



Learning Disability, Autism and Neurodivergence Bill Complex Care/Coming Home – Section 5

PBS Community of Practice Response

PBS Community of Practice Scotland was established in 2020 and is led by a steering group of key stakeholders, including professionals and family carers who have experience and expertise in delivering Positive Behaviour Support in partnership with people with learning disabilities, their families and paid carers. PBS CoP Scotland is chaired by Dr Anne MacDonald ([Scottish Government](#) and [University of Glasgow](#)).

We have 520 members from health, social care, education settings and family carers across Scotland. The Network's role is to provide capacity and skills and focuses on:

- Leading the dialogue and discussion about PBS in Scotland
- Supporting the implementation of PBS in Scotland
- Delivering national events and webinars on PBS
- Sharing good practice and learning about PBS

Ensuring that all sectors providing services to people with learning disabilities are well represented and involved with the work of the CoP.

PBS CoP Scotland welcomes the opportunity to respond to the Scottish Government's Learning Disability, Autism and Neurodivergence (LDAN) Bill consultation. We have focussed our comments on Section 5 of the consultation – Complex Care/Coming Home.

We believe that the LDAN Bill offers a once in a generation opportunity to develop bespoke legislation which helps to transform the lives of people with learning disabilities in Scotland.

Dynamic Support Register
Which of these proposals do you agree with? Please tell us why.
<p>The Positive Behaviour Support (PBS) Community of Practice for Scotland endorses the proposal to incorporate the Dynamic Support Register into the provisions of the LDAN Bill. This strategic step would enhance knowledge dissemination and collaborative efforts particularly across the health and social care sector. Furthermore, it will amplify the advocacy for individuals with learning disabilities and complex needs.</p> <p>We believe including the Dynamic Support Register within the LDAN Bill would bolster accountability across all Health and Social Care Partnerships (HSCPs) through requiring them to report on the specific needs of this population of individuals with complex needs. This measure is anticipated to enhance visibility, facilitate better planning, and promote cross-sector collaboration.</p>
Which of these proposals do you not agree with? Please tell us why.
N/A
Is there anything else that we should consider which is relevant to this topic?
<p>We strongly recommend the incorporation of supplementary guidance to accompany the Dynamic Support Register. This guidance should provide detailed instructions on the categorization of individuals within the register, ensuring consistent recording and facilitating meaningful comparisons. Specifically, accurate documentation of figures for cases that escalate in severity across the register is essential, along with timely reporting of such data to Public Health Scotland (PHS).</p>

We would also advocate for the inclusion of an explicit declaration of an individual's Dynamic Support Register status within their 'Support Needs Assessment' (SNA). This measure would enhance awareness among all stakeholders involved in providing support, clarifying their respective responsibilities and the necessity to engage with the register. Currently, the absence of a standardized recording method and inconsistencies in identifying specific individuals poses challenges. The 'Support Needs Assessment' could potentially address this issue.

We would also advocate for the establishment of an intrinsic linkage between the Dynamic Support Register and the National Support Panel. Furthermore, we would emphasise the necessity of mandatory engagement to ensure that the Dynamic Support Register effectively drives actionable and positive change.

National Support Panel

Which of these proposals do you agree with? Please tell us why.

The PBS Community of Practice for Scotland supports Option 1 and the fundamental principle of a legislative panel conducting individual reviews.

This approach has the potential to significantly impact broader system change. Relying solely on system-level changes (Option 2) may not adequately address the specific needs of individuals at highest risk on the register, who often require tailored and bespoke solutions.

Which of these proposals do you not agree with? Please tell us why.

We believe Option 3 offers minimal benefit and is unlikely to result in significant improvements or enhance engagement beyond the existing status quo.

The National Support Panel would benefit from a panel member assuming the role of responsibility for conducting in-person visits for those individuals reviewed by the panel (Option 1). This would enable the Panel to determine the accuracy of the current living arrangements and allow real-time evidence to inform decision-making.

We believe the National Support Panel should receive instructions and guidance on how to demonstrate the inclusion of the perspectives and opinions of the individual and evidence their voice and views.

Is there anything else that we should consider which is relevant to this topic?

The proposal delineates three distinct standalone options. However, we recommend a synthesis of Options 1 and 2 to be considered and practically implemented. Such an approach would allow system change strategies to impact not only those classified as high priority but also a broader cohort of individuals on the Register. By empowering the Panel to deliberate both individual cases and systemic change approaches, a larger pool of individuals are likely to benefit.