

Disability

See the **Data Factsheets** for more data and analysis:

<http://www.rbkc.gov.uk/voluntaryandpartnerships/jsna/2010datafactsheets.aspx>

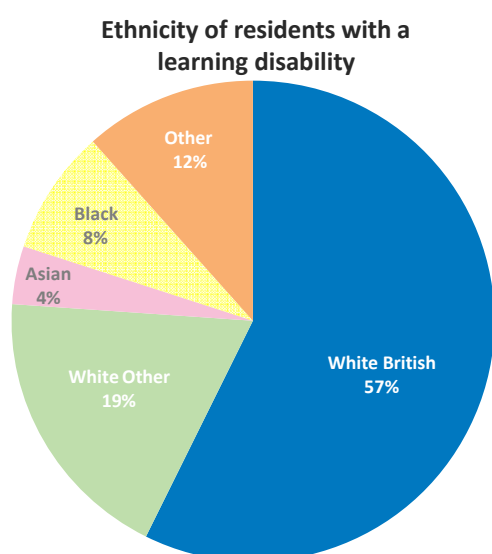
Learning Disabilities

Current Population

There are currently a total of 321 people age 18 or over who are known by the Council to have a learning disability. All of the users have needs identified which require support from health and or social care professionals. Of these, 113 individuals live in residential accommodation outside of the Royal Borough of Kensington and Chelsea. In addition to the adult population; there are 64 people with a learning disability in transition (i.e. moving from children's to adults services) who are between the ages of 16 and 18.

The age profile of people with a learning disability is generally younger than the age structure of the general population: 89 per cent of adults with learning disabilities fall into the 18-64 age group, compared to 85 per cent of the general population in the borough.

Locally, the prevalence of a learning disability is more commonly found in men, which is in keeping with national trends.¹ Sixty per cent of the adult learning disability population in the borough is male.



Fifty seven per cent of people in the borough with a learning disability are of 'White British' ethnicity compared to 50 per cent of the general population. This is followed by 'White Other' at 19 per cent compared to 28.5 per cent of the general population. The proportion of adults with a learning disability from Asian and Black ethnic groups is similar to the local adult population.

Changes in population need

Nationally, there has been a rise in both the number and complexity of learning disabilities in recent years

Nationally, there has been a seven per cent increase of young adults with a learning disability in the last two years. Increases are partly a result of medical advances, including improvements in survival rates for very premature babies, as well as changing attitudes toward terminating pregnancies when a disability is discovered before birth.

In keeping with national trends, the mean age of the learning disabled population of Kensington and Chelsea is getting older. Medical and social care advances have led to a significant increase in life expectancy for people living with a learning disability². In many cases, the health of older adults with a learning disability is significantly poorer than the general population.

Medical advances have greatly improved the life expectancy of people with learning disabilities

People with learning disabilities have an increased risk of developing dementia and will therefore require extra support. Those with learning disabilities are increasingly likely to outlive their parents, who are often their primary carers. Again, this will lead to an increased need for support for these adults.

Housing

In 2008/09, 61 per cent of adults with a learning disability known to social services were in settled accommodation. Kensington and Chelsea does not have any adults with learning disabilities living in campus accommodation (for example long stay hospitals), which is a key target for adult social services.

Qualitative research was conducted by The Supporting People Commissioning Body into the borough's current supported housing services. Published in September 2010, this study identified a number of issues with local housing provision for people with a learning disability, and suggested there was a need to re-commission some services

The needs of adults with learning disabilities who are getting older have similarities with the general needs of older people. This will mean that some of the extra support needed could potentially be met in sheltered or

There is potential for some services to be shared between different groups

extra-care accommodation services originally designed for older people. This could provide some joined-up partnership work with two traditionally different client groups.

Health

People with learning disabilities tend to have a higher level of health need than the general population, and their health issues can often remain undiagnosed or untreated. Diagnostic overshadowing, where individuals health problems are wrongly attributed to their impairment by health professionals, can challenge health improvement.

Poor health among those with learning disabilities can relate to a range of factors, from congenital problems, lifestyle issues particular to those with learning disabilities, and poor socio-economic circumstances.

The Disability Rights Commission found that people with learning disabilities are more likely to experience major illnesses, to develop them younger, and to die of them sooner than other citizens. The most common problems tend to be obesity, diabetes and respiratory disease, followed by epilepsy, hearing and visual impairments.³

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Due to the health inequalities that exist within the learning disabled community, the Department of Health has set aside financial incentives to support GP practices in delivering annual 'health checks' for people with learning disabilities. Sixty eight per cent of service users in the borough have already had an annual health check⁴ and it is predicted that, by 1 April 2011, a further 16 per cent of users will have received one.

During 2008/09, 64 per cent of adults with a learning disability in the borough had a health action plan completed. This is a plan written by the individual in partnership with a care coordinator. This document is designed to establish the health needs of the individual and to outline the steps needed to maintain and improve health.

Services

There is a drive to support people with learning disabilities to access care using social services 'personal budgets' in order to choose and pay for their own care. There are currently 68 adults with learning disabilities with a personal budget (21 per cent). The uptake of personal budgets by adults with learning disability is made difficult by the current way that services are purchased. Many of the accommodation-

based services and day services are currently commissioned through predetermined 'block' contracts, which prevent adults with learning disabilities to exercise choice. In the future, contractual arrangements will change and this will ensure that the access to existing services and universal services will be made easier.

Employment

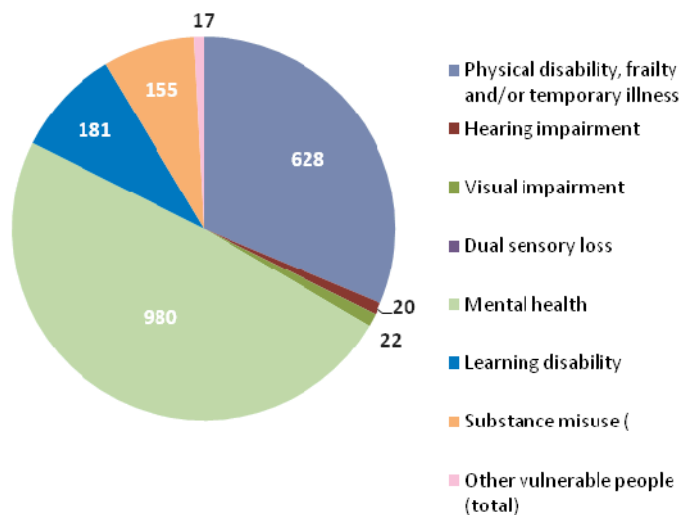
In the year 2009/10, eight per cent of adults with a learning disability were in paid employment. However, when volunteering is added to this, the number rises to 16 per cent. The most recent national average for adults with learning disabilities in (paid) employment was seven per cent.

Physical Disability

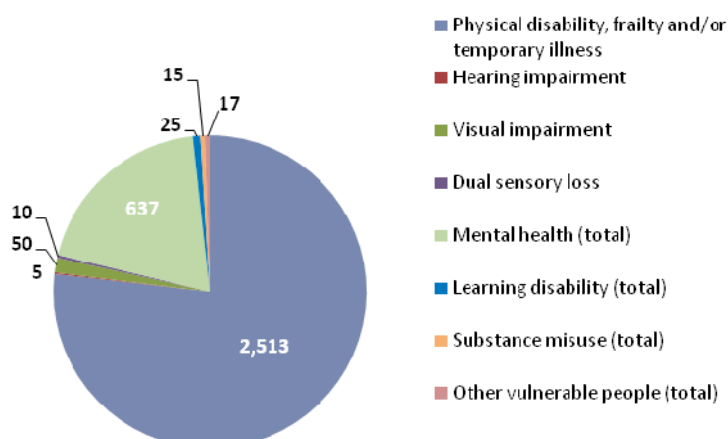
One third of all 18-64 year olds in contact with the Council's Social Services have a primary diagnosis of physical disability

Thirty percent of all 18-64 year olds receiving social care services from the Council have a primary diagnosis of physical disability (686 people in total). A further 25 people (one per cent) have a primary diagnosis of hearing impairment and 42 (two per cent) have a primary diagnosis of visual impairment.⁵

Number of people aged 18-64 receiving services by primary client group



Number of people aged 65+ receiving services by primary client group

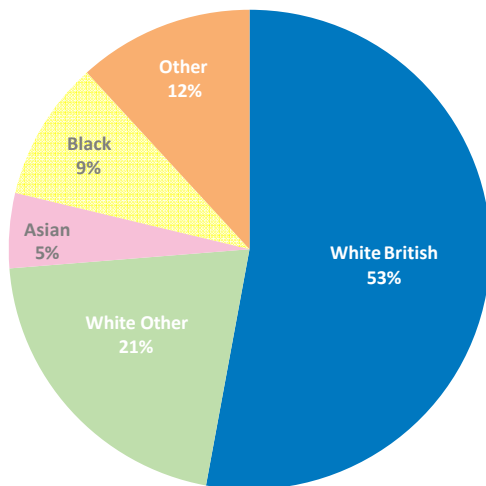


In over 65s, a much higher proportion of service users have a primary diagnosis of physical disability (77 per cent, or 2,513 people in total). A further five people (less than one per cent) have a primary diagnosis of hearing impairment and 50 (1.5 per cent) have a primary

diagnosis of visual impairment. ⁶

Ethnicity

Ethnicity of residents with a physical disability

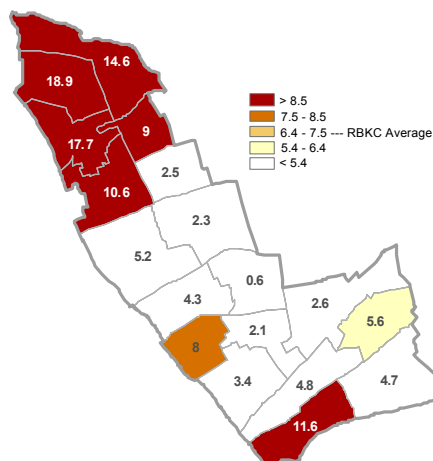


Fifty three per cent of people in the borough with a physical disability are of 'White British' ethnicity compared to 50 per cent of the general population. This is followed by 'White Other' at 21 per cent compared to 28.5 per cent of the general population. The proportion of adults with a physical disability from Asian and Black ethnic groups is similar to the local adult population.⁷

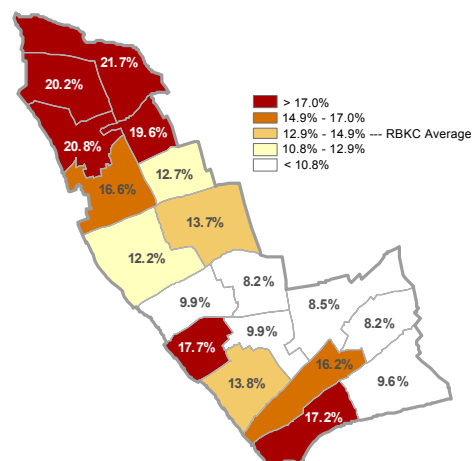
Services

Uptake of adult and older people's services for physical or sensory frailty or disability matches levels of deprivation, with highest levels of uptake in the north of the borough, as well as Cremorne (Worlds End) and Earl's Court. Compared to two years ago, the number receiving services has increased in deprived areas.

Residents 18-64 with a physical or sensory frailty or disability receiving services from RBKC social services, 2009/10

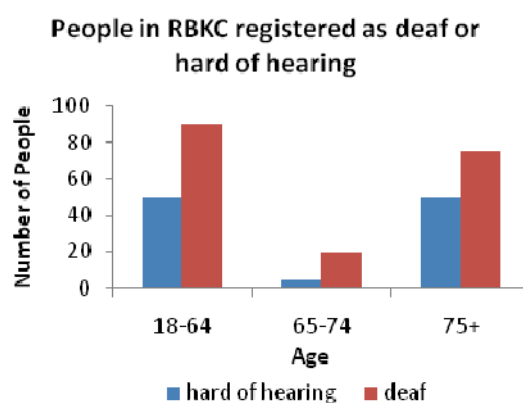
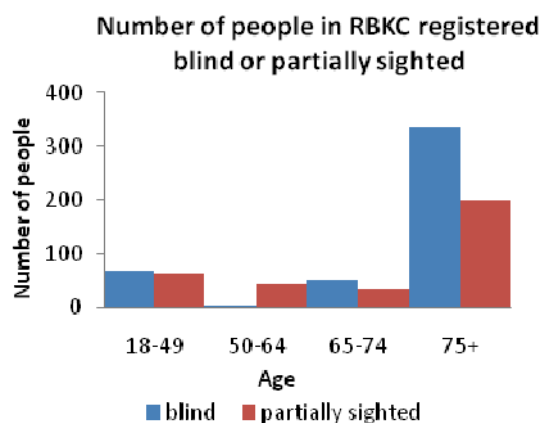


Residents 65+ with a physical or sensory frailty or disability receiving services from RBKC social services, 2009/10



Sensory impairment registers

There are 290 adults in the borough registered as deaf or hard of hearing, and 345 registered as blind or partially sighted.⁸ This is a far greater number than those currently receiving services from the Council. However, it is still likely to be an under-representation, as registration of a sensory impairment is entirely voluntary.



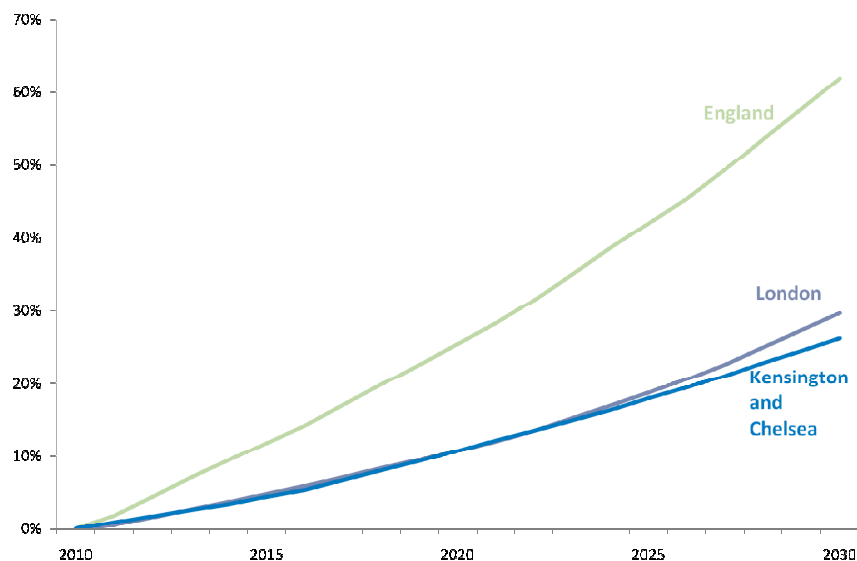
Changes in Need

In future, improvements in life expectancy and the ageing of the 'baby boom' generation will mean an increasing number of people with physical disabilities in the borough

Kensington and Chelsea is likely to experience a growth of about 150 people aged 65+ with a registered mobility impairment in the next five years, and a rise of about 950 people in the next two decades, from around 3,500 people to around 4,500. The

proportionate growth is estimated to be in line with London's but less than half of that predicted in England as a whole.⁹ These estimates are based on predictions about the changing nature of the local population.¹⁰ Actual prevalence rates by age groups are not anticipated to change.

Projected percentage of people with a mobility impairment in Kensington and Chelsea



The anticipated changing age structure in Kensington and Chelsea is also likely to have some impact on the prevalence of severe physical disability amongst adults aged 18-64. Estimates suggest that there will be an additional 50 people between the ages of 18 and 64 who have a severe physical disability by 2015 (a two per cent increase from 2010). By 2025, it is anticipated that there will be an extra 300 adults under the age of 65 with a severe physical disability in the Royal Borough (a 14 per cent increase from 2010).

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¹ RBKC RAP data, 2010

² Emerson Report, Centre for Disability Research, 2009

³ Equal treatment; closing the gap, Disability Rights Commission 2006

⁴ Local NHS data collected for LD performance and self assessment framework 2011,

Valuing people now: a new three-year strategy for people with learning disabilities, Department of Health, 2009

⁵ RBKC RAP data 2010

⁶ RBKC RAP data 2010

⁷ RBKC RAP data 2010

⁸ NHS Information Centre website

⁹ Projecting Older People Population Information System (POPPI) applied to GLA 2009 (low) population projections

¹⁰ Projecting Older People Population Information System (POPPI) applied to GLA 2009 (low) population projections