



Department of  
**Health**

An Roinn Sláinte

Máinnystrie O Poustie

[www.health-ni.gov.uk](http://www.health-ni.gov.uk)

## **Equity of Access and Outcome:**

The future role of RNLDs in  
supporting people with learning  
disabilities to achieve the best  
health possible

### **– Model Summary**



# Acknowledgement

**I would like to thank all those who have worked to produce this report to inform the strategic and future direction of Registered Nursing Learning Disabilities (RNLD) in Northern Ireland (NI). The publication of this report is both timely and appropriate as we face many challenges in meeting the health needs of our population. However, as nurses, we have the opportunity to make a real difference, in line with the ambition of Health and Wellbeing 2026: Delivering Together and the implementation of recommendations from other relevant reports, reviews and public inquiries.**

It is vital that the RNLD workforce offers enough flexibility and innovation for future changes in service delivery models that meets public need. To support this, I firmly believe this report, which includes a proposed model for future RNLD services, will have a valuable impact in the further development of learning disability services here as nurses take on more complex and expert roles.

Moving forward, we need to work to improve access to services and support transformational change, whilst improving on recruitment and retention of registered nurses in learning disabilities.

I am confident that implementation of the future model and recommendations proposed within this report will help to achieve this for people with learning disabilities and their families.



**Maria McIlgorm**  
**Chief Nursing Officer**  
**DoH**

# Foreword

**As co-chairs of the RNLD Regional Strategic Workforce Development Group we are pleased to present Equity of access and outcome: the future role of Registered Nursing Learning Disabilities (RNLDs) in supporting people with learning disabilities to achieve the best health possible.**

This paper outlines a future model and recommendations to maximise the RNLD impact towards recognising the abilities and meeting the health and care needs of people with a learning disability across Northern Ireland (NI).

We celebrate the fact that people with learning disabilities are living longer. However, we also acknowledge that they often experience complex health and care needs, health inequalities and a shorter lifespan compared to the general population.

People with learning disabilities access care from a wide range of health and social care (HSC) services including general practice, community health and social care, secondary care and general hospital services. Nonetheless, many experience challenges accessing health and care services. Whilst RNLD's make up a small percentage of the overall nursing registrant workforce, when required, their skills and expertise can have a significant positive impact on the lives of people with learning disabilities, their families and carers. Therefore, ensuring a nursing workforce with the right skills, knowledge and behaviours who can provide the right care at the right time and in the right place for people with learning disabilities across the life course, is a priority for the Chief Nursing Officer (CNO).

Key to this will be ensuring that we have a RNLD workforce, working as part of the wider health and social care team, who can respond effectively to the needs of people with learning disabilities using a biopsychosocial approach.

The proposed model within this paper strives to strengthen the nursing contribution across all sectors within the interdisciplinary team and will ensure that, when required, RNLDs expertise will be available through specialist services within an equitable, timely, safe and effective manner. It recognises the RNLD contribution across the lifespan in: promoting wellness and prevention of ill health, self-management, anticipatory care through early intervention, responding to deterioration and acute needs, and providing monitoring and treatment of long-term conditions including palliative and end of life care. Furthermore, as part of the interprofessional team, using a biopsychosocial approach, RNLDs will support the biological, psychological, and social well-being of people with a learning disability from early years to the end of life.

This report should be considered in the context of other relevant reviews, inquiries and strategic work including:

- The Review of Learning Disabilities Nursing undertaken by the Department of Health (DoH 2022)
- Implementation of the Nursing and Midwifery Task Group (NMTG) Report and Recommendations (2020)
- Development of a new Adult Learning Disability Service Model and Framework for Children with disabilities which both form part of the Learning Disability Strategic Plan being led by the DoH
- Reform of Adult Social Care
- Implementation of the Mental Health Strategy (2021-2031)
- Development of Safe Staffing legislation

Moreover, we make a commitment to learning from the failings and progressing any pending recommendations from the Muckamore Abbey Hospital (MAH) Public Inquiry and related Belfast Health & Social Care Trust (BHSCT) and Police Service Northern Ireland (PSNI) investigation in the progression of the proposed model for RNLDs in the future.

We recognise the current expertise and good practice provided on a daily basis by RNLDs in NI, and we strongly advocate that this model is adopted to better serve people with learning disabilities and the RNLD workforce. Throughout the development of this model, we heard from a wide range of stakeholders and are grateful to everyone who helped to inform the future direction of the work of RNLDs in NI.



**Linda Kelly**  
Chief Executive  
NIPEC



**Suzanne Pullins**  
Executive Director of  
Nursing  
Northern HSC Trust



**Right Care: RNLDs will provide evidence-based, person-centred care using a biopsychosocial model to:**

- promote wellness and prevent ill health
- support self-management, anticipatory care and early intervention
- respond to deterioration and acute needs
- monitoring and treat long-term conditions including palliative and end of life care

**KEY OUTCOME**

People with a learning disability will experience evidence-based care enabling equity of outcome.

**Right Time: People with learning disabilities are more prone to co-morbidities and a wide range of additional physical and mental health problems when compared with the rest of the population. RNLDs will be accessible as part of the interdisciplinary team in a timely and proactive manner to:**

- monitor health and wellbeing as required
- facilitate access to assessment, diagnosis and treatment (where indicated) ensuring reasonable adjustments and reducing the risk of diagnostic overshadowing (scheduled and unscheduled)
- co-ordinate, progress and/or navigate clinical care smoothly as the patient moves between different parts of the health and social care system across the lifespan

**KEY OUTCOME**

People with a learning disability will experience timely intervention and co-ordinated care, involving RNLDs when required.



**Right Person: RNLDs will have appropriate skills, knowledge and behaviours, and working within their scope and sphere of practice and role, will support people with a learning disability to access services in the same way as the rest of the population. Undergraduate and postgraduate education will enable professional competencies and expertise which are transferable across:**

- Clinical roles
- Operational roles
- Education and Clinical Academic Roles

**KEY OUTCOME**

People with a learning disability will receive evidence-based interventions from clinicians with appropriate skills and level of expertise, working as part of the wider interdisciplinary team.

**Right Place: RNLDs will work across the HSC system to support people with a learning disability access services in the same way as the rest of the population, and to deliver specialist learning disability services. To ensure expertise at every point within the health and social care system RNLDs will be available in:**

- Community settings including Primary Care
- Secondary and Hospital Care settings
- Specialist Learning Disability Services
- Supportive/navigation roles, such as liaison roles

**KEY OUTCOME**

People with a learning disability will receive assessment and where indicated intervention from an RNLD in an environment most appropriate to meet their needs.

Citizenship

Social Inclusion

Empowerment

Working together

Individual Support



## Right Care:

RNLDs will provide evidence-based, person-centred care across the lifespan using a biopsychosocial model to:

- promote wellness and prevent ill health,
- support self-management, anticipatory care and early intervention,
- respond to deterioration and acute needs,
- monitoring and treat long-term conditions including palliative and end of life care.

**Key outcome: People with a learning disability will experience evidence-based care enabling equity of outcome.**

### PILLAR 1

#### **Promoting wellness and prevention of ill health**

People living with a learning disability have the right to access preventative health and social care, thus nurturing health, mind and soul to live as healthily and well as possible. RNLDs have significant contribution in a liaison or specialist role promoting wellness and prevention of physical, mental and social well-being decline.

### PILLAR 2

#### **Support self-management, anticipatory care and early intervention**

Person-centred care plans should identify potential physical, mental and social issues in advance of someone becoming unwell and secondary prevention (targeting those at risk). RNLD expertise can enable timely health screening, reflecting individual's wishes to enable early identification and agreed interventions that will maintain wellness.

### PILLAR 3

#### **Respond to deterioration and acute needs**

If people living with a learning disability become unwell with physical or mental health issues, they should have access to timely assessment, treatment and interventions. Nurses working in primary, community, secondary care and acute hospital settings can respond to physical and mental health deterioration, supported as required by RNLDs either in a liaison or specialist role.

### PILLAR 4

#### **Provide monitoring, assessment and treatment of long-term conditions including palliative and end of life care**

The patterns of physical and mental health needs and morbidity for people with learning disabilities reflect a wide range of conditions, many of which could be prevented and/or effectively managed. Nurses in other services and RNLDs working in a liaison or specialist role as part of the interdisciplinary team can enable ongoing assessment, monitoring and treatment of long-term conditions including physical, mental health palliative and end of life care.



### **Right Time:**

People with learning disabilities are more prone to co-morbidities and a wide range of additional physical and mental health problems when compared with the rest of the population. RNLDs will be accessible as part of the interdisciplinary team in a timely and proactive manner to:

- monitor health and wellbeing as required
- facilitate access to assessment, diagnosis and treatment (where indicated) ensuring reasonable adjustments and reducing the risk of diagnostic overshadowing (scheduled and unscheduled)
- co-ordinate, progress and/or navigate clinical care smoothly as the patient moves between different parts of the health and social care system across the lifespan

**Key outcome: People with a learning disability will experience timely intervention and co-ordinated care, involving RNLDs when required.**



### **Right Person/Skills:**

RNLDs will have appropriate skills, knowledge and behaviours, and working within their scope and sphere of practice and role, will support people with a learning disability to access services in the same way as the rest of the population. Undergraduate and postgraduate education will enable professional competencies and expertise which are transferable across:

- Clinical roles
- Operational roles
- Education and Clinical Academic Roles

**Key outcome: People with a learning disability will receive evidence-based interventions from clinicians with appropriate skills and level of expertise, working as part of the wider interdisciplinary team.**





### **Right Place:**

RNLDs will work across the HSC system to support people with a learning disability access services in the same way as the rest of the population, and to deliver specialist learning disability services. To ensure expertise at every point within the health and social care system RNLDs will be available in:

- Community settings including Primary Care
- Secondary and Hospital Care settings
- Specialist Learning Disability Services
- Supportive/navigation roles, such as liaison roles

**Key outcome: People with a learning disability will receive assessment and where indicated intervention from an RNLD in an environment most appropriate to meet their needs.**

RNLDs will work across both inpatient and community settings providing:

- person centred assessment, diagnosis and therapeutic intervention
- comprehensive physical, mental health and neurodevelopmental assessment, treatment and intervention
- guidance and support, including ensuring reasonable adjustments in transition between organisational structures/services, to address the existing barriers for people with learning disabilities to improving their health
- education for other health care staff on interventions to meet the physical and mental health needs of people with a learning disability and those closest to them

Additionally, RNLDs have expertise and skills that are often used to identify and support the population of people with developmental needs. By integrating the RNLD role into specific services, either through liaison or embedding the role within the team:

- increases the capacity of the service to meet the nursing needs of people with a learning disability
- improves equity of access and equity of outcome for people with a learning disability through direct access to the same services and other members of the public
- supports the wider interdisciplinary team including social care colleagues and nursing staff across all the other fields of practice through education and professional practice support

### **The Interdisciplinary Team**

People with a learning disability require access to different services according to their abilities and needs and this should be provided in a timely and co-ordinated way. The focus of the diagram is the person at the centre and the team providing healthcare and other support that they should have equitable access to. All those named in the concentric wheels should have clear, direct lines of access to each other, including out of hours, and know when to seek each other's input to meet that person's needs





# Recommendations

In May 2023, the CNO for NI launched the Vision for the professions of Nursing and Midwifery. This included strengthening the focus on four strategic areas of work:

- Workforce/Workload Planning
- Education and Training
- Quality Assurance Framework
- Career Pathways

the recommendations below aim to align to the CNO vision for the future of the professions in NI and establish a sustainable model for RNLD nursing which will provide: *the right staff, with the right skills, in the right place* based on local population learning disability healthcare.



## SHAPING OUR FUTURE

A Vision for Nursing and Midwifery  
in Northern Ireland: 2023 – 2028



Our strategic plan to deliver S.A.F.E care through...

**S**  
**A**  
**F**  
**E**

Stabilising the nursing and midwifery workforce, therefore ensuring safe and effective care.

Assuring the public and the workforce of the effectiveness and impact of person-centred nursing and midwifery care.

Facilitating the adoption of a population health approach across nursing and midwifery practice resulting in improved outcomes for people across the lifespan.

Enabling the transformation of our health service both digitally and through enhancing the roles of nurses and midwives within and across a wide range of services.

## Equity of Access and Outcome

### 1. Workforce/Workload Planning (aligned to the delivering care policy framework)

#### Workforce/workload Planning

Support on-going evidence-based workforce planning that ensures the availability of a suitably skilled and resourced registrant workforce.

- 1 Establish workforce models that support RNLD employment in areas that support continuity of care in: acute and community liaison roles and where relevant in general and specialist services e.g. mental health
- 2 Agree future RNLD roles across the 4 pillars of care and treatment outlined within the proposed model, that lead to evidence based, person-centred positive outcomes for the health and well-being of people with a learning disability across their life span
- 3 Establish robust arrangements to collect data that provides and accurate information on the number abilities and health needs of people with a learning disability in NI to inform workforce planning and workload allocation
- 4 Implement a phased plan to remove all 'parallel' or 'alternative' services provided by RNLDs/CNLDs that require people with a learning disability to follow a different pathway to access general services and do not provide equity of access/outcomes
- 5 Establish robust arrangements to collect and analyse data on the roles, age profile and workplaces including employment destination/s of RNLDs in Northern Ireland
- 6 Proactively recruit RNLDs into funded RNLD specified posts to ensure the right people with the right skills are providing the right care in the right place
- 7 Develop systems to facilitate all health and social care staff to access RNLDs for advice and support when designing and implementing reasonable adjustments to support equitable healthcare provision for people with a learning disability
- 8 Ensure all proposed service developments involving RNLDs clearly relate to DoH strategic nursing priorities, consistent with the service principles with Equal Lives (DHSSPS, 2005) and developed with oversight of the Director of Nursing
- 9 Develop processes to ensure all registered nurses working in mainstream and specialist services have access and opportunities to acquire the required knowledge to care for a person with a learning disability

## 2. Education and Training

### Education and Training

Ensure RNLDs have equitable access to post graduate education to support the delivery of safe and effective person-centred care, and RNLD professional development throughout their career.

- 1 Ensure through the education commissioning process RNLDs have access to a range of education programmes that supports the delivery of safe effective care, provides professional development and enables transformation of services
- 2 Provide post registration education and skills development required to ensure RNLDs use language within all nursing assessments, person centred care plans and evaluations that demonstrate outcomes focused approach to interventions
- 3 Review models of RNLD pre-registration education and provision to incorporate a range of hybrid learning approaches and opportunities for return to practice
- 4 Establish education programmes to support conversion from other fields of practice
- 5 Review and support access to practice learning experiences, including non-traditional settings that reflect the future RNLD role through effective collaboration of HSC Trusts, independent Provider Organisations and Higher Education Institutions (HEIs)
- 6 Develop processes to ensure all registered nurses working in general and specialist services across settings have access and opportunities to acquire the required knowledge and skills to care for a person with a learning disability
- 7 Develop a Northern Ireland marketing campaign to raise awareness and profile of nursing careers in Learning Disabilities
- 8 Explore opportunities and challenges to widen access to pre-registration learning disability programme for existing health and social care workforce e.g. Band 2-4 staff

### 3. Quality Assurance Framework

#### Quality Assurance Framework

Establish structures and processes that provide robust governance, professional leadership, accountability and quality assurance for RNLD services and demonstrate impact on outcomes for people who have a learning disability.

1

Establish a regional governance model to ensure professional supervision and support that enables person centred care and compassionate workplace cultures where RNLDs can thrive

2

Undertake an in-depth analysis of all reports of adverse and serious adverse incidents involving people with a learning disability within HSC Trusts or services commissioned by HSC Trusts in Northern Ireland

3

Employ systems to capture information about the healthcare experience of people with a learning disability to inform learning and improvement

4

Establish robust arrangements to collect data that identifies the impact of all population health outcomes for people with a learning disability

5

Develop outcome focused assurance systems that demonstrate the impact of evidence-based nursing assessment e.g. long-term conditions and co-morbidities, avoidable hospital admissions, harm and avoidable harm/deaths

6

Develop a dashboard for assurance and improvement related to quintuple aim indicators: workforce, safety/quality, experience, equity, value for money and population health

## 4. Career Pathways

---

### Career Pathways

Ensure career pathways enable RNLDs to develop the necessary knowledge, skills, confidence and leadership required to enable people with a learning disability to have equity of access and outcomes from RNLDs working in primary and community, secondary and hospital care structures.

- 1 Develop a RNLD career pathway taking into consideration the future model for RNLD services that provide regionally agreed job titles, job descriptions, bandings for all RNLD posts across HSC Trusts in Northern Ireland (endorsed by Directors of Nursing)  
.....
- 2 Develop career pathways to enable RNLDs to access leadership positions and deliver person centred care and expertise across the 4 pillars of practice across the life span for a person with a learning disability as outlined in the RNLD model  
.....
- 3 Develop and embed a regionally agreed preceptorship supporting transition to employment, complemented with a learning and development framework to provide the range of competencies and proficiencies required for rewarding career across: clinical practice, operational roles and research and development  
.....
- 4 Ensure the career pathway incorporates development needs of staff working in Band 2-4 roles

## Outcomes for people with a Learning Disability

Implementation of the RNLD model to support to people with learning disabilities will deliver the provision of nursing care that is underpinned by a population health approach, support equitable access to person-centred outcomes focused care and ensure care is delivered by a suitably skilled and resources nursing workforce providing the right care at the right time in the right place - to enable people a learning disability to live the healthiest life possible

***The full report Equity of Access and Outcome: The future role of RNLDs in supporting people with learning disabilities to achieve the best health possible (DOH 2024)*** provides further information on the model and how and why it was developed. For further information please contact the Chief Officer Group at the Dept of Health, Northern Ireland.