disabled people and supporting ageing adults with complex disabilities | |

INTRODUCTION AND DISCUSSION FOR SCRUTINY COMMITTEE

1. The council is transforming services for adults with learning disabilities in line with the vision for adult social care and national policy. The purpose of adult social care is shifting from the historic role as provider of care and activities to a facilitative role that supports every disabled adult to live, work, learn and socialise like their non-disabled peers, accessing mainstream accommodation, leisure, education and paid employment, and supporting adults with learning disabilities and their carers to maintain their independence and wellbeing in their own homes. This means phasing out institutional, building-based nursing, residential and day centre services, and developing a greater range of community services which offer choice, control, and self directed support.
2. Whilst transforming services to improve outcomes for people the council is faced with a significant reduction in funding from central government. At the same time, the number of people born with or diagnosed with a learning disability is increasing, and people are surviving longer with more profound and multiple disabilities due to advances in health care. This means that a growing number of service users with learning disabilities transfer from children's to adult health and community services every year with substantial support needs. In addition, the number of adults with learning disabilities outliving their parents continues to rise, due to better healthcare and prevention of illness.
3. The transformation of services for adults with learning disabilities involves four key programmes of work, including:
 - establishing a 'Teen Team' to undertake person-centred transition planning for 14-25 year olds;
 - redesign of day opportunities services – shifting away from traditional building based day care to a greater range of community services which promote social inclusion and paid employment;
 - accommodation - helping people with learning disabilities to have their own homes and tenancies; and
 - developing open access services that are self sustaining and which enable people with eligible and non-eligible support needs to live independently in their own homes, reducing isolation and accessing the community.
4. These projects are each at different stages of implementation, with the work on accommodation significantly progressed with several local care homes deregistered and a greater proportion of people with learning disabilities now living in supported accommodation with their own tenancies. The 'Teen Team' will be

launched in April 2012, and young people are already offered a personal budget and help with planning community support as they turn 18. The three month consultation on LD Day Opportunities is due to begin in February.

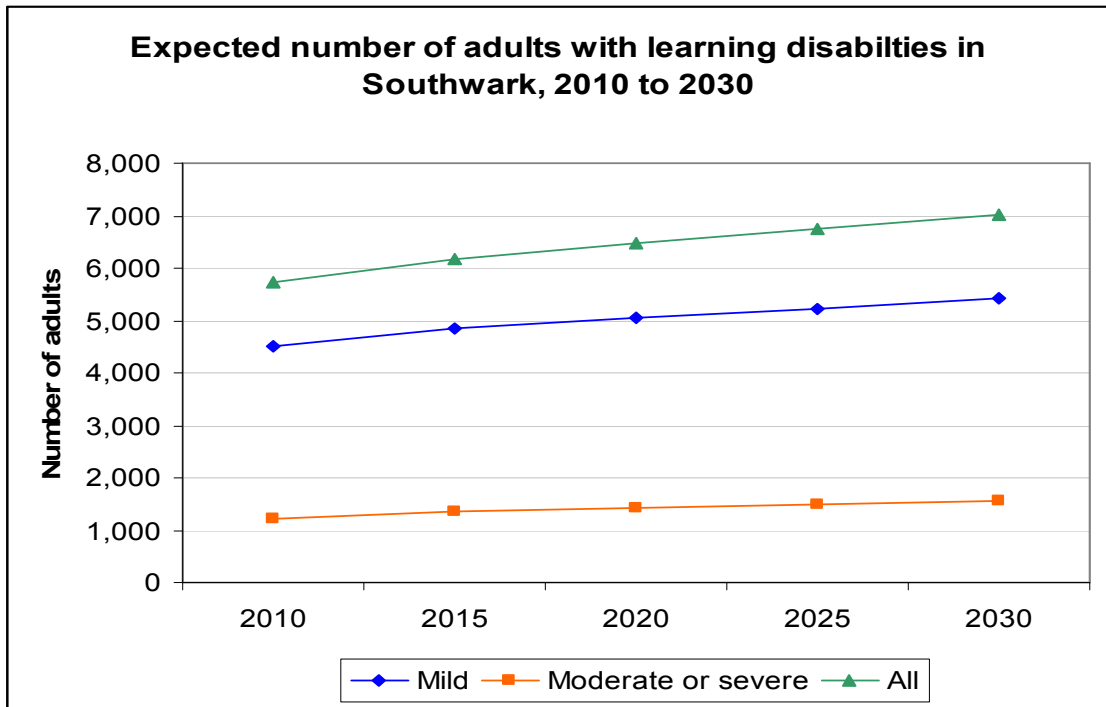
5. A principle underpinning the projects concerns how the council can offer person-centred services that promote social inclusion by helping people to access mainstream education, housing, leisure, and paid employment. This will be a critical theme within the consultation and engagement process with service users, carers, providers and other stakeholders. To strengthen this process, the council is keen to understand from the scrutiny committee how it thinks the council can adopt a whole council approach to improving social inclusion for adults with learning disabilities and to the development of true community based services and supports. This can then be used to inform future recommendations to Cabinet.
6. This paper is designed to provide background information on the context in which the learning disabilities service transformation is being considered. It highlights the process and work to develop proposals for the future of LD day opportunities services, as these services are strategically critical to achieving better outcomes particularly for young disabled people in transition from children's services to adulthood, whilst these services are also subject to an unprecedented level of savings.

BACKGROUND INFORMATION

Demographics – learning disability population

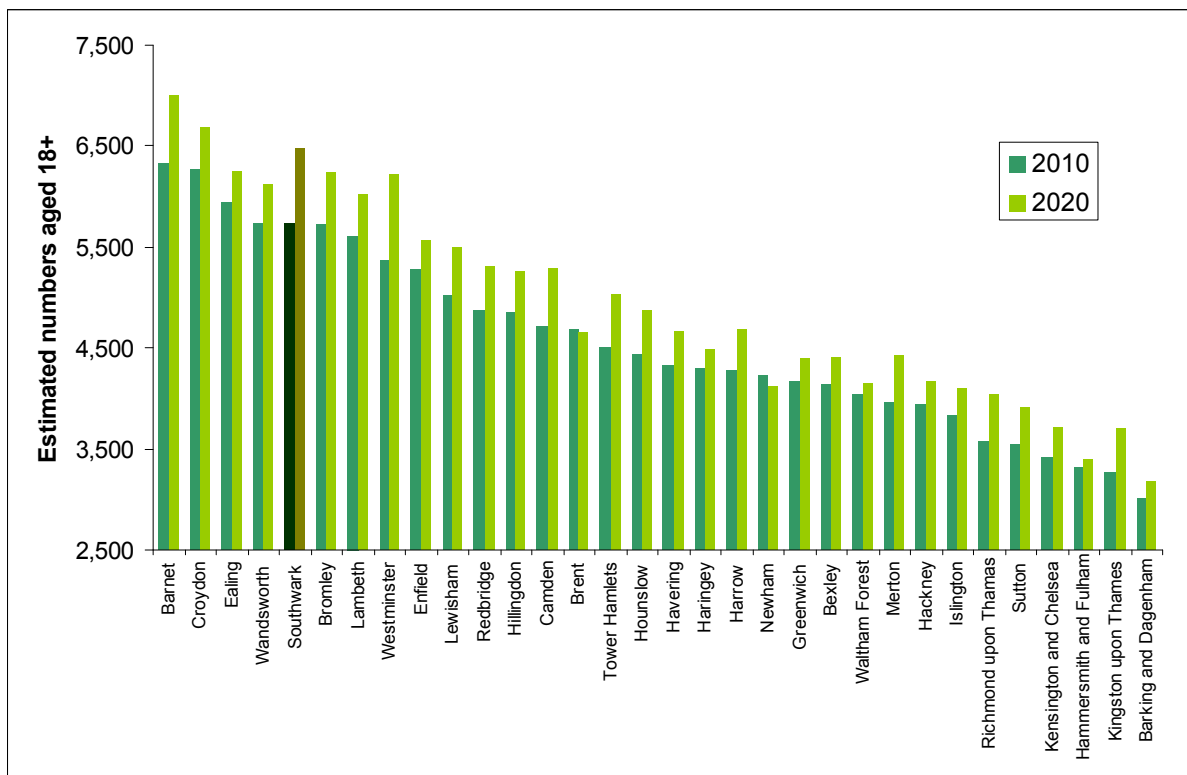
7. The trend is of an increasing population of people with learning disabilities, nationally, and in Southwark. Advances in medicine mean that more babies survive trauma and fewer succumb to acute illnesses or long term conditions. This means the population grows year on year, with more children transferring to adult services at 18 years with complex and multiple disabilities. Figure 1 shows the expected rise in the number of adults with learning disabilities in Southwark over the next 20 years, and figure 2 gives an estimate of the learning disabled population by Borough over the same period.
8. There are about 5,740 people with learning disabilities in Southwark, of whom about 1230 (21%) have moderate or severe learning disabilities. The number of people in the borough with learning disabilities is projected to increase by 22% to 7000 by 2030. Recent data suggests that there are 599 people with learning disabilities known to social services and 623 people on primary care learning disabilities registers. There are an estimated 495 people with moderate or severe learning disabilities aged 18-64 living with one or more parents in Southwark. This is expected to rise by 13% to 559 in 2020.

Figure 1:



Source: PANSI 2011

Figure 2: Estimated number of adults with learning disabilities by borough, 2010 and 2020



9. People with learning disabilities receiving social care services are likely to be people who have a moderate or severe learning disability. During 2010/11 there were 599 adults with learning disabilities receiving services provided or commissioned by Southwark adult social care.
10. Recent work has indicated that nearly a third (31%) of people with learning disabilities known to services have additional needs as well as learning disabilities. These may include physical disabilities, dementia or other health conditions. Co-ordination across agencies (including information sharing), person-centred care and support for carers are particularly important when people have complex needs.
11. Just under 10% of adults with learning disabilities known to Southwark services also have a diagnosis of autism. This is normally diagnosed in childhood and underlines the importance of effective processes for the transition from children's to adult services.
12. Some people with learning disabilities are identified by services as having challenging behaviour. This can take a number of different forms and can stem from a variety of causes including the way in which people are supported by services. Southwark has reviewed its approach to challenging behaviour including the adoption of a more person-centred approach as a key part of its strategy.
13. The proportion of people with learning disabilities known to services who are aged 65 years and over is 7.5%, which compares with 10.2% in Southwark's overall population. However more people with learning disabilities are living into older age groups, with a projected 40% increase in the borough by 2030.
14. The ethnic group profile of people with learning disabilities known to services is broadly comparable to the profile of Southwark's overall population.
15. Southwark will see a large increase in the number of people with learning disability at a time when public sector spending is being curtailed. There must be clear priorities, realistic expectations and creative solutions while pursuing the personalisation agenda.
16. A clear priority is to address the needs of young disabled adults making the transition from children's to adults services, to meet need in a sustainable way, without engaging people in traditional and high cost services.
17. Further along the age spectrum, the priority is to identify and support adults with learning disabilities living at home with ageing parents, to plan support after family carers die.

Financial context for learning disability services

18. Adult social care represents around one third of the council's total budget. The Council's three year savings plan means almost £34 million is being removed in 2011/12.

19. Learning disabilities represents £42m expenditure of the total £140m annual expenditure in health and adult social care. The three year savings plan for learning disabilities is set out below with a target of £4.6m to be taken out of the budget in total, which represents a reduction of around one third of the budget for people with learning disabilities. The 2011/12 savings have been achieved.

| | 2011/12 | 2012/13 | 2013/14 | Total |
|------------------|----------------|------------------|------------------|------------------|
| Transitions | 95,000 | 150,000 | 68,000 | 313,000 |
| LD Day Services | - | 1,000,000 | 1,700,000 | 2,700,000 |
| Residential care | 700,000 | 300,000 | 606,000 | 1,606,000 |
| Total | 795,000 | 1,450,000 | 2,374,000 | 4,619,000 |

20. Notwithstanding the duty to deliver better outcomes for people, the quantum of savings requires radical change to the model of learning disability services. The implementation of personal budgets means all individuals are assessed via an Outcome Based Assessment and given an indicative budget, creating transparency about the resource allocated to each person so that service users and families can make choices and plan support.
21. Planning transition earlier with young people (aged 14-18) and their parents, and agreeing support plans in consultation with older carers so that there is support for their learning disabled son or daughter when they die, will be key to helping people make the most of their personal budget. Ending block contracted residential and day services with providers and stimulating the development of the market so that there is a wide range of local providers available to respond to diverse need, means that service users and carers will have real choice and control over how they choose to spend their personal budget, and money will not be tied up with building based services.
22. It is in the context of this overall vision and current financial position that the transformation projects for learning disabilities in the borough are taking place.

The vision for adult social care in Southwark

23. The strategic direction for learning disability services is based on a developing a new relationship between the Local Authority and learning disabled service users and their family carers, moving from a model of dependency to one where disabled people are seen as people who can contribute and exercise control over their lives, improving their own health and wellbeing.
24. The implementation taking place involves a new offer, which consists of:
- enabling people to live as independently as possible in their own home
 - supporting people to work (or pursue a meaningful occupation), learn, follow their interests and maintain their social relationships in the same places and at the same times as the rest of the community.
25. There will be a need for clarity and honesty about this offer. It will be no more than it states and support will be focused on reducing dependence on social care rather

than fostering a lifetime of isolation in an expensive 'parallel world' of residential and day care, which offers no entry into the mainstream community. The job of social workers will be to reduce or minimise people's dependence on social care intervention rather than intensifying it. An important part of this will be to manage the expectations of young people (and their families) as they make the transition from children's to adult's services.

26. This will involve a whole local authority approach where the first assumption is that people with learning disabilities will make use of and be welcomed into the universal services and activities – including housing, adult learning, leisure, health, community development, social networks and employment. The job of social care will be to provide the support around a person's disability that enables them to be part of the wider world, rather than creating and funding a separate world.

TRANSITION FOR YOUNG PEOPLE WITH LEARNING DISABILITIES – CONTEXT AND FUTURE DIRECTION

27. The Director of Children's Services and the Director of Health and Community Services recently approved the proposal to establish a 'Teen Team', bringing together social workers from children's and adult services to work with people aged 14-25 years with a learning disabilities. The team proposal was based on financial benefits and improved outcomes and life chances for young disabled people going through transition from childhood to adulthood. The purpose of the Teen Team will be to re-shape the current offer to young people in Southwark and introduce whole life planning to seek creative ways of reducing long term costs. This will involve the Teen Team engaging with young people and families in life planning following year 9 reviews.
28. Crucial to the ongoing success of the LD transformation programme will be young people moving through transitions and into work and wider community lives. The Teen Team will lead in delivering radical change through encouraging young people to develop independence through innovative ways of supporting them. In doing so this will in turn reduce the reliance on the Council. The default expectation will be that young people and families will have a personal budget prior to turning 18, and that they will take responsibility for managing the budget and self directing their support.
29. Currently within the Children's Disabilities Service there are 18 young people aged 14 years and above that receive a package of support ranging from residential, direct payments, or other care package which are in excess of £20,000. The total cost of this is £1,546,811.80. There is a savings target for the Teen Team which is £95,000 in 2011/12 and this has already been met due to the changes in practice taking place.
30. The following outlines the number of children and young people who have been referred to the adult health and social care Transition Panel:
 - 2008 53 individuals, 6 of which only required signposting.
 - 2009 41 individuals, 2 of which only required signposting

- 2010 46 individuals, 4 of which only required signposting
31. From November 2010 to July 2011 there were approximately 140 pupils highlighted by the SEN Team who entered year 9 transition, 49 of whom are likely to be referred to the Transition Panel. 32 are on the Children's Disability Register. The remaining 17 are young people at special school provision who are not on the Children with Disability Register and are likely to be referred.
 32. Education costs: Out of the 18 young people mentioned above, 16 attend local maintained special schools whether in or out of borough. These are places that would be in the severe learning range so costs would range from £25,000 to £32,000 approximately per annum.
 33. The 2 pupils that are placed outside of the above, 1 is joint funded and attends a 52 week residential provision. The other SEN has agreed as part of the personalisation agenda a personal budget prior to transfer into adult services, the costs are as follows:
 - Pupil in 52 week residential education costs are £94,198
 - Pupil on individual programme and budget education costs are £81,798
 - The estimated spend to SEN placing young people in the independent sector for 2010/2011 financial year equates to £2,908,042.
 - Out of the 81 pupils at least 34 will be referred to Transition Panel and will require services in the future. SEN leads in this area.

AIMS OF THE TEEN TEAM

34. The aims of the teen team to be implemented with children's and adults social workers in April 2012 are as follows, and the outcomes are listed in appendix A.
 - To provide a transition service that provides one point of contact and supports young people and their families from ages 14-25 into adulthood;
 - To be a multi-agency team that all work together, use the same systems and streamline the paperwork and bureaucracy;
 - To make the young person and their parents/carers central to the process and avoid duplication of work and roles by all using the same working practice;
 - To actively involve, inform and support the young person and parents/carers in the transition planning process;
 - To assess each young person holistically and share information and assessments across organisational boundaries;
 - To identify eligibility for NHS continuing care funding at 14 years of age;
 - To allocate a lead professional for each young person;

- To devise a transition plan and oversee, monitor and review this plan;
- To complete any assessments, reports and funding applications required within deadlines and to quality standards;
- To decide, and ensure implementation of, continuing support required by the young person up to age 25;
- To work in close partnership with key partners such as schools, Children & Young People's Trust, adult services, specialist health services and service providers;
- To ensure that the young person's needs are met in the most cost effective way within the legislative framework;
- Ensure early identification of high costs placements currently placed in Children's Services and work to reduce costs as early as possible to achieve best value;
- To manage within budgets allocated;
- To inform for planning and budget commitments in Adult Services and support achievement of any identified savings targets;
- The S139A assessment by the LDD Connexions Advisor is key in identifying those young people seeking placement in high cost specialist provision;
- The Connexions Advisor will have close links with local Further Education Colleges and have an up to date understanding of the provision available;
- Provide support to young people, their families, schools and professionals and distribute transition guidance, this will require updating as legislation changes;
- The Teen Team will have responsibility for liaising with transition leads that already exist in Health (learning disabilities) for: speech and language therapy, occupational therapy, nursing, physiotherapy and audiology;
- The Teen Team will need to consider the important input that these teams would have, as well as input from: Connexions, Education, and Children's Specialist Health Services etc;
- The Health Team in adult services will have the responsibility for drawing up the Health Action Plan to ensure that there is continuity of services and access to ensure that young people stay healthy and do not 'fall between' services;
- To ensure that individual cases and provision are reviewed and monitored on a regular basis including evaluating outcomes for individuals in transition from 18 to 25; and

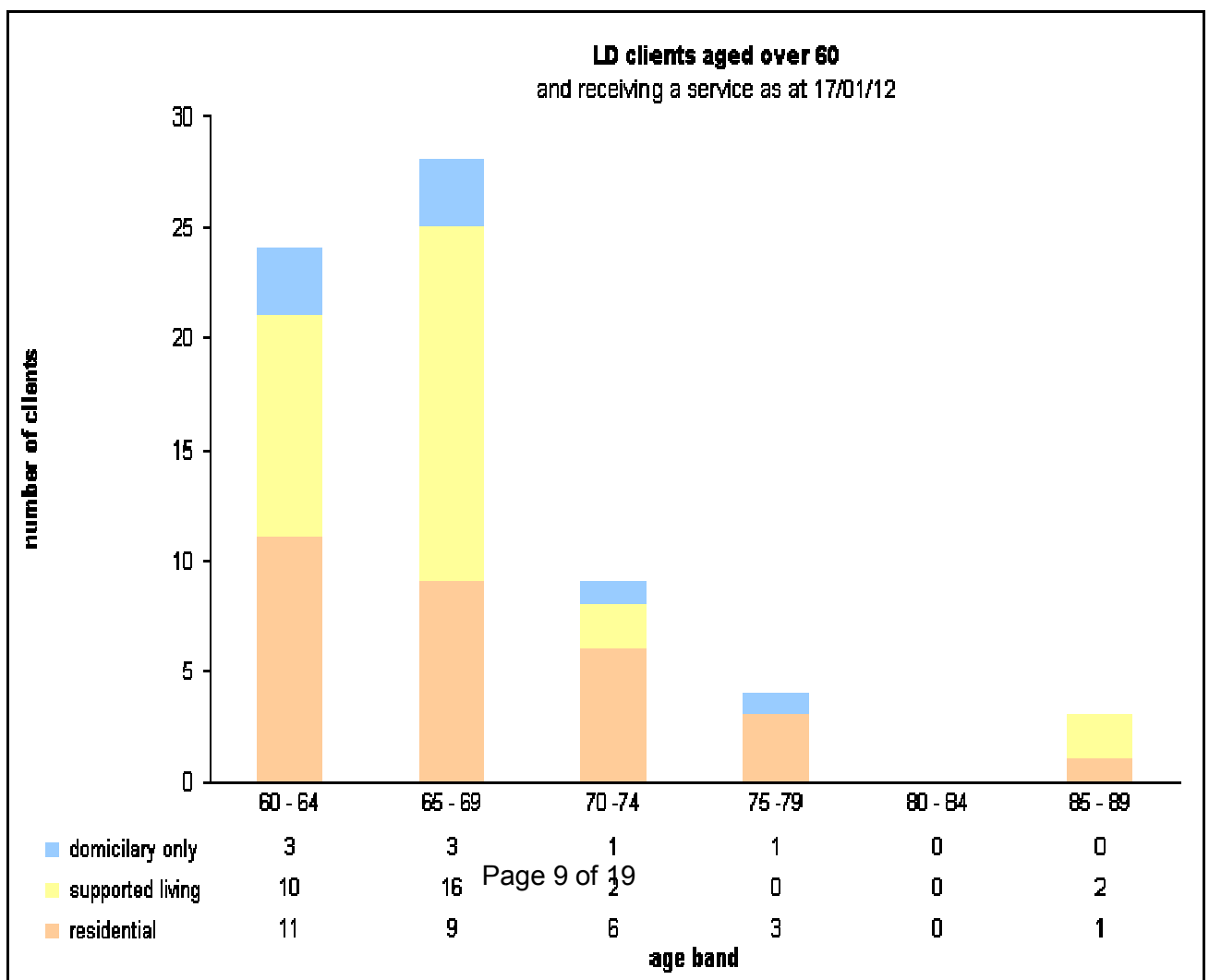
- To oversee that the young person has a transition plan that includes 'whole life' planning and creative ways of meeting long term needs.

ADULTS WITH LEARNING DISABILITIES AND AGEING NEEDS AND OLDER CARERS

35. As of January 2012, there are 68 people with learning disability over 60 years old who are receiving social care services. The breakdown in relation to age-band is below:

| age band | total |
|----------|-------|
| 60 - 64 | 24 |
| 65 - 69 | 28 |
| 70 -74 | 9 |
| 75 -79 | 4 |
| 80 - 84 | 0 |
| 85 - 89 | 3 |
| | 68 |

36. Of the total number of 60+ years service users, only 7 people receive some form of day care. This figure does not include people whose needs do not meet current eligibility criteria but who may make use of some of the open access services and lunch clubs for which council funding has been available. The breakdown in the type of services that people aged 60+ are receiving is highlighted below:



37. Southwark has a Dementia Care Pathway, which is a protocol agreed by adult social care with health professionals from Guys and St Thomas' Trust learning disability services and SLAM (see Appendix C). This is in line with national good practice produced by the National Institute for Clinical Excellence. National statistics show that people with learning disability who do not have Down's Syndrome are 4 times as likely to have a diagnosis of dementia than the general population. For people with Down's Syndrome the prevalence rate is even higher, with 10 in every 100 people age 40+ having dementia. This figure rises to 36 in every 100 age 50+ and as high as 50-65 in 100 over 60+ years.
38. In Southwark there are currently 15 people with learning disabilities between the ages of 41-64 who are on the dementia pathway. Within the multi-disciplinary team, a care co-ordinator is agreed and acts as the named point of contact for the person and the professionals involved in their care.
39. Health conditions normally associated with the general older population are common in younger adults (ie under 60 years old) with learning disabilities, for example sensory impairments, visual impairment, hearing loss, physical frailty, mobility problems. The multi-disciplinary nursing and therapy team, who are part of the joint learning disability community team work closely with social care providers and GPs to offer training and clinical support to recognise deterioration in health conditions and the necessary intervention required.
40. Due to the fact that complex physical health problems are more common for adults with learning disability than in the general population, there are not specific care providers for the older LD population. There are some providers in Southwark that are seen to have a more skilled approach to support for those with complex needs.
41. One of the local care homes that does cater for older adults with LD who have dementia and physical frailty is Gaywood Street, a 5 bedded residential home, managed by PLUS. This service has evolved in response to a growing need for expertise and skilled support for adults with LD who have dementia. Currently there are older adults living at Gaywood Street, with close input from the MDT and social work team to monitor and provide clinical intervention.

THE FUTURE – SUMMARY OF KEY CONSIDERATIONS

42. The key focus is on offering personalised support for people so that they can maintain or regain their independence, linked to effective transition planning for young people.
43. Services will focus on supporting people to achieve specific outcomes, particularly around independent living, employment opportunities and access to education and leisure. Integrated working with health is essential to maintaining health and wellbeing, managing physical and sensory disabilities and long term conditions, including supporting adults with LD and dementia. It will be vital to address the respite needs of family carers to enable them to sustain people with LD remaining in family homes, with options for people to move out and live alone or with peers

who have similar needs.

44. The future landscape will need to comprise a broader range of services with less focus on traditional models of in-house or externally commissioned day centre care. User-led organisations and the voluntary sector also have a key role to play in supporting an effective and varied model of provision for the borough, making more of the opportunities around outreach and community support. Accessing mainstream services that support people to connect with their local communities is an important element.

RE-SHAPING LEARNING DISABILITY DAY SERVICES – PROPOSALS AND PROCESS FOR ENGAGEMENT

45. As outlined previously the council's approach to re-shaping LD day services is considered within the context of wider service transformation across adult social care and the financial position of the council over the next few years. It is also aligned with the suggested approach to other day services, considering fewer buildings-based services and a focus on people coming together to access support in one place, as well as outreach and people using creative ways of meeting their assessed needs within available resources. The focus is on supporting a more self-sustaining set of open access services that can deliver the council's vision for personalisation and promoting health, wellbeing and independence for people at risk of needing adult social care support.
46. The implementation of the redesign of LD day services will take place via a phased approach over the next two years, with a focus in 2012/13 on adults in residential care and supported living, and young adults coming through transition.
47. The National Development Team for Inclusion¹ have been engaged to support the LD day opportunities review, to support the council to understand and integrate best practice in the 'vision for day support/services'.
48. The NDTi have been working with health and social care managers and providers to agree a vision for LD day support that will be consulted upon over three months from February. The vision statement will reflect the core belief that people should, where possible, be accessing the community. It is not about how each person will spend their day, it is about the overall structure and will include individual

¹ The National Development Team for Inclusion (NDTi, www.ndti.org.uk) is a not for profit organisation¹ concerned with promoting inclusion and equality for people who are at risk of exclusion and who need support to lead a full life. We have a particular interest in issues around age, disability and health. Our roots are in the learning disability field and 40% of our work continues to be in that sector. In undertaking our work, we particularly aim to:

- Shape and influence policy and public debate
- Enable a stronger voice of people to be heard
- Support services to work differently so that they promote inclusive lives
- Support communities to be welcoming and inclusive.

planning, funding methods and developing the market. This will also include the identification of some guiding targets for example that the percentage of people in employment matches the wider percentage of disabled people in employment and that young people move through transitions into ordinary patterns of life.

49. The purpose of the NDTi work with the council is to:-

- Support the development of a day services strategy and delivery plan
- Support consultation with people using services and families
- Provide best practice information to elected officers
- Build a shared understanding of better/best practice
- Support the development of a range of day services choices (the market place) to include existing and new providers
- Support the implementation of the strategy and delivery plan
- Support transitions from education to community based day services (this has been added by the NDTi on reflection of local issues)

50. The key concern for service users, family carers, and providers engaged in the consultation process will be about cuts and anxiety about losing current services. We cannot deny that cuts will mean a reduction in some services. However, from our work locally and from best practice examples elsewhere cited by NDTi, we know of practical examples of austerity with integrity, for example:

- where an investment in supported employment (as opposed to day care activities) delivers long term individual support savings,
- where supporting people/families to do some shared interest pooling of personal budgets means people can make more efficient use of the money available,
- an expectation that all services will make greater use of planned 'natural supports' (the integrity bit here being the goal of greater community participation/engagement).
- outcomes based commissioning for which providers will be rewarded, with ongoing work, for delivering key objectives of more individual independence.

51. Initial feedback from engagement with health and social care front line staff and providers is that we need to do much more to make education, employment, and leisure accessible. For example, a lack of equipment in leisure and library facilities and a lack of skilled customer support prevents people from accessing sports and leisure and information. This is a theme that the scrutiny committee may be interested in exploring.

52. Another strategic priority is the need to stimulate market development. The LD innovation fund enables local groups to bid for money to support providers to

develop new business models to facilitate the introduction of self directed support to people with learning disabilities in Southwark, and to enable service users to have more choice and control over how they live their lives and participate in community life. The innovation fund is a one off opportunity available for 2011/12 and the funding will be awarded in March 2012. It is hoped this fund will attract new providers as well as facilitate existing providers to change.

53. The formal consultation process will be an opportunity to understand what service users and family carers think about LD services and the future direction, and the following questions are likely to be central to our conversations:-
- What about day services do you like?
 - What about day services should we change?
 - We think that day services in Southwark should focus on friendship & community, jobs, educations and social and leisure activities. Is this right?
 - We would like people to have more say in choosing their day services, including using personal budgets, Is there anything that we can do to give you more control of day services?
54. The outcome of the consultation and engagement process will help to inform future recommendations to cabinet. In the meantime the committee may wish to bear in mind that although wider population awareness and national policy may be improving, people with LD are still subjected to hate crime, lower access to some services and low employment levels. Work will need to continue to ensure that equity is achieved and discrimination opposed and this requires a whole system approach where all council departments and community resources provide accessible services and seek to overcome the barriers to true social inclusion.

APPENDICES

| No. | Title |
|------------|--|
| Appendix A | EXPECTED OUTCOMES: TEEN TEAM FOR INDIVIDUALS IN TRANSITION |
| Appendix B | LD DEMENTIA CARE PATHWAY |

Appendix A

EXPECTED OUTCOMES: TEEN TEAM FOR INDIVIDUALS IN TRANSITION

The National Transition Support Programme's report *TransMap: From theory into practice* (2009) identifies a number of underlying principles that, when applied can lead to a high quality service for young people in transition:

Comprehensive multi-agency engagement:

The Teen Team will ensure effective multi-agency engagement, which is a key way to ensure a smooth transition for young people with disabilities. The transition pathway outlined in the *Good Practice Guides for Young People and Families in Southwark* gives a clear and accessible format to raise awareness of who is responsible for supporting the person at each stage of transition, and to enable them to hold professionals accountable for delivering the service. The Teen Team will be co-located and will also be part of a virtual team, with wider links to Health, Education, Housing, Employment and Leisure. Key workers or lead professionals play an important part in coordinating the transition planning for young people and staff in the Teen Team will take on the role of key worker or lead professional for individuals going through transition.

The full participation of young people and their families

The Teen Team will involve young people and their families from the start of the development of comprehensive transition plan. Advice will be sought from children's services about the most effective ways that Southwark can engage with parents early in a child's life to ensure that they develop skills to work in partnership with professionals, who in turn support them to develop the skills that they need to advocate on behalf of their child. It will be for the Teen Team to lead on discussions with young people and their families after Year 9 Transition Reviews about the principles of self directed support and developing the skills of the young person to lead an independent and fulfilling life.

The provision of high quality information

Southwark has an *Information Guide on Transition for Young People and Families* that is aimed at empowering both young people and their parents throughout the transition process. This gives information about what can be expected from the transition process and it is hoped that through the guides young people are enabled to participate more effectively in the process. The Teen Team would bridge this gap, providing accessible information tailored to the individual and their families. The Teen Team will have a role in signposting young people not eligible for social care support to tap into open access services. Invaluable support and information on options for education, training and employment opportunities, as well as for social and recreational opportunities can be passed on to young people not eligible for adult services.

Effective transition planning.

The expectation is that the Teen Team would be involved in person-centred approaches to transition planning and close liaison with schools, who would have the lead in this area. There is a drive towards person centred planning in Southwark, placing the young person is at the centre of the process, with plans that are made based on the needs and aspirations of the young person. A multi-agency approach to transition supports person-centred approaches, as it means that all professionals are

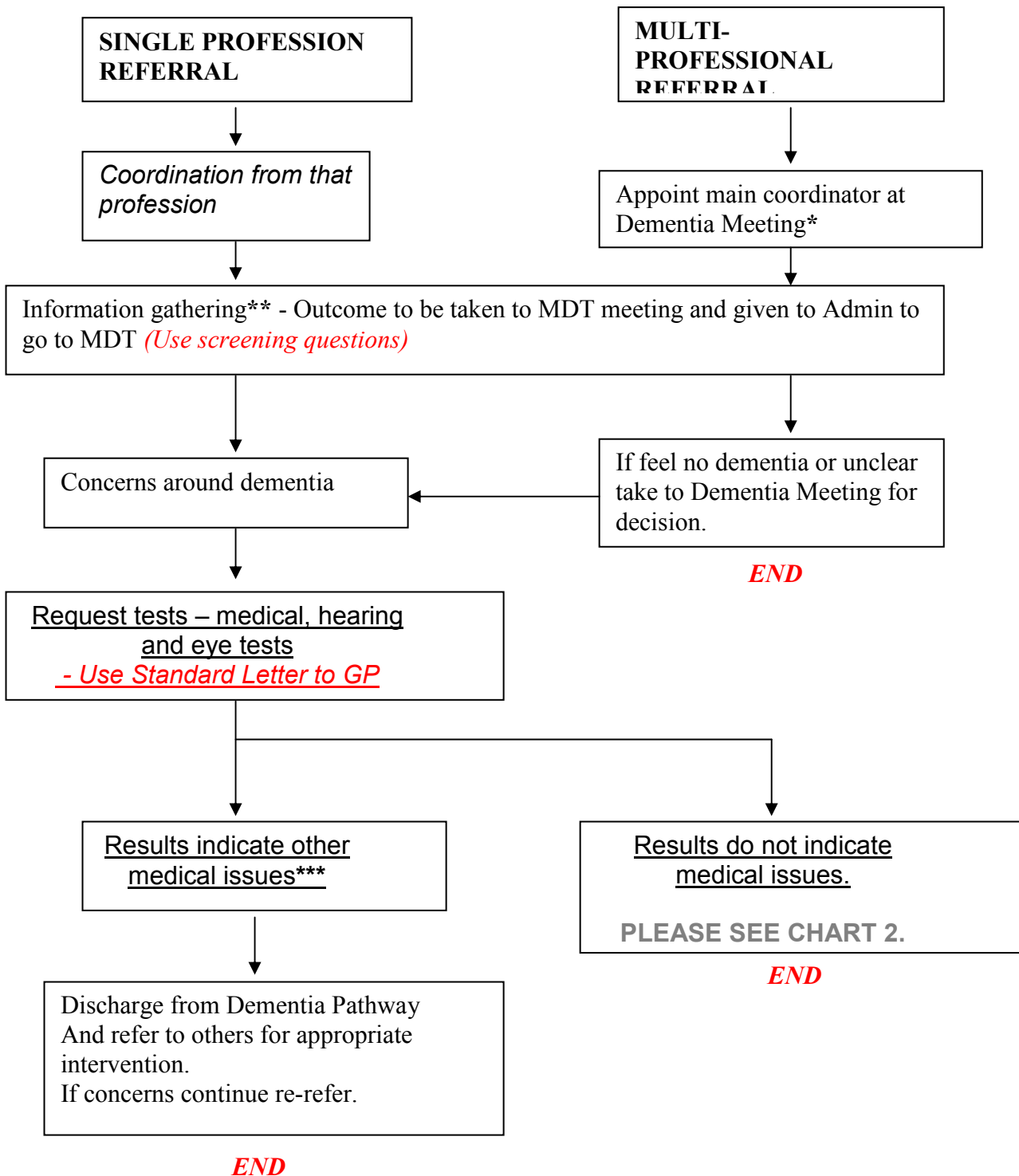
working together to support the young person. Schools have a duty to ensure that in Year 9 young people with a statement of special educational needs have a transition review. This review gives the young person and their family the opportunity to think about and plan for their future, with the support of professionals. The transition plan should be reviewed at least annually, and should be a live document. It should also be presented in a format that is accessible to the young person and their family. The aim of the Teen Team will be to advise and input to ensure high quality transition plans are produced that reflect the voice of the individual and their wishes for their future.

An array of opportunities for living life.

It is recognised locally and nationally that young people with disabilities must have the chance to live a fulfilled life, with the same opportunities offered to them as their non-disabled peers. In Southwark there is further work to do in ensuring that there are a range of opportunities for young people to access, including opportunities in education, employment, youth and leisure services, and this is the central theme of the LD Day Opportunities redesign. Personalised approaches, as mentioned above enable young people to have an individualised plan that takes into account all of these areas and the Teen Team will lead in developing Transition Plans that make these aspirations a reality. The Teen Team will play a key role in implementing the redesign of day opportunities services, by supporting young people to move through transitions into a range of day opportunities. There is a programme of work well-underway in Adult Social Care to encourage vulnerable people to be supported to take control of what they do, through the use of self-directed support and personal budgets.

APPENDIX C

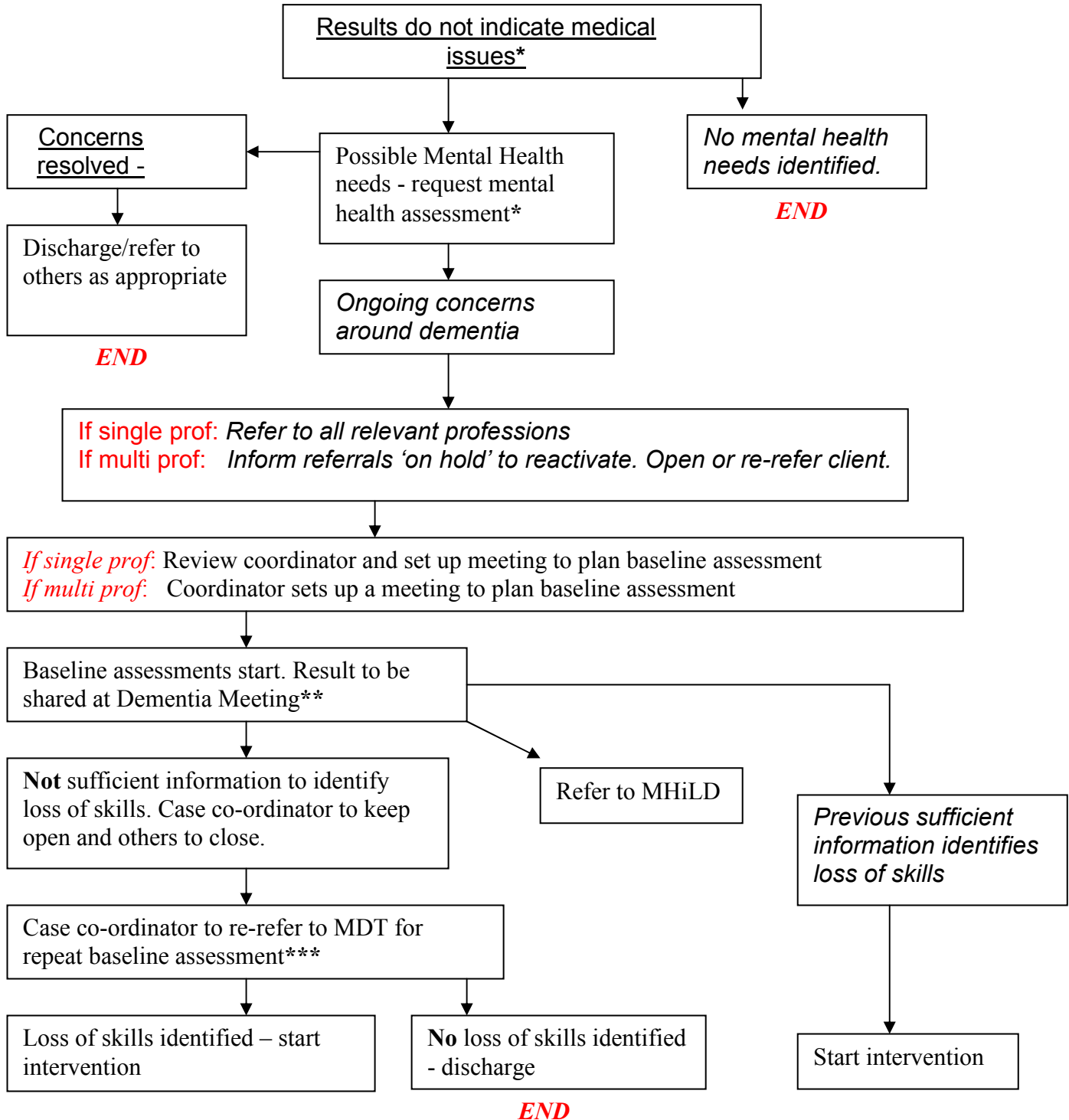
Down's Syndrome and Dementia Screening Pathway – Chart 1



* Best practice 4 weeks.
 ** Best practice 6 weeks from date of referral for SouthwarkPCT. 4 weeks for SLAM.
 *** Best practice 6-8 weeks from date of GP referral

PILOT

Down's Syndrome and Dementia Screening Pathway – Chart 2



- * If referral from MHiLD team originally, go to *Ongoing concerns around dementia*.
- ** Best practice within 2 weeks after coordination meeting
- *** Best practice 6 months from previous assessment