

**PE1789/B**

Minister for Mental Health submission of 19 October 2020

Thank you for your request dated 22 September 2020. As this petition cuts across a number of policy areas my officials have consulted with relevant policy areas within Scottish Government in order to provide a complete response to the petition. However, I thought as learning disabilities falls within my ministerial portfolio that it was important for me to respond.

The Committee can be assured that the Scottish Government is committed to improving the lives of people with learning disabilities in Scotland. The central ambition in the [Keys to Life](#) is to tackle inequalities. Our refreshed approach published in March 2019 acknowledged that tackling this requires a whole system, whole population and whole person approach.

In developing that approach within Government we are working hard to ensure that the needs of people with learning disabilities are discussed across a wide range of Scottish Government policies and are properly embedded in some of our key strategies.

We know that when parents with learning disabilities are not provided with adequate support that their children are at risk of being taken into care. We want to protect the rights of people with learning disabilities to become parents. We want to ensure they are provided with effective, early and ongoing support that will ensure families are kept together.

The identification of those with a learning disability or learning difficulties can be done by any professional who comes into contact with them. The resultant pathway to diagnosis is determined by the individual and those professionals working together to assess the needs of that individual. It would be considered standard practice for all professions to keep learning needs in mind as part of a holistic, person centred assessment.

To enable diagnosis of learning difficulties or learning disabilities their needs to be wider discussion and agreement with the care team, the individual and those around them.

People with a learning disability or learning difficulty have the right to receive the right support at the right time and in the right place. Services are designed locally to meet the needs of these individuals whilst considering any legislative context. The range of professionals who could come into contact with and support these individuals is wide and they all bring their professional expertise.

Within Scotland each of these professions has a different route to qualification and practice. Our higher education establishments use a mix of teaching methods to ensure the professionals upon qualification have the tools to enable them to manage a wide range of individuals. These methods include direct teaching, practice based learning and research. The time spent studying learning disabilities or learning difficulties varies depending on the profession.

It might be helpful for me to provide some examples of these professional routes:

### **Speech & Language Therapy**

Speech and Language therapists can study at two higher educational establishments within Scotland and can obtain a Bsc Honours or Masters degree, or a post graduate PgDp in Speech and Language Therapy/Pathology. The number who qualify each year is dependent on a number of factors. The qualification allows them to practise as a speech and language therapist and work with anyone with a communication or swallowing difficulty, and this includes learning disabilities and learning difficulties. Their professional assessment can contribute to any diagnosis of learning disability or learning difficulty.

### **Occupational Therapy**

Occupational Therapists can study at three higher educational establishments within Scotland and can obtain either a BSc Hons or a Masters degree. One establishment also offers a PgDip in Occupational Therapy. The number who qualify each year is dependent on many factors. The qualification allows them to practice as an Occupational Therapist (OT) and work with people across the age range and across all health, social care, third sector and private settings. This includes working with those who have or have not had a diagnosis of a specific learning difficulty or disability.

### **Physiotherapy**

Physiotherapists can study at several higher educational establishments within Scotland and can obtain either a BSc Hons or a Masters degree. This qualification allows them to practice as a Physiotherapist with those with or without a diagnosis of a specific learning difficulty or disability. Whilst Physiotherapy education doesn't specifically include teaching of the use of diagnostic tools in relation to diagnosing a learning disability, this does not rule out the possibility of Physiotherapists carrying out such assessments if relevant training is provided. The Physiotherapy skillset primarily involves assessment of physical capabilities and so involvement in diagnostic assessments of cognitive ability is less frequent, it is therefore likely that Physiotherapy involvement would be best utilised in conjunction with other health professionals within a team approach

### **Clinical Psychologists**

The education and training route to practice as a clinical psychologist involves achieving a good honours degree in psychology and completion of a three year post graduate Doctorate in Clinical Psychology. Clinical Psychologists are trained to work across the life-span and in a range of clinical and specialist areas using core skills of assessment, formulation, intervention, service development, evaluation and research to achieve person- and service-related outcomes.

With regards to assessment of parents with a learning disability, clinical psychologists may use a variety of different types of assessment to help understand the nature of someone's learning disability/behaviours in the context of the parenting relationship. Assessments may be carried out directly with an individual (e.g. measures of cognitive

ability, measures of mood/beliefs, understanding the context within which a behaviour occurs) or indirectly via a carer.

Results of the assessment can be used to offer recommendations on how to optimise a parents learning and skills acquisition. Guidance may be issued to other agencies in how to ensure that their interventions are tailored that take into account a parents' learning disability. Clinical Psychologists can also provide advice, training, support and supervision to mainstream services, for example, family centres, health visitors who will also support these parents.

## **Registered Learning Disability Nursing**

There are three universities across Scotland that offer a Degree in Nursing Studies (Learning Disabilities). Edinburgh Napier, Glasgow Caledonian, and most recently The Open University. The number of graduates each year are dependent on a number of factors. The three year degree course provides opportunity to develop professional knowledge and understanding in the field of learning disabilities nursing and its application. Learning Disability nurses are the only professionals educated specifically to work across the lifespan with people with learning disabilities.

There are also opportunities to undertake Masters Level Nursing programmes, which enables achievement of a post-graduate qualification alongside a nursing registration. Learning Disability nurses aim to improve the health and quality of life of people with learning disabilities through evidence-based nursing care and support in line with key policy drivers. Learning disability nursing involves working in partnership with individuals and families to improve autonomy, promote health and support inclusion to enhance lifestyles to achieve the best health outcomes. This includes contributing to a multi-disciplinary approach to assessment for any diagnosis of learning disability or learning difficulty. On graduating, learning disability nurses can work across a number of health and social care settings. These include, in-patient, community, and social care and voluntary sector organisations.

## **Educational Psychologists**

The Scottish Government recognises that Educational Psychologists have an important role in supporting our children's learning, including our looked after children. Their work significantly contributes to the equality and inclusiveness of schools, and they play a vital role in raising the attainment of our children and young people.

That is why we partnered with COSLA in an investment – worth more than £4 million in the initial 3 years - to support their training and deliver up to 30 new educational psychologists each year.

Since funding was introduced, the number of education psychologists starting training has more than doubled - a total of 59 new trainees over 2019 and 2018, compared to a total of 29 over 2017 and 2016. We expect 29 students to join the workforce in 2020 following completion of the MSc, and 30 in 2021. This compares to 12 in 2019.

This increase is a result of these new training arrangements, delivered in partnership between the Scottish Government and local government, to deliver a sustainable educational psychology workforce in Scotland.

## **Health Visitors**

Health Visitors play a vital role in the health and wellbeing of children and families in our communities and they are at the core of delivering universal early years services. That is why we are committed to ensuring that children and families get access to the right support at the right time. We have provided phased funding to Boards for 500 additional Health Visitors since 2014/15. Funding of £20m per annum now baselined to NHS Boards. As we move from the focus on building capacity and additional numbers towards the long term sustainability of this vital service we will continue to monitor progress closely.

## **NHS Workforce**

In terms of workforce numbers these are at a record high. The latest quarterly NHS Workforce stats (published 1 September) provide a data snapshot as at 30 June 2020. This shows NHS Scotland workforce was at a record high up over 20,200 Whole Time Equivalent (WTE) and a 15.9% increase since September 2006 to 147,309.9 WTE.

- Qualified Nurses & Midwives, up 8.3%, by 3,403.8 WTE (41,026.2 WTE to 44,430 WTE).
- Nursing & Midwifery support staff up 18.7%, or by 2948.4 WTE (15,757.7 WTE to 18,706.1 WTE).
- Allied Health Professionals (excluding paramedics) are at a record high, up 20.1% or by 1,776.3 WTE, (8,842.1 WTE at Sept 06 to 10,618.5 WTE at Jun 2020).
- Higher NHS staffing per head than NHS England – 27.0 staff per 1,000 people in Scotland (June 2020) while in England it is 20.8 (June 2020).
- More Qualified Nurses and Midwives per 1,000 population – 8.1 WTE in Scotland (June 2020) compared to 5.8 WTE in England (June 2020).
- the number of doctors in training has increased by 20.6%.

In returning to the petition ask we do not believe that increasing the health workforce is the only answer, families need support and the system for children in care needs to address prevention. The work of The [Promise](#) is exactly about early intervention and prevention of children and young people going into care, and seeks to bring transformation in the way in which services are delivered. Improvements to family support and delivery of the [Promise](#) will we believe be a more holistic response to preventing children being placed in the care system. So it maybe helpful for me to explain the Government's position of these policies.

## Family Support

The Scottish Government's aspiration is that all families are supported to give their children the best start in life, so that Scotland's children grow up loved, safe and respected and that they realise their full potential.

The Scottish Government and SOLACE have jointly established a Children and Families Collective Leadership Group to consider the impacts of the pandemic on children, young people and families especially those in the most challenging circumstances, and the actions that need to be taken by local and national government in response. The Group have developed a vision and blueprint, focussed on supporting local services to build on what is working for families in their areas. And where families' needs are not being met, that the sector is supported to find new solutions. One of the immediate actions recommended by the Leadership Group in relation to family support was that families should know what support is available to them and how to access it. In response, the Scottish Government created a national Family Support Directory available on [Parent Club](#) that will allow users to access further sources of information and direct support on a broad range of issues such as supporting children with additional support needs, behaviour, family relationships, health and wellbeing.

## The Promise

In accepting all of the conclusions outlined within the [Promise](#) on 5 February, the First Minister committed the Government to work with all of its energy and focus, along with local authorities, care providers and all relevant stakeholders, to make the changes to the system that the review considers necessary and to deliver that change as quickly and as safely as possible. The [Promise](#) highlights the importance of universal and intensive support to enable families to thrive, which is one of the principles by which Part 12 of the Children and Young People (Scotland) Act 2014 was founded. The Act places a duty on local authorities to provide services for families whose children are at risk of entering the care system. This focus on early engagement and prevention is central to improving the outcomes of children and families and early engagement, underpinned by Getting It Right For Every Child, can ensure that fewer children need to become looked after over the longer term. The [Promise](#) also made clear that *Scotland must support all families caring for disabled children and those with additional support needs. If families require intensive support they must get it and not be required to fight for it.* However, in the context of mental health, The Promise also cited that *diagnosis is important and must be a supportive process, but diagnosis is not always a requirement to promote healing from distressing experiences.* Diagnosis should not be a prerequisite to obtaining trauma informed support and if there is an identified need for additional support for a young person or their family, then this be provided as quickly and as possible.

We recognise that trauma informed support is an important part of this process and since 2018, over £1.5 million has been invested in a [National Trauma Training Programme](#), led by NHS Education for Scotland. Through this programme, we have provided face to face training to over 7000 workers across all sectors, with thousands more accessing the universally available online resources. Our priorities over the next year include a focus on trauma informed justice services and supporting carers and

staff working with looked after children and young people. This will include tailored trauma training for staff and volunteers within the Children's Hearing System and Scottish Children's Reporters Administration. We will continue to work closely with our local authority and community planning partners to deliver our shared ambition for our workforce and services to be capable of recognising where people are affected by trauma and to respond in ways that prevents further harm and which supports recovery and reconnection.

Whilst the response above details the policies, frameworks, guidance and resources available in Scotland, we accept that much more needs to be done to improve the lives of children with learning disabilities in Scotland and to reduce the number of these children taken into care. We believe that by delivering our commitments in the Promise that we will see the improvements in the reduction of children in care that the Public Petitions Committee is seeking.

We are committed to continue to work with relevant statutory bodies and third sector partners to ensure that the inequalities children with learning disabilities face daily are addressed across all sectors including education, health and social care.

I hope the Committee find this response helpful

**Clare Haughey**  
**Minister for Mental Health**