### **Adult Social Care Scrutiny Commission Briefing Note**

#### 15TH FEBRUARY 2016

Title of the report:	Implementing 'Building the right support – A national plan to develop community services and close inpatient facilities' for people with learning disabilities and Autism who display behaviour that challenges.
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## Purpose of briefing note:

- To present an overview of the Transforming Care Partnership and the work that is taking place locally to support this.
- To highlight key points from recently released guidance underpinning to this work.
- To broadly describe pathways that are in development to support Transforming Care

## **Background:**

- 1. Following on from the Winterbourne view Concordat, In October 2015 NHS England, ADASS and the LGA published a Transforming Care national implementation plan and associated service model "Building the Right Support".
- 2. Building the Right Support is a national plan to develop community services and close inpatient facilities for people with a learning disability and/or autism who display behaviour that challenges, including those with a mental health condition.
- 3. The plan outlines 3 key expectations from Commissioners; implementing enhanced community provision, reducing inpatient capacity, and rolling out care and treatment reviews in line with published policy.
- 4. The national plan described the expectation of the development of area based Transforming Care Partnerships consisting of CCGs, NHS England's specialised commissioners and local authorities to work together to develop and implement local plans. Our Partnership includes Leicester City Council, Leicestershire County Council, Rutland County Council and the 3 Clinical Commissioning Groups that cover this sub region.
- 5. To support local areas with transitional costs, NHS England will make available up to £30 million of transformation funding over three years, with national funding conditional on match-funding from local commissioners. In addition to this, £15 million capital funding will be made available over three years. Transformational funding will be awarded based on a bidding process.

#### **Current Situation:**

- 1. The draft LLR plan was submitted to NHSE on the 8<sup>th</sup> February 2016 and the final plan is due to be submitted on 11<sup>th</sup> April 2016.
- 2. Key outcomes identified within the plan are:
  - Strengthen community crisis response services and reduce use of commissioned inpatient beds
  - Increase community based accommodation

- Develop personal health budgets and integrated budgets offer
- Redesign Short break provision
- Strengthen the Autism pathway
- Develop the workforce
- 3. The plan is LLR wide, but a group continues to meet in the City to ensure we have a full understanding of our cohort, and to ensure that plans for those individuals either in hospital or at risk of admission are progressing either to discharge them or avoid admission.
- 4. The national plan outlined key planning assumptions including the expectation that no area should need more inpatient capacity than is necessary to cater for:
  - 10-15 inpatients in CCG commissioned beds (such as those in assessment and treatment units) per million population;
  - 20-25 inpatients in NHS England-commissioned beds (such as those in low, medium or high-secure units) per million population
- 5. A total of £1.2 million has been requested from the national programme to support the implementation of the plan across LLR.
- 6. A meeting between health and social care professionals is being held on 4<sup>th</sup> March 2016 to agree pathways and protocols to support individuals and their families who come under the umbrella of Transforming Care.
- 7. Work is being undertaken to learn lessons about what could/can have been done differently to avoid admission and understand the pathway that led to admission.

## **The Transforming Care Plan**

- 1. We plan to reduce the inpatient beds on the local Assessment and Treatment Unit, The Agnes Unit, from the current level of 16 to12 beds by March 2019.
- 2. To support this, work has already begun to strengthen community based admission avoidance services and to target Care and Treatment Review (CTR's) for both inpatients and those deemed at risk of admission.
- 3. The plans include:
  - a) Develop an "Admissions Avoidance" register that identifies both adults and young people who may be at risk of admission and require additional support or intervention to maintain their current arrangements.
  - b) Enhance the Outreach Support Team based in LPT from a 5 day to 7 day a week service. The team currently comprises nurses and will become a multi-disciplinary team to aid speedier discharge and preventing admissions.
  - c) Develop Step Through facilities to offer intensive support that is tapered over a 6 month period as people are transitioned out of hospital and into the community. The first service went live in January of this year.
  - d) Reduce the beds on the Agnes Unit from 16 to 12 beds. This has been deemed clinically safe by clinicians.
  - e) Scope the development of a crisis service as a responsive and time limited means of avoiding residential care and hospital admission.
  - f) Redesign short break (respite) services that support carers to make them more flexible, easier to access and more cost effective
  - g) Commission voluntary and community groups to provide support around physical health and wellbeing alongside the health facilitators.
  - h) Develop a CAMHS outreach service to support young people and their families in the community.

- i) Expand the Specialist Autism Service to provide more ongoing support pre and post diagnosis
- j) Increase the take up of Personal Budgets across Health and Social Care to better meet the needs of groups that are less engaged with current services.

# **Actions required by ASC Scrutiny Commission:**

- 1. To Note progress against the expectations set out by NHS Engalnd
- 2. To **NOTE** the Pathways that are in development to avoid admission and offer enhanced support to people in the community.