### RED RISKs

<table>
<thead>
<tr>
<th>Ref</th>
<th>Current Ratings</th>
<th>Areas for improvement</th>
<th>Desired outcomes/ Improvement measures to achieve Green</th>
<th>Proposed Action</th>
<th>Suggested Lead Agency</th>
<th>Target Date</th>
<th>Comments</th>
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</table>
| Staying Health A1 | Red | LD QOF Register in Primary Care are accurate and                   | • Ensure LD QOF Register and Down Syndrome are checked annually  
• Ensure health data is stratified, analysed against prevalence data and included in Sutton JSNA.  
• Complete report | Commissioned work via Public Health, Primary Care LD Lead GP and LD Community Nursing team &  
LD Link Nurses to support GPs to deliver on the actions | Sutton CCG/ Primary Care Commissioning, Public Health LD Community Nursing Team LB Sutton | End of Sept 2015 |
<table>
<thead>
<tr>
<th>Staying Healthy</th>
<th>Screening: People with LD are accessing disease prevention, health screening and health promotion in each of the following areas: Obesity, Diabetes, Cardio Vascular Disease and Epilepsy</th>
<th>Comparative data in all of the identified health areas are in place.</th>
<th>• Include as part of works in A1 as above</th>
<th>As in A1 above</th>
<th>End of Sept 2015</th>
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<tbody>
<tr>
<td>Staying Healthy</td>
<td>People with LD are accessing disease prevention health screening and health promotion as the general population.</td>
<td>• To request Data from individual GP practices or conduct an audit report (to include as part of work in A1 as above)</td>
<td>As in A1 above</td>
<td>End of Sept 2015</td>
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<tr>
<td>Staying Healthy</td>
<td>Screening</td>
<td>Sutton CCG/ Primary Care Commissioning, Public Health LD Community Nursing Team – LB Sutton</td>
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<tr>
<td>A2</td>
<td>• To identify what additional support and reasonable adjustment are needed to ensure any identified gaps on equal access to Health promotion, Health Screening (Diabetes, Cardiovascular Disease and Epilepsy) are rectified (to include as part of work in A1 as above)</td>
<td>End of Sept 2015</td>
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<tr>
<td>A5</td>
<td>• Integrate with action in A1 &amp; A2 as above</td>
<td>Sutton CCG/ Primary Care Commissioning, Public Health LD Community Nursing Team – LB Sutton</td>
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**Screening**
Comparative data of people with learning disability vs. similar age cohort of non-learning disabled population in each health screening area for:

- Cervical Numbers of completed health screening for eligible people who have a learning disability in every screening group; And Comparative data of screening rates in the non LD
| A6   | Primary care communication of LD status to other healthcare providers | To complete and implement the action on the work in progress on the GP Referral Management System for LD in mainstream health services. (Hospital and other health providers) | Work is in progress, to follow up with GP Lead and Community Nursing Team Sutton CCG Commissioners | End of July 2015 | All GP health referrals include the LD Status and reasonable adjustment necessary for people with LD. Secondary care and other |
healthcare providers can evidence that they have a system for identifying LD status on referrals based upon the LD identification in primary care.

And

Acting on any reasonable adjustments suggested.

And

There is evidence that both an individual's
### Clinical Commissioning Group

**A9**

**Offender Health & the Criminal Justice System**

- To establish a system for capturing data with regular monitoring and reporting taking place.

  *This work is now integrated in Work stream 7: CJS Autism Strategy.*

  - To carry out benchmark exercise in Offender Health and CJS on what reasonable adjustments are in place and

  - Task and Finish Group set up and need to follow up with a set time frame

  Safer Sutton Partnership
  And
  Local commissioners?

  End of Sept 2015

  Local Commissioners have good data about the numbers/prevalence of people with a learning disability in the CJS.

- Prisoners and young offenders with LD have had an annual health check, or are scheduled to...
<table>
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<tr>
<th>B3</th>
<th>Assurance of Monitor Compliance</th>
<th>See Action Plan from</th>
<th>Establish governance arrangement and include as part of regular contract</th>
<th>Mainstream Health Commissioners</th>
<th>End of Sept 2015</th>
<th>Commission Review Monitor</th>
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where appropriate, develop plan for service improvement

- To establish a system to capture this data and ensure Prisoners and Young Offenders with LD have AHC and HAP

Task and Finish Group set up and need to follow up with a set time frame

Safer Sutton Partnership And Local commissioners?

end of Sept 2015

have one within 6 months (either as part of custodial sentence or following release, as part of GP health check cycle). They are offered a Health Action Plan.
Framework for Foundation Trusts
Supporting organisations aspiring towards Foundation Trust Status
Governance Indicators (learning disability) per trust within the locality

| Royal Marsden and Community Health Services | monitoring reporting process with health providers. | and LD Specialist Health Commissioning |
| ST Helier Hospital Trust | | |
| South West London Mental Health NHS Trust | | |

returns and EDS review actual evidence used by Foundation Trusts in agreeing ratings

Evidence that commissioners are aware of and working with non-foundation trusts in their progress towards monitor level & EDS compliance.
Glossary:

AHC: Annual Health Check
HAP: Health Action Plan
LD: Learning Disabilities
LD DES: Learning Disabilities Direct Enhance Service
QOF: Quality Outcome Framework
BME: Black and Minority Ethnic
JSNA: Joint Strategic Needs Assessment
SCCG: Sutton Clinical Commissioning Group
GP: General Practitioner