

# **National Guidance and Standards for the Health Equality Framework (HEF+) in adults Learning Disability services**

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## Acknowledgment

The **Health Equality Framework+ (HEF+)** is an outcome measure endorsed by the **Welsh Government** and implemented across Wales by **Health Boards' Specialised Learning Disability services**.



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## Equality and Health Inequalities Statement for people with a Learning Disability in Wales

In Wales, we recognise people with a learning disability continue to experience avoidable and unjust health inequalities and reduced life expectancy. We are committed to delivering a fairer, safer, and high-quality health and care system promoting equity and tackling the barriers which can prevent people with a learning disability accessing and receiving timely, person-centred, and equitable services.

## Table of contents

<b>1. Introduction</b>	<b>4</b>
<b>2. Background</b>	<b>4</b>
<b>3. Introduction to Wales</b>	<b>5</b>
<b>4. Principles and values</b>	<b>5</b>
<b>5. National Guidance and Standards for the Health Equality Framework (HEF+)</b>	<b>7</b>
<b>6. Eligibility and application</b>	<b>7</b>
<b>6.2 Specialised Learning Disability Services</b>	<b>8</b>
<b>6.3 Multidisciplinary Teams</b>	<b>8</b>
<b>6.4 When is the HEF+ required?</b>	<b>8</b>
<b>7. Standards, measurements, and metrics</b>	<b>11</b>
<b>8. References</b>	<b>13</b>

## 1. Introduction

Central to current cross-governmental strategy is health and well-being, with a key priority being reducing health inequalities and avoidable deaths in Wales for people with a learning disability (Welsh Government, 2022).

The Health Equality Framework+ (HEF+) is the only validated outcome measure tool based on the determinants of health inequalities in the United Kingdom (UK) designed to identify and address health inequalities for adults with a learning disability (National Development Team for Inclusion, 2025). It is comprehensive in its design and reflects the inequalities in society such as employment, housing, isolation, disability, communication, and service barriers.

National Institute for Health and Care Excellence (NICE) (2019a, 2019b) recognise the role of standards in practice as enablers for quality improvement, quality assurance and monitoring and influencing commissioning (NICE, 2023).

Health inequalities are avoidable, unfair, and rooted deeply in our health and care system (Kings Fund, 2025). The purpose of these National Health Equality Framework (HEF+) (Adults) Standards for Wales is to enable Specialised Learning Disability services to recognise and tackle these health inequalities for people with a learning disability across health and social care. To work in partnership with people with a learning disability, their families, third sector, social care and the wider health care system to prevent avoidable and premature death, improve health outcomes and experiences in care for people with a learning disability.

## 2. Background

The Health Equalities Framework+ (HEF+) was first developed in England in 2013 to address growing concerns about the persistent and avoidable health inequalities experienced by people with learning disabilities. At the time, it was evident that services lacked accountability and clear standards for delivering care to this population. There was no consistent approach for capturing or comparing the impact of services or measuring improvements in health outcomes for people with learning disabilities across England (Atkins et al., 2013).

HEF+ for adults was updated in 2016 and in 2017 Children & Young People with Learning Disabilities Health Equality Framework was further developed (Atkins et al., 2017)

### 3. Introduction to Wales

Adults with a learning disability in Wales, as in England, continue to experience significant health inequalities, including disproportionate levels of premature mortality and poorer health outcomes when compared with the general population. To support a systematic and evidence-based response to these inequalities, the Health Equality Framework+ (HEF+) was introduced in Wales in 2015 through the 1000 Lives programme. The HEF+ provides a structured approach to identifying, measuring, and reducing the impact of health determinants that contribute to these unequal outcomes.

Health Equalities Framework+ aligns with the Outcome Measurement in Wales project which is a core element of the Welsh Government Mental Health Core Data Set (Performance and Improvement, 2025). This programme aims to ensure all Learning Disability and Mental Health services routinely use validated outcome measures to inform and strengthen practice. Embedding outcome measurement supports a more consistent person-centred approach whilst improving quality and effectiveness of care.

### 4. Principles and values

The HEF+ is an evidence-based outcome measure that focuses on the prevention and reduction of health inequalities and identifies key factors contributing to those inequalities for adults with a learning disability (Emerson & Baines, 2010; Emerson et al., 2011).

Central to the HEF+ is co-production, a partnership of practitioner/ services and adults with a learning disability and their families/ carers.

This practice- focused outcome measure ensures accountability and enables Specialised Learning Disability services to:

#### **For the person with a learning disability and their families/carers:**

- **Identify, monitor, and resolve health inequalities** which they may be experiencing.
- **Measure the impact of the services they are receiving and have receive.** Ensuring health outcomes are visible, meaningful, and sustainable for each person.

- **Enables evidence-based interventions and treatment** which support practitioners in their understanding and which health areas need the greatest attention.
- **Support the prioritisation of clinical decisions**, ensuring prioritisation of their health needs.
- **Ensure person-centred, timely and effective support care from health and care** services and tailored to their individual health needs.

**For services:**

- **Promote accountability and transparency** in how services reduce inequalities and improve outcomes.
- **Demonstrate impact of services** by evidencing how inequalities are reduced and outcomes improved.
- **Support service improvement** by informing service design and delivery based on real-world data; locally, regionally, and nationally.
- **Apply aggregated data to develop and sustain a highly skilled workforce**, enabling teams and services to better understand, anticipate and respond to population needs and tailor services accordingly.
- **Enable local, regional, and national comparisons** of service effectiveness and outcomes.
- **Informed evidenced- based policy and strategy service development** to ensure decisions are reflected in best available.

## 5. National Guidance and Standards for the Health Equality Framework (HEF+)

Reducing health inequalities for adults with a learning disability must be central to all services in Wales. Using the HEF+ enables services to proactively demonstrate the impact of the known health determinants for adults with a learning disability experience and how effective their support and interventions have been in addressing the impact of these (Atkins., et al., 2013).

National Guidance and Standards for the Health Equality Framework (HEF+) aim to provide a consistent, accountable, and equitable service delivery of the HEF+ for all Health Board Specialised Learning Disability services in Wales.

It will set out what is considered good practice in the implementation and use of the HEF+. It is acknowledged each Health Board Specialised Learning Disability service will have their own local processes and legislative requirement. However, National Guidance and Standards for the Health Equality Framework (HEF+) will define the expected minimal level of implementation and use of the HEF+ in Wales.

This will enable all Specialised Learning Disability services in Wales to demonstrate a high quality and equitable service, with a clear focus on reducing health inequalities and improved health outcomes and well-being. This will enable adults with a learning disability in Wales to have a good understanding of what they can expect and the intended health outcomes when receiving support and treatment from Specialised Learning Disability services in Wales.

## 6. Eligibility and application

**This section provides guidance to its application in practice for Specialised Learning Disability services.**

It is important to have national guidance and standards, as these ensure a consistent, effective, and equitable healthcare service delivery across Wales. Adults with a learning disability are among those most likely to experience significant health inequalities and therefore benefit from the support and treatment provided by Specialised Learning Disability Services. This approach enables Specialised Learning Disability Services to identify health inequalities, prioritise decision-making, and monitor impact and progress at individual, population, and regional levels. This helps safeguard care and treatment are evidence-based and data-driven, with information that is relevant, dependable,

meaningful, and capable of improving health outcomes for people with a learning disability in Wales. For the person it ensures the support and treatment received remain person-centred and genuinely beneficial.

## **6.2 Specialised Learning Disability Services**

Each Health Board in Wales has its own Specialised Learning Disability service which operates a defined referral pathway and sets out how adults with a learning disability enter the service. Each service has its own infrastructure, which may include Community Learning Disability Teams (CLDT), Primary Care Learning Disability Health Liaison Team, Acute Liaison Teams, Specialist Behaviour Teams, Intensive Support Teams, and Specialist Learning Disability in-patient (acute and residential) provision. Together, these different services form a coordinated approach to provide a responsive, timely and tailored service for the person with a learning disability.

Once an individual enters the service and is accepted, they are added to the appropriate service caseload. Members of the multidisciplinary team (MDT) are then allocated according to the person's identified health needs. Individuals may move between services or receive input from more than one specialist service simultaneously. In such cases, a single MDT member, often from the Community Learning Disability Team (CLDT) assumes the lead role and coordinates the delivery of care to ensure a coherent and integrated approach.

## **6.3 Multidisciplinary Teams**

The purpose of using the HEF+ within an MDT is to promote a shared understanding of a person's needs and to support a consistent, evidence-informed approach to identifying and delivering interventions and treatment. By drawing on the collective expertise of the MDT, the HEF+ enables a holistic, person-centred assessment that considers the full range of factors influencing health and wellbeing for people with a learning disability.

## **6.4 When is HEF+ required?**

Adults who enter the service and are accepted onto the caseload within Specialist Learning Disability Services will receive a HEF+ assessment that reflects their circumstances/ situation and level of need at the time of acceptance. HEF+ to be completed within four weeks of acceptance onto the caseload.

The intention of the HEF+ is not to replace clinical assessment tools or discipline-specific outcome measures. Instead, it is designed to complement them by demonstrating impact and meaningful change for the individual through a collective, whole-system perspective.

Implementation of the HEF+ currently varies across Health Boards in Wales. The purpose of this guidance and the accompanying standards is not to prescribe clinical practice, but to provide a clear structure and a consistent framework to support each Health Board in taking forward the effective and sustainable use of the HEF+.

For the purposes of this guidance and standard, Specialist Learning Disability services include Community Learning Disability teams and Specialist Learning Disability inpatient provision. Other services such, Primary Care Learning Disability Health Liaison Team, Acute Liaison Teams, Specialist Behaviour Teams, Intensive Support Teams are not considered. However, the input of other Specialised Learning Disability services to a HEF+ assessment might be appropriate and crucial where someone is known or receiving care and intervention to more than CLDT or Learning Disability in-patient provision.

Adults who are discharged following completion of active involvement from a Specialist Learning Disability service to have a HEF+ assessment completed reflecting their situation at the time of discharge. Discharges can include transfers to other specialist learning disability services across Wales but do not include the deaths of patients. A HEF+ to be completed at the time of discharge.

Between acceptance and discharge, progress to be collected at key stages in a person's healthcare journey. Clinical judgement is required as to when an updated HEF+ assessment would help describe the impact of support so far, or when it would help guide future interventions. This decision is made by the MDT and is based on the person's health needs. Suggestions to follow.

As standard practice it may be necessary to allocate a lead. This should be the practitioner or service who is most likely to remain involved with the person, regardless of which Specialised Learning Disability service is providing support.

### **Key stages:**

- **Baseline assessment:** Following acceptance onto the Specialised Learning Disability Service caseload, a member of the MDT will be allocated to lead on the completion of the HEF+. Referrals may involve one or multiple MDT professionals. Ideally, the baseline HEF+ should be completed at the point of assessment by each MDT member involved in the person's care. HEF+ to be completed collectively. Each assigned MDT professional will undertake and document the assessments relevant to their discipline—for example, nursing staff will complete the HEF+ in conjunction with their nursing assessment process. All baseline

assessments should be completed within the first four weeks of the individual being accepted into the service.

- **Ongoing support:** Follow-up HEF+ should be completed periodically and clinical lead and at a minimum yearly. Its intention is to monitor, direct and prioritise care delivery and design for individuals, populations, or regions. To be adaptable and flexible to address and health inequalities.
- **Follow-up HEF+:** To be completed when there is a change in **situation/ circumstance**, however this list is not exhaustive and should be used as a guide to support clinical judgement and decision making. A change in a person's situation or circumstances may include any of the following:
  - Deterioration in physical health.
  - Deterioration in mental health.
  - Admission to hospital, a residential setting, or supported living.
  - Reduction in support available to the person.
  - Increase in behaviours of concern.
  - Poor access to healthcare that is negatively affecting health and wellbeing.
  - Introduction of a new intervention.
  - Any other meaningful change in the individual's circumstances.
  - Referrals to additional services within the Health Board such a Specialist Learning Disability Service (Positive Support Teams) or Mental Health services (Inpatient services).
- **Annual review:** Annual reviews refer to the routine monitoring of a person's physical and/or mental health needs to ensure that the care they receive continues to meet their assessed level of need. This applies whether the person is receiving support under the Mental Health (Wales) Measure 2010, which requires an individual Care and Treatment Plan (CTP), or whether they are receiving NHS Continuing Healthcare (CHC) funding. The person may receive full CHC or are jointly funded and are assigned to the Specialist Learning disability services. As part of these processes the HEF+ to be completed alongside the appropriate statutory process, and at least one annual review must take place every year.
- **Living out of area:** Where a person is care managed by nursing and living out of area, and the local Community Learning Disability Team (CLDT) Nursing team can remain involved. The Health Board may maintain the HEF+ or refer to the local Health Board/ Trust to complete and a summary can be requested by the referring Health Board.
- **At discharge:** To evaluate outcomes and inform transition planning.

There are occasions when adults with a learning disability are referred to Community Learning Disability Teams for discrete one-off interventions such as funded placement review, 117 meetings, dementia baselines, eligibility criteria, OT equipment or solely for an epilepsy review. The minimal expectation for completion of the HEF+ will be that the adult has been accepted onto a specialised Learning Disability caseload and actively receiving intervention and treatment. Each Specialised Learning Disability service may wish to broaden the criteria to include activities as described above.

## 7. Standards, measurement, and metrics

Welsh Government (2022) continues to support the application of the HEF+ across Wales through the All-Wales Learning Disability Assurance Matrix (Performance and Improvement, 2026). The recommendations arising from the Learning Disability Metric in October 2025 (Performance and Improvement, 2026), and fully endorsed by Welsh Government, focus on four priority areas— one of which is the HEF+ Outcome Measure.

Metric: **Outcome Measures:** Number with a valid HEF.

To ensure alignment with the All-Wales Learning Disability Assurance Matrix, this guidance and standards document define a valid HEF+ as one that meets the requirements set out in the section **“When is HEF+ required?”**

Health Boards to continue to collect data to monitor and internally audit the following information:

- **Number of people with a learning disability accepted by adult Specialist Learning disability services** - This refers to the total number of people open to adult Specialist Learning Disability services regardless of which service is providing the support, and may include: CLDT, Specialist Behaviour Teams, Intensive Support Teams, and inpatient services.
- **Number of people with a learning disability accepted by adult Specialised Learning Disability Caseloads which meets the criteria in this guidance and standard ‘When is HEF+ required?’** – This dataset ensures consistency with the national requirement as set by Welsh Government to monitor the number of people for whom a valid HEF+ should be completed.

The Health Equality Framework (HEF) is an outcomes-focused tool based on the determinants of health inequalities. It is designed to support people with

learning disabilities and their families to understand the impact and effectiveness of the services they receive.

Specialist Learning Disability Services across Wales are encouraged to consider how aggregated HEF+ data can be used meaningfully to inform and guide the design and delivery of services. When analysed locally, regionally, or nationally, this data provides valuable insight into patterns of need, areas of inequality, and the effectiveness of interventions and services.

Aggregated HEF+ data can be used across caseloads, teams, and services to support service review, planning, and commissioning. Data can also be filtered to understand needs at individual, population, or regional levels, enabling Health Boards to develop targeted, evidence-informed improvement activity.

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