

REGIONAL MANAGED CARE NETWORK FOR LEARNING DISABILITIES

**Bi-Annual Report
2016 - 2018**

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1. Executive Summary

The South East and Tayside Regional Planning Group (SEAT) established the Learning Disability Managed Care Network (LD MCN) in 2003, in recognition of the challenges faced by Health Boards in the ongoing care, treatment and support of people with learning disabilities with complex needs. Specific areas of work included the development of services and the workforce to support people who had additional needs relating to challenging behaviour, autistic spectrum disorders and forensic behaviours.

Key successes delivered by the MCN since its inception include the development and delivery of a regional employment contract for LD Consultant Psychiatrists, guidelines for improving and delivering accessible information, the development and delivery of a regional low secure forensic service for male patients, the delivery of the model of care report “The Full Spectrum of Care for People with a Learning Disability who have Complex Needs” and the continued health equality framework project.

This report details the work of the LD MCN for the period May 2016 through to April 2018. The report presents progress against each of the agreed work plan objectives, and demonstrates particular achievements in service change and positive impacts on the experiences of people with learning disabilities.

The LD MCN continues to deliver contemporary programme of workforce development seminars which enables a focus on particular skills. The seminars delivered throughout 2016-18 ensure that colleagues across Health Boards, local authorities and 3rd sector are supported in developing their knowledge and skills to ensuring people are more equipped to successfully and safely support individuals with complex needs.

A specific focus has been the continued work to support the implementation of a positive behavioural approach across the LD MCN region. This approach delivers direct improvements in the life experiences and quality of life of people with learning disability and challenging behaviour. The LD MCN remains committed to enhancing the skill sets of the workforce, with a particular framework to understand, address and reduce challenging behaviour, supporting people with learning disabilities to engage more positively with daily life opportunities, improving their community presence, opportunities for relationships and enabling individuals to experience an enhanced quality of life.

Previous work focused on the analysis and understanding of the needs of individual who were supported in out of area placements. This information has helped to inform consideration of more local service options, opportunities to design and deliver these on a regional basis in a planned way that will support Boards in meeting the recommendations within the Keys to Life.

Introduction

The constituent members of the LD MCN are NHS Lothian, Fife, Forth Valley and Borders. The LD MCN is accountable to East Region Health and Social Care Delivery Plan Programme Board (previously known as SEAT Regional Planning Group).

The LD MCN Senior Management Group, which consists of senior representation from each of the constituent members, plus engaged local authority stakeholders continues to hold an overview and monitor the progress of the range of work streams underway.

The Learning Disability MCN Work Plan

The aim of the LD MCN is to continue to support and facilitate the continuous professional development of services, to deliver efficacy and equity of access and opportunity, for adults with learning disabilities with complex needs.

The LD MCN does not directly deliver any clinical or social care services, beyond the regional recruitment and delivery of the LD Consultant Psychiatric regional service via the hosting arrangements with NHS Lothian.

The LD MCN continues to engage with stakeholders from Health Boards, Integration Joint Boards (IJBs), local authorities and third sector providers. The work of the LD MCN discussed later in the report, demonstrates where possible, the wider engagement achieved to date.

As stated in the CEL 29 (2012) MCNs should continue to develop in line with the revised core principles, an abbreviated version of which is captured below:

- clarity about management arrangements
- defined structure and links to planning functions of constituent members
- publicised annual work plan
- be based on an evidence base, and where appropriate, through quality improvement, audit, research and development
- inform the expansion of the evidence base
- the Network must be multi-disciplinary and multi professional
- where the network is multi-agency, it must include Local Authorities
- the Network must include the meaningful involvement of users and Third Sector representatives in the Network's management arrangements
- each Network should develop mechanisms to ensure the work is directly informed by the views and experiences of users and carers
- network's educational and training potential should be used to the full, encompassing Community, Primary and Secondary Care Services
- Each Network must demonstrate continuing scrutiny of opportunities to achieve better value for money through the delivery of optimal, evidence-based care

The following objectives, of the LD MCN Work plan for the period 2016 – 2018, demonstrate alignment with these principles.

Objective 1 Review membership of the LD MCN in light of Integration Joint Boardss and realign MCN as required to meet future requirements.

Objective 2

Develop and deliver a communication strategy that ensures continued awareness and engagement with the work of the MCN support and strengthen engagement of all stakeholders with the work of the LD MCN

Objective 3

Support and strengthen engagement of other stakeholders with the work of the LD MCN

Objective 4

Continue to implement the model of care framework across the LD MCN

Objective 5

Continue to develop and deliver learning and development initiatives

Objective 6

In partnership with NES and Scottish Government, and consistent with Keys to Life objectives of a health life, strengthen and commitment LD nurses review to deliver the HEF Project.

Objective 7

Carry out a LD MCN wide workforce review to identify existing and future pressures and actions that the MCN can take to support workforce planning and development.

Objective 8

Ensure Appropriate Governance across the LD MCN in accordance with CEL 29(2012)

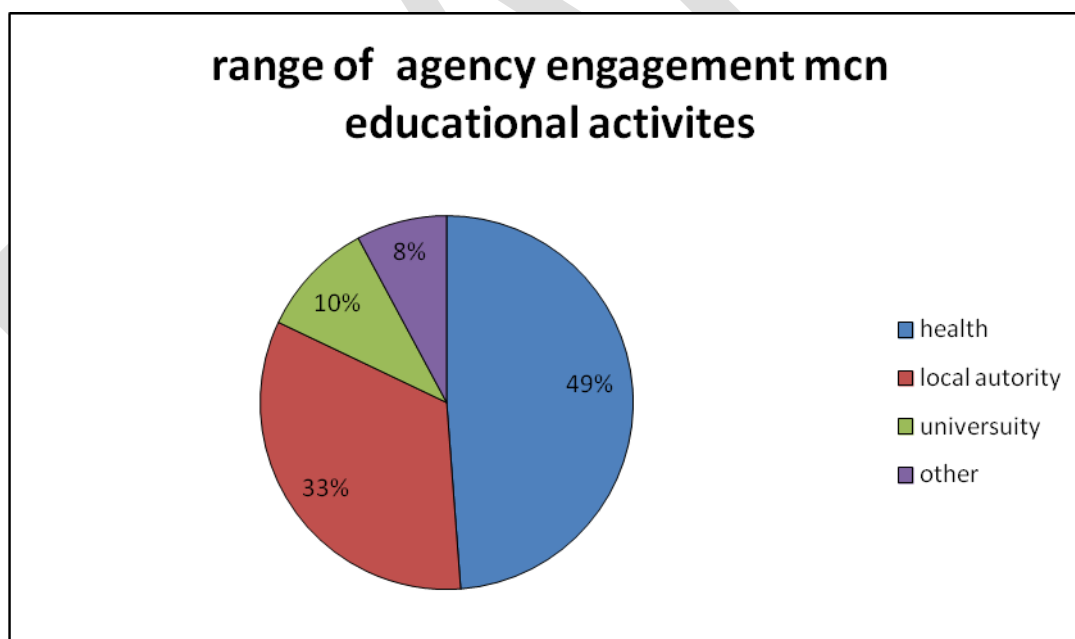
The full Work Plan, published and circulated in April 2016, is attached at Appendix 1. This was agreed at SEAT Programme Board in April 2016.

Performance

➤ **Objective 1. Review membership of the LC MCN in light of IJBs and realign MCN to meet future requirements**

Since April 2016 there has been significant change across the region with the development of IJBs and the progression of health and social care integration. Progress varies across the region and the impact on LD services has also varied, including the impact on management structures. As a consequence it has therefore been difficult to fully engage with the IJBs and relevant senior management across the region. Despite this, however, the LD MCN has continued to engage with the senior management meetings across the region and to will feed into the relevant IJBs as appropriate. It is hoped that as the new structures are now more established and staff have settled into their new posts that there will be greater opportunity to engage with them in the future. The new work plan will allow for opportunity to engage in joint working to help support IJBs to delivery on local LD strategies as appropriate.

Since mid 2016 the LD MCN has hosted a number of regional events which were open to all regional Health Boards, Local Authorities, Third Sector organisations and the Scottish Government. These events have included a major Physical Health Workshop and the Health Equalities Framework event.



The more detailed LD MCN Learning and Development Event Report is attached for additional information. Appendix 2

➤ **Objective 2. Drive the communication across the MCN membership to ensure continued and up to date awareness and engagement with the work of the MCN**

The LD MCN has continued to engage with the newly developed IJBs. This includes active participation from the IJBs in Borders, Fife, Forth valley and the Lothians. This ongoing engagement was achieved by actively engaging with key stakeholders and senior clinical staff during the development of the new IJBs. There have been formal visits to all IJBs to discuss and agree local and regional priorities. There continues to be appropriate representation on all MCN groups with membership including health, council, Scottish Government, education and third/voluntary organisations as appropriate. This is always under review with shifting roles.

The LD MCN has continued to publish a newsletter to aid communication across the region. The most recent published newsletters are attached for information (appendix 3). They include a mixture of information and updates from the MCN, highlights MCN specialist group activity and the spot light section has been used to highlight good practice and innovative service development within a board area. The feedback continues to be positive and the newsletter continues to be a key element of our communications strategy.

The MCN's website embedded within the managed knowledge network was developed in 2015 but has struggled to meet the current needs of the MCN. We have subsequently developed a new website which will be vital to maintaining good communication but will also have a key role in sharing approved resources and training. This is available via www.ldmcn.scot.nhs.uk. It will also support the booking of MCN events, thus reducing the administrative workload, and have scope for special interest peer support groups. The website remains under development with support from NHSS. A short term project manager resource has been secured to populate the website with suitable resources.

➤ **Objective 3. Support and strengthen engagement of other stakeholders with the work of the LD MCN.**

The LD MCN has always recognised that it could do more to offer opportunities for engagement and participation of people with learning disabilities in the activities of the network. Some of the educational events encourage service user engagement particularly the physical activity event where there are come and try events for a number accessible sports organisations.

The network continues to investigate ways to improve processes across work streams to strengthen the voice of the user. All local health boards have active user groups involved within their services. There are also a number of very active user groups within the community. The LD MCN will continue to link with them on a local level and investigate the development of an LD MCN regional group that could comment and inform LD MCN priorities.

Meetings details

meeting	DATE	Group membership representation
Learning and Development Group	2 Monthly	<p>Jill Jones (Chair), Clinical Psychologist, NHS Fife</p> <p>Derek Phillips, Workforce Planning Director, East Region</p> <p>Jayne Crow, Clinical Lead, LD MCN</p> <p>John Gibson, Senior Workforce Development, East Lothian</p> <p>Peter Old, Senior Charge Nurse, NHS Borders</p> <p>Heather Duff, HEF Project Manager, LD MCN</p> <p>Karen Lee, Administrator, LD MCN</p> <p>Diane Willis, Lecturer, Napier University</p> <p>Scott Taylor, Clinical Nurse Manager, NHS Lothian</p> <p>Kim Christie, PL&D Practitioner (C&F), Mid Lothian</p> <p>Claire Smyth, L&D Coordinator, LD MCN</p> <p>Caroline Gill, lead nurse, NHS Forth Valley</p> <p>Fraser Ross, Senior Charge Nurse, NHS Fife</p> <p>Sam Abdulla, Deputy Field leader- LD, Napier University</p> <p>Marianne Hughes, Practice L&D Manager, Mid-Lothian</p> <p>Peter Collins, Acting L&D Manager, NHS Lothian</p> <p>Jackie Sloan, L&D Advisor, Edinburgh Council</p> <p>Linda Hume, Lecturer, LD Nursing Team, Napier</p> <p>Maria Truesdale, Lecturer in LD, Napier University</p>
Quality Improvement Group	Quarterly	<p>Jayne Crow, Clinical Lead (Chair), LD MCN</p> <p>Derek Phillips, Workforce Planning Director, East Region</p> <p>John Toland, Lead Nurse, NHS Fife</p> <p>Heather Duff, HEF Project Manager, LD MCN</p> <p>Tracy Goodfellow, CN Challenging Behaviour Team, NHS Lothian</p> <p>Marion Kimber, Team Manager for Learning Disabilities, NHS Borders</p> <p>Karen Lee, Administrator, LD MCN</p> <p>Caroline Gill, Lead Nurse for LD, NHS Forth Valley</p> <p>Sharon Horne-Jenkins, Head of Specialty, LD Clinical Psychology, NHS Forth Valley</p> <p>Chandima Perera, Consultant Psychiatrist, NHS Forth Valley</p> <p>Lucie McAnespie, Acting Speech and Language Manager, NHS Lothian</p> <p>Marion Kimber, Team Manager for Learning Disabilities, NHS Borders</p>

meeting	DATE	Group membership representation
Health Equalities Framework Group	Monthly	Peter Old, Senior Charge Nurse, (Chair) NHS Borders Heather Duff, HEF Project Manager, LD MCN Derek Phillips, Workforce Planning Director, East Region Susan Jackson, Team Leader, NHS Lothian Lorraine Kirkaldy, Community Nurse Manager, NHS Fife Marina Callaghan, Community Nurse, NHS Forth Valley Caroline Gill, Lead nurse, NHS Forth Valley
Epilepsy Group	Established May '18 Quarterly	Jane Stuart, Associate Specialist, NHS Lothian Pam Martis, Associate Specialist, NHS Lothian; Derek Robertson, Epilepsy Specialist Nurse, NHS Lothian Andrew Boyle, Epilepsy Specialist Nurse NHS Fife, Colin Morrison, Consultant Psychiatrist, NHS Fife John Foley, Lead Epilepsy Specialist Nurse, NHS Lothian James Lynch, Pharmacist, NHS Fife Peter Rennie, Psychiatry Trainee NHS Lothian Rosalind Vallance, Staff Grade NHS Fife Tanya Thiagarajah, Consultant Psychiatrist, NHS Forth Valley Jayne Crow, Consultant Psychiatrist NHS Forth Valley
Positive Behavioural Support Group	Established June 18 Quarterly	Jayne Crow, LDMCN Clinical Lead Linda Hume, Lecturer, Napier University Caroline Gill. Lead nurse, Forth Valley Sharon Horne- Jenkins, Head of psychology, Forth Valley Stephen Oathamshaw, Head of psychology, Borders Tracy Goodfellow, Charge nurse, Lothian Lesley Malone, Psychology, Lothian Scott Taylor, Lead nurse, Lothian Lorraine Kirkaldy, Charge nurse, Fife Ann Marie Carrigan, Charge nurse, Fife Audrey Espy, Head of psychology, Fife Claire Smyth, Learning and development coordinator, MCN, minutes Ann McDonald, Complex needs Project Lead, Scottish government Keith Bowden, Programme director-Learning disabilities, NHS education for Scotland

➤ **Objective 4. Continue to implement the Model of Care Framework across the LD MCN**

The Models of Care Framework was developed by the LD MCN and published in April 2012. It continues to provide a reference point for a range of LD MCN and board activities. The LD MCN continues to promote awareness of this document and support the progression of the models of care implementation plan. The Models of Care Framework continues to help the LD MCN and boards to understand and describe current and future service pressures, priorities for workforce development and the opportunity for joint commissioning. It can be accessed via:

<http://www.knowledge.scot.nhs.uk/media/CLT/ResourceUploads/4073614/f5a6366e-1f94-4372-a66b-58660c31baeb.pdf>.

Over recent years there has been a significant review of clinical services across the region and there continues to be inpatient and community service redesign underway. Each board/IJB is at a different stage of service redesign. This has impacted on the ability to implement regional initiatives particularly with regards to monitoring inpatient standards. This continues to be a priority in the work plan.

Previous engagement with the “12 pillars of support” inpatient standards has been difficult to monitor. The Royal College of Psychiatry inpatient standards and a formal inpatient accreditation process has superseded this document. The NHS Fife Learning Disability Inpatient Assessment and Treatment unit has adopted the Royal College inpatient standards accreditation process and has successfully been accredited. Plans are currently in place to progress the initiation of the formal RCPsych accreditation process for all inpatient assessment treatment units across the MCN.

➤ **Objective 5. Continue to develop and deliver learning and development initiatives**

The LD MCN continues to deliver a broad range of seminars, workshops and training programmes for the wider LD services across the region. The LD MCN has long recognised that the workforce supporting people with learning disabilities and complex needs stretches way beyond the boundaries of boards. Consequently the programmes are made available to the workforce in its widest sense. The majority of events are free to attend but must be booked through the MCN administrator.

This programme is overseen by the Learning and Development Group which has representation from the NHS, IJBs, Councils and academic partners. A regular training needs analysis has also been completed by the LD MCN Learning and Development Coordinator and this informs future planning. Regular consultation with LD MCN partners also allows feedback and requests for other training and educational events to be included in future programs.

The well established LD MCN Support Workers Training Programme continues to be well received and well attended. The Programme now runs twice a year and has 20+ places available for non registered health and social care support workers. It continues to be reviewed following annual training needs analysis and feedback. It is rotated across the region to support wider participation from all LD MCN partners.

The Programme has now been running since 2007 and was delivered annually to practitioners in both health and social care. The content includes the health profile of

people with a learning disability; communication; nutrition; thinking and behaviour; autism; epilepsy; forensic and mental health needs. The programme is regularly evaluated and amendments made to maintain a high quality of presentation and to ensure the content is contemporary and relevant for both health and social care support workers.

The 2017 Programmes in Fife were completed with excellent feedback and evaluation results and the Autumn 2018 course will take place in East Lothian.

Another key component of the work of the Learning and Development Group is the seminar programme which offers a flexible means to deliver up-to-date and professionally relevant education across the MCN on a range of key areas. This is informed by local and national priorities.

See attached Learning and Development Event Report for more information. Appendix 2

➤ **Objective 6. In partnership with NES and SGHD deliver the agreed Health Equalities framework (HEF) project.**

The Project Manager for the Health Equalities Framework (HEF) Project has led a major change programme to support training and implementation of the HEF, an evidence-based outcome measurement tool. The focus of work is across the NHS Borders, Fife, Forth Valley & Lothian. An evidence based article on the first nine months work of the project was written by the Project Manager and published in Learning Disability Practice,,: Learning Disability Practice, Duff, H (2016) '*Health Equality Framework shows promise in improving service users' well being.*'

The Project Manager was also commissioned by the Scottish Government to evaluate the impact of HEF implementation on clinical practice and people with a learning disability. Use of the HEF provides an evidence base that learning disability nurses make a difference and reduce the health inequalities experienced by adults with learning disability. The data outcomes have potential to influence service development, public health initiatives and practice education.

Three different reports were written as part of the feedback to Scottish Government and other stakeholders on the outputs of commissioned work: a nine-month report, an 18-month report and an evaluation report. Two poster presentations were developed to support communication with stakeholders "HEF Project Manager role" and "HEF data outcomes". A further publication has been written on the outcome of HEF data analysis and has been submitted and accepted for publication by Learning Disability Practice.

Interest in the HEF and HEF outcomes has been strong and presentations have been made to a range of stakeholders, including:

- Scottish Learning Disability Lead Nurse Group
- Scottish Government ACNO
- Scottish Learning Disability Nurse Network annual conference (2015 & 2017)
- UK Strengthening the Commitment conference in Wales (2016)
- Scottish Strengthening the Commitment National Implementation Group
- NHS Education for Scotland (NES)
- Learning Disability Nursing students at Edinburgh Napier University & Glasgow Caledonian University

- Learning Disability Nurses across the LD MCN and other board areas across Scotland
- Multi-disciplinary CLDT colleagues regionally

The Project Manager was initially seconded from December 2014 for nine months. This was extended several times as additional Scottish Government funding was secured until June 17. The MCN continues to fund the for two days per week (July 2017 until present) with clear a work plan to deliver on; sustaining implementation, administration of annual audit, coordinate update of the HEF tool with HEF authors and coordinate further data collection and analysis. This post continues to be reviewed on an annual basis

➤ **Objective 7. Carry out a MCN wide workforce review to identify existing and future pressures and actions that the MCN can take to support workforce planning and development**

The LD Consultants across the LD MCN Region continue to fulfil their contractual requirements in providing their specialist expert contribution to the NHS LD services locally. The opportunities and benefits derived from working collaboratively continue with the provision of the LD MCN tertiary on-call rota, shared continuing professional development forum and delegated responsibility for consultant appraisal. Many of the Consultants also contribute directly to the working subgroups of the MCN. This model of regional working continues to be an excellent example of regional working and sustaining a small specialist medical workforce.

More recent activity has seen the ongoing use of the LD MCN medical staff User Feedback questionnaires which provides service users with the opportunity to give anonymous responses that inform from the patient perspective on their views of their experience of being seen by each Consultant. This information is a necessary requirement for Consultant GMC revalidation.

Experience gained from the roll out of this method of securing service user feedback will be used to inform other work streams and enhance user engagement across the LD MCN. The LD MCN Administrator will have a key role in supporting this project and the use of the MCN freepost address improved response rate.

The LD MCN has continued to support improved quality and consistency of consultant electronic job planning. It has also recently updated the LD MCN consultant policies and procedure under the hosting authority of NHS Lothian.

➤ **Objective 8. Ensure Appropriate Governance across the LD MCN in accordance with CEL 29(2012)**

Appropriate structures and processes have been established within the MCN to ensure continual monitoring and management of the network's performance, and the efficacy of the support functions which enable delivery of the activities.

These include monthly team meetings of the MCN core team and regular communication regarding finance monitoring with the MCN's host Board.

The current project managers are line managed by the LD MCN Network Manager and are accountable for the project deliverables relating to their respective areas.

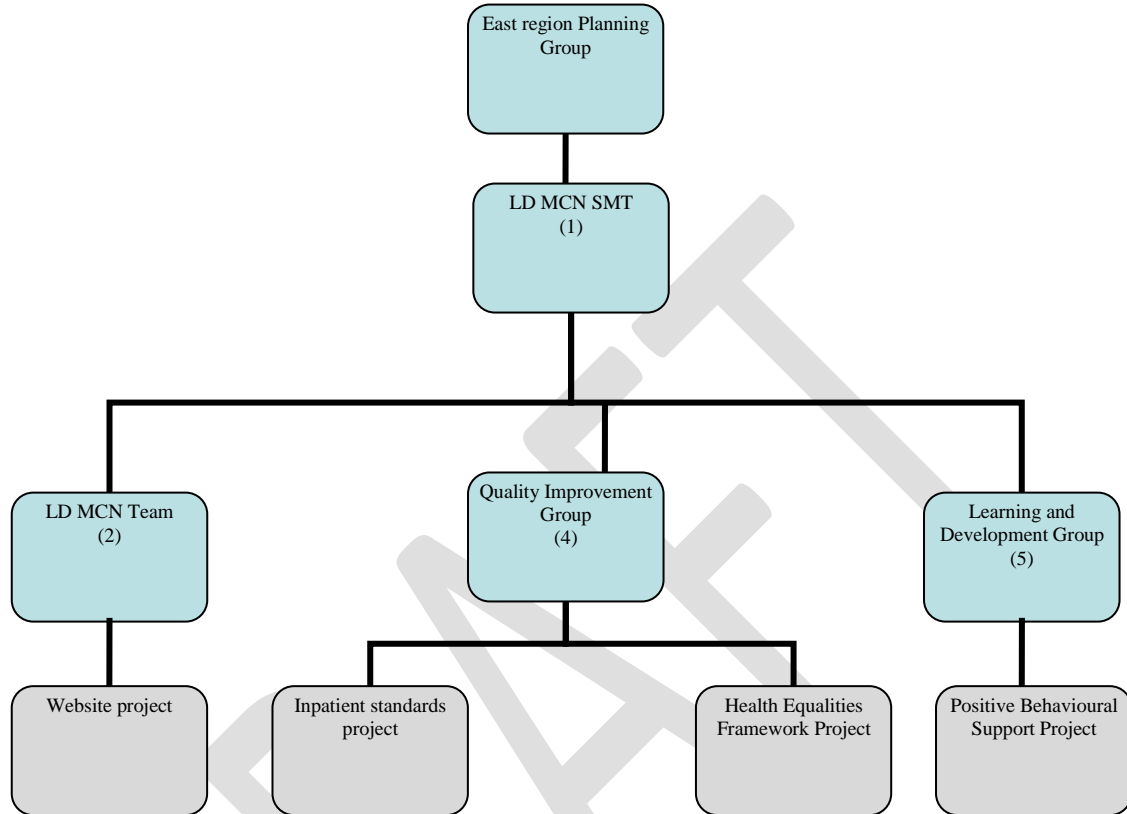
Over recent years the development of IJBs has led to significant changes to management arrangements across the region. This has led to numerous changes to the representatives attending the senior management team. As such role, remit and membership of this and all of the LD MCN groups continue to be under review.

The governance arrangements have been changed following the evolution of the SEAT Planning Group into the East Region Programme Board. The LD MCN Clinical Lead and Manger will attend the Programme Board bi-annually to report on MCN work as appropriate.

The governance and management arrangements of the MCN are informed by the CEL 29(2012) “Managed Care Networks: Supporting and Delivering the Healthcare Quality Strategy”. The LD MCN continues to develop to ensure compliance with these expectations and as will be explored in more detail in the forthcoming section, is actively focussing on the development of structures and supportive processes to ensure that people with learning disability are provided with meaningful opportunities to directly inform the work of the LD MCN. As our governance and management structures evolve, the LD MCN will report to the MCN SMT on performance and future improvement opportunities throughout the year.

Governance

The MCN has an established governance structure as described in the 2016 – 18 work plan, and demonstrated in the diagram below.



Focus for 2019 - 2021

The focus for 2019-2021 is summarised below. The LD MCN is currently developing a full workplan that will support the delivery of these priorities.

- Progress inpatient standards implementation and accreditation across all inpatient assessment and treatment units within the MCN. This will be monitored within the Quality Improvement Group.
- Deliver on the identified deliverables for the Health Equalities Framework project.
- Deliver on the identified deliverables for the Positive Behavioural Support Project.
- Continue to develop the understanding and support for service models to address the needs of women with learning disabilities and forensic needs working within the national strategic planning team, Pathways for women.
- Continue to work with service managers and clinical leaders to identify key priority areas for education and development, directly linked to individual Board/IJB strategic and workforce development plans.
- Build on and develop the multi agency development programme for health and social care support workers as key to the successful delivery of local services
- Build and develop the seminar programme to provide up-to-date and contemporary learning and reflective opportunities that focus on service development priorities, in line with identified clinical priorities.
- Establish the service user forums and the systematic production of LD MCN information in inclusive formats to maximise opportunities for service engagement in the network.
- Develop the LD MCN website to provide up to date education resources and links for suitable resources.
- Continue to maximise opportunities to design regional variation in service delivery and policy interpretation to support the most effective utilisation of resources across the LD MCN.
- Support a regional approach to epilepsy specialist professionals peers support, educational/ training delivery and educational resource development and documentation development that follow current published guidelines and recommendations.
- Investigate dementia care for patients with learning disability across the region and inform service development and educational resources /training as required.
- Continue to work with stakeholders including Scottish government to progress local implementation of the learning disability palliative care pathway
- Continue to work with Scottish government to support the delivery of new "keys to life" priorities

Contact Details

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Both the Network Manager and the MCN Administrator are based at:

South East and Tayside Regional Planning

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EH52 5LH

Work Plan 2016 – 2018

The following table demonstrates the LD MCN workplan for the period 2016-18 and the progress made/outcomes achieved against each objective. These are coloured coded using the RAG convention.

Objective 1	Actions	Outcomes	Timeframe	Lead
Review membership of LD Managed Care Network in light of IJBs and realign MCN to meet future requirements	Meet with key stakeholders to review relationship of MCN with emerging Integrated Joint Boards and existing Health Boards.	Clarity of future MCN relationship with IJBs, health boards and local authorities. Ensure there is clear understanding of MCN role.	Initial meetings with IJB and board representatives by mid 2016.	MCN Manager and, Clinical Lead
	Agree priorities areas for joint action or for MCN support to IJBs, boards, etc.	Agreement on MCN/joint priorities.	Mid 2016 following initial meetings	MCN Manager and, Clinical Lead
	Review membership of MCN groups to ensure Health Board, IJBs and other key stakeholders (NES, SG, 3 rd Sector, etc) are fully represented	Ensure there is appropriate representation on all MCN groups.	Mid 2016 reviewed on regular basis Changing personal have impacted on group representation	Group chair and mcn clinical lead
	Ensure opportunities to engage, either delivering or attending MCN events are made available to all key stakeholders.	All stakeholders engage fully in the range of MCN events	Ongoing review, summarise in bi-annual report and events report	MCN Administrator, clinical lead and mcn manager

Objective 2	Actions	Outcomes	Timeframe	Lead
Develop and deliver a communication strategy that ensures continued awareness and engagement with the work of the MCN	Develop a communication strategy ie map out stakeholders, agree key communication approaches and timetable	MCN Communication Strategy The work of the MCN is publicised via the MCN Website	April 2016 to be reviewed annually Changing personnel and roles have impacted on communication	MCN Manager and Administrator
	Circulate the draft MCN 2016 – 18 Workplan to MCN groups and stakeholders for comment and redraft as required.	Finalised workplan and sign off by MCN by April 2016	End of April 2016	MCN Team
	Enhance existing MCN newsletter (ie using MS Publisher) and maintain 3-4 editions per annum	All constituent members of the MCN are fully aware of the work of the MCN	Quarterly	MCN Team
	Complete the MCN bi-annual report and submit to SEAT	Report to be prepared	april 2018	Mcn manger, Mcn clinical lead

	Review and update all MCN mailing lists	Better, more targeted coverage for MCN communications	April 2017 April 2018 ongoing Changing personnel and roles have impacted on communication	MCN Administrator Mcn team
Objective 3	Actions	Outcomes	Timeframe	Lead
Support and strengthen engagement of all stakeholders with the work of the MCN	Develop opportunities for user and carer involvement in MCN work streams	Service user representation and input is demonstrable in each work stream.	Monitor membership/ service user input to each work stream annually Service user group engagement ongoing	MCN Team
	Seek engagement with Voluntary and independent sector for all MCN work	Third sector representatives participate with and input to the work of the MCN	Review progress annually Event report Training needs analysis April 2017 April 2018	MCN Team

	Continue to build the reputation and engagement of the MCN with e.g. NES, Scotland Excel, COSLA, ADSW, etc	The MCN team will demonstrate engagement with the key agendas informing Learning Disability Practice regionally, nationally	Ongoing and reported through the newsletter, website and Annual Report	MCN Manager and MCN Clinical Lead
	Identify service pressures and strategic planning priorities across the MCN and how the MCN can help address these	The MCN will have a robust and agreed understanding of the priority pressures where Regional solutions may be appropriate	Ongoing - Female Forensic work progressed in 2016. Attendance at national female forensic service review 2018 Local service redesign mcn input. ongoing	Strategic Planning and Commissioning Group
Objective 4	Actions	Outcomes	Timeframe	Lead
Continue to implement the Model of Care Framework across the LD MCN	Review and update developed structure to deliver the agreed Model of Care Implementation Plan	MCN Members agree and support the framework to implement the MoC	Ongoing via IJBs and NHS Clinical strategy Autumn 2017	MCN Manager and MCN SMT

	Develop quality standards for the tiers of service within the Model of care, admission and discharge pathways and the associated workforce skills sets and expected outcomes for service users.	There is an agreed map of current services against the service tiers of the MoC	Ongoing Difficult to achieve due to service redesign and delay in IJB and intergrated service structures across the region.	MCN team manager MCn clinical lead MCN SMT
	Explore with NHS Boards and new IJB partners the opportunities for collaborative commissioning including third sector or private services	MCN members deliver services to an agreed standard of quality, with optimal therapeutic benefits and positive outcomes for patients being the utmost priority	Ongoing	MCN SMT, MCN clinical lead, MCN team manager
	Ensure the model of care framework requirements are reflected in wider MCN workforce planning and learning & development priorities	Scoping of regional pressures and priorities Linked workforce risk assessment and learning & development plans. MCN members can demonstrate the relationship between their local workforce plans and the implementation of the Model of care	End of 2017 ongoing Difficult to achieve due to service design.	

Objective 5	Actions	Outcomes	Timeframe	Lead
Continue to develop and deliver learning and development initiatives	Carry out a Training Needs Analysis to update previous analysis and identify priority training needs	Revised and prioritised training needs analysis across the MCN, this will inform future seminar/workshop programme	Autumn 2016 and bi-annual refresh thereafter	L&D Group L&D Co-ordinator
	Work in partnership with academic partners and all MCN members to develop the seminar programme for registered and senior practitioners	Annual programme is advertised across all members and interested stakeholders as appropriate	Publish programme of events on 6 month rolling basis	
	Continue to develop the range of topics and presenters to support continued professional development.	MCN members will be able to access a range of CPD events to support contemporary best practice	Quarterly review at LDG meetings	
	Training Course for Non-Registered Health and Social Care Support Workers	All member agencies contribute to the planning and delivery of the Support Workers courses All member agencies release of Support Workers to attend the course	Regular Courses delivered twice a year	

	Joint training with Social Work and Third Sector services	<p>MCN and stakeholders identify areas for joint training and education</p> <p>MCN supports delivery of joint training opportunities</p>	Quarterly review at Land D group meetings	L&D Chair and MCN Manager
	Support Good Practice Initiatives in response to key publications informing the Learning Disability community	MCN members are supported to implement knowledge and practice changes as required and remain abreast of contemporary initiatives across the LD field	Ongoing	MCN Team
Objective 6	Actions	Outcomes	Timeframe	Lead
In partnership with NES and SG, and consistent with Keys to Life Objective of A Healthy Life, and Strengthening the Commitment LD nursing review, deliver the HEF project	Deliver the agreed project briefs – on time and on budget - to support the roll-out	Project delivered within budget	August 2016	HEF Project Manager
	evaluation of the HEF across Board LD nursing within the region.	<p>MCN boards have nurses trained in use of HEF and utilize to improved practise in terms of explicitly addressing health inequalities</p> <p>MCN boards are supported in the implementation of the HEF tool in all identified nursing teams</p>	August 2016 Annual review Aug 2017	

	Evaluate the impact of the HEF on practise	Data analysis, report completion	August 2016 Aug 2017	
	Evaluate the impact of the HEF on service users.	Data analysis Report completion	March 2018	
Objective 7	Actions	Outcomes	Timeframe	Lead
Carry out a MCN wide workforce review to identify existing and future pressures and actions that the MCN can take to support workforce planning and development	Continue to support the recruitment, induction and development of the NHS Lothian based MCN Consultant Psychiatric workforce.	The MCN has an appropriate medical workforce	Ongoing	NHS Lothian clinical director/ MCN clinical lead MCNManager
	Ensure consultant job planning reflects the service requirements across the region.	Robust job planning and changes to roles to reflect service redesign	Annually	
	Support Consultants with re-validation, including the service user questionnaire process	People with Learning Disabilities are involved in the development of services via service user feedback questionnaire	Project every 18 months	

	Demonstrate compliance with all relevant HR policies in management of the Regional Consultants e.g. Induction to local LD services	Mandatory training process followed on a local level and regional as appropriate. The MCN medical workforce has a robust structure for job planning and appraisal	Ongoing	
	Carry out a MCN wide review of the LD workforce to look at current and future supply and demand issues given known drivers ie demography, psychiatry trainee numbers, planned service developments, etc.	Workforce review	Ongoing Service redesign have impacted on ld workforce planning engagement.	MCN Manager
Objective 8	Actions	Outcomes	Timeframe	Lead
Ensure appropriate governance of the LD MCN in accordance with CEL 29(2012)	Ensure east region governance arrangements are in place and working. MCN Clinical Lead and Manager attend Easyt region meetings to report on MCN work	Executive Directors of member boards are appropriately informed and in support of the work of the MCN	Ongoing – reviewed in April of each year.	MCN SMT and the Director of Regional Planning.

	Meet with IJBs to develop understanding of new planning processes across the region and how best MCN can link in with IJBs processes	Member representation of the MCN SMT supports the revised planning processes and work of the MCN	ongoing	LD MCN Chair
	Review Senior Management Team role, remit and membership in light of above	SMT reflects new planning processes	ongoing	Director of Regional Planning, MCN Clinical Lead and Manager

DRAFT

DRAFT



July 2018

**Learning Disabilities Managed Care Network
Learning and Development Event Report**

1. Purpose of the Paper

The purpose of this paper is to report on the delivery and attendance of the range of seminars, workshops and training programmes delivered by the MCN across the region. The programme is driven by the priorities identified by Keys to Life Strategy.

The MCN delivers a programme of educational and training events each year as well as well established and valued Clinical Support Worker Training programme. It has also supported workforce development projects and specific events linked to the Health Equalities Framework Project (HEF).

This programme is overseen by the MCN Learning and Development Group, chaired by Dr Jill Jones, Consultant Clinical Psychologist, NHS Fife. All these events have provided an opportunity for staff from the NHS, local authorities and the third sector to come together, learn together and share best practice.

The LD Clinical Support Worker Programme continues to be well attended and well received. This programme accommodates 20 participants, on each course, from across the region.

2. Attendance Numbers

Between 1st July 2017 and 30th June 2018 the Training Programme has provided training opportunities for 165 participants, with 161 places being booked and 139 attending. This builds on the 445 attendances from 1st July 2016 to 30th June 2017.

There is high demand for these courses, demonstrated by the 98% fill rate and the 86% attendance rate (actual attendances as a percentage of places booked).

The DNA rate (% of those booked to attend who did not attend) is 14% which, given the numbers involved and the ongoing service pressures which can often lead to short notice cancellations, is expected.

Please see Appendix 1 for more detailed breakdown of the attendance numbers.

For comparison, the last report, published in June 2016, showed an 88% fill rate, a 91% attendance rate and a 9.8% DNA rate over a 12 month period, between July 2016 and June 2017.

3. Analysis of Attendees

Organisations Represented :

Area	No of Attendees	SUB TOTAL	Percentage*	Total Percentages
NHS Borders	4	68	3	49
NHS Fife	9		6	
NHS Forth Valley	9		6	
NHS Lothian	39		28	
NHS Tayside	7		5	
Fife Council	6	44	4	32
Edinburgh Council	21		15	
Mid-Lothian Council	2		1	
East Lothian Council	5		4	
Forth Valley Council	3		2	
Borders Council	1		1	
West Lothian Council	6		4	
Integrated Health & Social Care	2	2	1	1.4
Universities	14	14	10	10.1
Others	11	11	7.9	7.9

**Some rounding of numbers has been applied*

4. Feedback and Evaluation

The MCN use Survey Monkey, an internet based evaluation system, to collect and collate the responses from each event. Following attendance participants are emailed and asked to complete a short e-form. The overall return rate to date is 42%.

From the feedback analysis, see Appendix 2, satisfaction levels are high, with 96% of responding participants feeling that their objectives for attending were completely or partially met and 98% feeling the courses were of benefit to them and supported their practice. 96% of all responding attendees also felt the venues used were satisfactory.

5. Consideration & Next Steps

The Learning and Development Group is asked to:

- Consider the above report and note the high levels of attendance at MCN events, the high levels of satisfaction of attendees and the mix of organisations represented.
- Consider the format of the report and the proposal to generate the report on a twice yearly basis.

Karen Lee
LD MCN Project Administrator

Appendix 1

LD MCN Event Programme 2017 -
2018
Totals (As at 04.07.18)

Event Title	Max Delegates	Expected to Attend	Actually Attended
CSW Course Oct - Dec 2017	20	21	18
Intellectual Disability 8th September 2017	40	39	32
Palliative Care 27th February 2018	35	33	31
Sexual Health & Wellbeing 4th May 2018	70	68	57

TOTAL No Of Delegates

165

161

138

Fill Rate :

98%

Attendance : 86%

DNA 14.00%

Appendix 2

Participant Response to Evaluation

(As at 04.07.18)

Are you a :	Number	Percentage
NHS Employee	32	64
Social Care Employee	14	28
Voluntary Sector	0	0
Client / Carer	0	0
Student	4	8
Other	0	0
TOTAL	50	

Question Asked		Yes, Completely	Yes, Partially	No, not really	No, not at all
Was the objective of this Seminar met?	<i>Number</i>	35	13	1	1
	<i>%</i>	70%	26%	2%	2%

Question Asked		Yes, Completely	Yes, Partially	No, not really	No, not at all
Was this Seminar of benefit to / supported you?	<i>Number</i>	24	24	1	0
	<i>%</i>	49%	49%	2%	0%

Question Asked		Yes, Completely	Yes, Partially	No, not really	No, not at all
Were you satisfied with the venue?	<i>Number</i>	34	13	2	0
	<i>%</i>	69%	27%	4%	0%

NOTES :

Feedback from October 2017 CSW Course was generally positive (not included in above numbers or percentages as evaluations are not done electronically)



SEAT
Region



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- Learning & Development Section
(Page 6)
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Learning Disabilities Managed Care Network

SPRING 2018

Update

Dr Jayne Crow, Consultant Psychiatrist in Learning Disabilities and Learning Disabilities MCN Clinical Lead.

Over the last 6 months we have been visiting all regions and meeting with many relevant stakeholders. This has helped to review the current LD MCN priorities and inform the new work plan.

The MCN board areas are all at different stages of health and social care integration and their experience of integrated joint board development and implementation has also varied significantly. This has influenced local priorities and service development. Despite this there were a number of themes that were consistent across all areas which the MCN will prioritise. There continues to be a recognised benefit to the LD MCN and a motivation to continue to support its work.

The main role that all areas feel the MCN achieves best over recent years has been the seminar and educational programme. This continues to provide good quality and free local training to all staff. New training requests have been received for personality disorders, community management of complex autism, inpatient services and palliative care. The new MCN learning and development coordinator will continue to develop this successful programme.

The health equalities framework (HEF) has been successfully implemented across the MCN region and has shown to have a good inter-rater validity and a statistically significant impact on reducing health inequalities following learning disability nursing input. This has been a Scottish government led piece of work and has led to multiple publications and local/national presentations. The MCN will continue to support the ongoing regional use of the HEF and the HEF reference group will continue to provide support.

Positive behavioural support (PBS) continues to be a priority across the MCN regions and all areas have developed local specialist services to offer this in inpatient and community settings. The MCN has always been committed to supporting a regional approach to training and resource sharing as requested. Gaps in training have been highlighted and the MCN is currently investigating suitable bespoke training development with Napier University. We will also be investigating suitable mapping of existing online resources to support increased training and education within health and social care and also within the third sector with voluntary and private organisations. The development of a local specialist MCN group would be vital to continue this important process.

The management of complex community patients particularly those with autism and challenging behaviour can be at high risk of placement breakdown was highlighted as a challenge to service in all board areas. It was felt that the MCN could have a role in resource signposting and resource development and also bringing people together to share good practice and provide peer support within training events. This will require a combined approach and input with social care and private organisations.

Contact Details

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Heather Duff

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01506 771 841

LD MCN Website :

Under Construction

Update (Continued)

Issues around inpatient resources were also raised in all areas. There is recognition that the current number of available assessment and treatment numbers are not appropriate and do not meet service need. This was recognised to be due to a significant number of delayed discharges across the region. There was also a recognised lack of suitable inpatient beds for male and female patient requiring a low level of security. These issues also appear to be a recognised nationally. This has led to the ongoing discussion for the development of national forensic learning disability resources. The MCN could play a role in establishing local options and continue to support the regional forensic inpatient unit, Daleview. Previous inpatient service events have been successful and given the huge changes that all services have recently undertaken then this may be something that would be well received. The ongoing development of inpatient standards has also been a MCN priority. We will be investigating supporting all inpatient units to work towards royal college of psychiatry accreditation which has already been successfully achieved and maintained within NHS Fife LD services.

Access to Specialist Adolescent learning disability inpatient beds has also been problematic for some areas and a national unit is currently being developed. There has also been an area for concern when complex young people are being brought back to area from residential care settings or specialist private resources. Supporting the regional development of improved PBS services and resource and joint educational events could have a role in reducing the risk of placement breakdown.

All regions are interested in supporting the implementation of the Glasgow LD palliative care pathway but have experienced difficulties with local engagement. It was felt that the MCN could play a role in supporting a regional approach. The recent MCN seminar events in Palliative care was well received and had representation from both LD and palliative care health and social care staff. This will be followed up with the development of a specialist LD and palliative care group to progress regional pathway implementation, joint working and peer support.

Improved communication to and from the MCN were recommended and the development of a LD MCN website that is fit for purpose has been agreed. This website will be utilised for sharing of MCN information and documentation. It will also share educational resources and signposting for approved learning disability materials to support its agree priorities.

There is also growing interest to utilising the skills across the MCN for specialist groups (virtual and physical) to provide peer support, to share good practice, resources and inform local and regional service development. The MCN Epilepsy group is a good example of this. It was recognised that Positive behavioural support and palliative care would also benefit from this type of approach and we will be trying to establish these groups in the near future. These specialist groups could have a key role in informing regional and national discussion and we will be approaching all area for nominations for suitable representatives in the near future.

HEF Update



HEF Validity & Reliability

The HEF focuses on the determinants of health inequalities and the prevention and reduction of their impact, as opposed to the reactive approaches to the symptoms of health inequalities. Using the HEF enables the practitioners to demonstrate the impact of the known determinants of health inequalities, measuring the effectiveness of services in taking steps to reduce the different adverse health outcomes experienced by people with learning disabilities.

NHS Kent: Colleagues in NHS Kent completed a 12 month study to measure the validity of the HEF by ascertaining the degree to which what has been measured corresponds with other independent measures obtained by different research tools. HEF was compared with Life Star and Therapy Outcome Measure (TOMs). In brief, the outcome from NHS Kent project *demonstrates the validity and reliability of the HEF*, and its good diagnostic use in identifying health inequalities. The validation work also identified recommendations that can further enhance the application of the tool. A detailed copy of NHS Kent Project work is available from the MCN. NHS Kent Project team are also working to publish their work.

LD MCN: Project Manager HEF has been liaising with NHS Lothian Analytical Services to analyse the HEF data sub sample (n=147) and explore the differences between the first and final mean % HEF scores. Initial findings indicated that there had been a highly statistically significant reduction in mean % HEF scores from 29.5 to 10.4.

Next steps data collection

Project Manager will work with Senior Nurses to collect further data. Further data analysis will look at baseline data across the MCN as well as comparing 1st and final HEF's. We would expect the HEF data to be significantly increased and richer than the data collection in December 2016.

Project Manager will liaise with identified others to support data collection and analysis; as well as consider how we provide more accessible visual information on the outcomes.

Next steps to move from HEF v1

There is ongoing shared conversation with Senior Nurses about how best to move forward from HEF v1. We have explored potential web based option that has proven not viable. Project Manager is currently liaising with HEF authors about implications and cost to have HEF v3 to include potential for:

- ◇ Update descriptors to support ease of use (without changing the scoring)
- ◇ Alphabetical order
- ◇ Reflection of Scottish policy and legislation
- ◇ Introduction of a n/a box to allow for omission of irrelevant indicators
- ◇ Function button to consider reason for treatment/support to ensure improvements are achieved in the area of referral
- ◇ Function button to consider discharge reason i.e. intervention complete, transfer of case, patient died, non engagement
- ◇ Facility to delete patients from excel

Staff Updates



Introducing Claire Smyth, our new Learning & Development Coordinator

Claire joined the MCN team at the end of April. Claire is a Speech & Language Therapist and works in her clinical role, within NHS Lothian, 3 days per week. She will spend 2 days per week with us supporting our extensive Learning & Development Programme. Claire is currently meeting with a range of Regional Stakeholders as part of her induction. We are sure you will give her a warm welcome when you get the chance to meet her.

Epilepsy Care for People with Intellectual Disability

Jane Stuart, Pam Martis, LD MCN Epilepsy Group and Jayne Crow

A recent case heard at the GMC Medical Practitioner Tribunal Service reinforced conclusions already reached by the Royal college of Psychiatry (RCPsych) that the care of people with intellectual disabilities (ID) and epilepsy can be a significant area of concern.

There is recognition that the management of people within this cohort in the UK is sometimes inconsistent and fragmented. The RCPsych has already taken the view that it is not only a significant stakeholder in improving epilepsy practice across UK but also leads nationally on the initiatives with other professional and non-professional stakeholders to raise standards of care. A number of steps have been taken by the college which have included the publication of the Royal College Report CR203 and CR206, a national emergency rescue medication protocol for Epilepsy management in community, Pathway for people with ID and epilepsy, Learning Disabilities Mortality Review (LeDeR) programme and Stopping the overmedication of people with a learning disability, autism or both (STOMP).

The RCPsych report proposes a competency based strategy, with a tiered model for all Learning disability psychiatrists. However, this is benchmarked to National institute for health care excellence (NICE) outcome indicators for epilepsy and Scottish Intercollegiate Guidelines network (SIGN) guidance which have wider service implications.

Staff within a specialist LD service should be trained in

- ◇ Understand the precipitating, perpetuating, predisposing and protective factors for epilepsy in a person with ID.
- ◇ know the risks associated with epilepsy and be able to complete and scrutinise risk assessments to ensure that their service delivers on mitigating SUDEP, as well as social and environmental risks.
- ◇ Understand epilepsy and its impact on psychiatric illness and behaviour.
- ◇ Be aware of AEDs and their interactions with other drugs (psychiatric drugs in particular).
- ◇ Ensure that risks are identified and appropriately mitigated, including, for example, that a rescue medication protocol is in place if necessary.
- ◇ Be familiar with local or regional pathway for epilepsy, either in general or specific to ID, including relevant clinicians in neurology or other epilepsy services, and the local area epileptologist.
- ◇ Be able to lead on a management level (although there will be overlap with other clinical staff, particularly nursing) to provide holistic and safe care.
- ◇ Be familiar with the best interests process for treatment of those who lack capacity, and the use of restrictive interventions as part of epilepsy management (helmets, braces, holds) to prevent self-injury.
- ◇ Lead on multidisciplinary team care planning, with epilepsy being part of a wider health plan with input into annual health checks, hospital passport etc.
- ◇ Services should support written care plans and emergency care plans.
- ◇ Services should act as health advocates to support patients to access other specialist services for investigations and so on, if systems for these are already not in place.
- ◇ In cases of active or complex epilepsy, awareness and pathways need to be developed to identify outlets and referrals for second opinion if needed.
- ◇ All patients with epilepsy and ID should be identified, the team members to be involved selected and the source of medical support confirmed.
- ◇ For all such patients, services need to know when a review is required and, together with primary care colleagues, make a re-referral to specialist services as needed.
- ◇ From a research perspective, services could help identify and recruit to suitable studies.
- ◇ All individuals should have an epilepsy risk assessment.
- ◇ There should be at least annual audit to ensure that all patients have risk assessment, management plans are reviewed and a referral pathway is sought. It is proposed that this becomes part of the epilepsy care plan.
- ◇ Services should be able to support relevant stakeholders, including carers, and hold best interests meetings

PAGE 4

Epilepsy Care Section (Continued)

relevant to managing complex epilepsy.

- ◊ Services should support access to clinical investigations such as EEG and MRI.
- ◊ Services should be able to monitor their care delivery against NICE guidelines and outcome indicators.

For individuals in the community with learning disability and epilepsy services should ensure that the patient and their families are:

- ◊ informed and provided with suitable educational materials
- ◊ support rescue medication plans with training.
- ◊ support seizure recording, night-time monitoring and risk reduction.
- ◊ There should be availability of or referral to epilepsy-specific psychological support.
- ◊ There should be availability of or referral to NEAD psychological support.

The LD MCN Epilepsy group has health representation from across the MCN region and meets on a regular basis. It has recently met to review this report and its recommendations. It has made a formal MCN wide response including comments on current local service delivery in relation to individual competencies and the overall service available in different board areas and reviewed any service gaps. It used this information to develop a regional epilepsy action plan.

The proposed action plan includes:

- ◊ Implement of Standardised Outpatient clinic letters and rescue medication care plans (Lothian)
- ◊ Further develop and implement MCN inpatient epilepsy care plan, risk assessment documentation including SUDEP checklist, seizure recording and rescue medication care plans
- ◊ Review epilepsy leaflet and supporting documentation to assist with risk management.
- ◊ A review/audit of patients who present to Learning Disability services with suspected seizures is proposed. (Lothian)
- ◊ Maintain the LD MCN epilepsy group and invite new members.
- ◊ Share details of epilepsy training sessions across the MCN
- ◊ Local MCN Epilepsy training session to be updated to support awareness raising of new care guidelines and individual and service requirements.

References

Royal College of Psychiatrists report: Management of epilepsy in adults with intellectual disability

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Recent Seminars & Events



Support Worker Course January—March 2018

The January—March 2018 support worker course was scheduled to be held in Forth Valley Sensory Centre, unfortunately due to a number of contributing factors this course was cancelled.

The next course is being scheduled for October—December 2018 and details will be circulated in due course.

Palliative Care Seminar : 27th February 2018

The seminar was held in the Education Centre of St John's Hospital. Evaluations are being received from those who attended and feedback to date is really positive.

Sexual Health & Wellbeing Seminar : 4th May 2018

The seminar was held in Brunton Hall, Musselburgh, and had good representation from all areas. Evaluations are being received from those who attended and feedback is positive.

Forthcoming Events

Cancer Care for People with LD : 23rd July 2018

This Full Day Seminar will be held in the Scottish Health Service Centre, Edinburgh. The aim of this seminar is to bring professionals to give an insight internationally about the incidence of cancer from cradle to grave. To explore education and treatment pathways for supporting people with intellectual disabilities for those who support them. This session is aimed at Health and social care staff from all disciplines and allied professionals.

Further 2018 Seminar topics :

- ◇ Physical Activity
- ◇ Epilepsy
- ◇ Older Adults
- ◇ PMLD
- ◇ Autism

There is no charge for attending LD MCN Seminars, but booking is ESSENTIAL as places are limited.

FREE
PLACES

To book a place on one of our Seminars, please complete the form overleaf. Alternatively please send an e-mail noting your interest to : karen.lee@nhslothian.scot.nhs.uk

The new LD MCN Website is currently under construction with SHOW and details will be circulated in due course

Please feel free to forward any relevant information that you would like added / uploaded to :
karen.lee@nhslothian.scot.nhs.uk

LD MCN Seminar Booking Form and Details

To Book a place on one of our Seminars, please complete this form and return it to :



By Post to:

Karen Lee
SEAT Offices
Strathbrock Centre
189A West Main Street
Broxburn
EH52 5LH



E-Mail:

karen.lee@nhslothian.scot.nhs.uk

Seminar Booking Form

Event Title :

Nomination :

Organisation :

Post Held :

E-Mail :

Manager Agreed Attendance : Yes / No

Telephone :

Do you have any special dietary requirements?

Yes

No

If so, what are they?

Do you have any access requirements?

Yes

No

If so, what are they?

Additional Information or
Comments: