Surrey Joint Learning Disability and Autism Commissioning Strategy

Including the joint transforming care plan
Surrey Learning Disability and Autism Commissioning Strategy

Valuing People: Surrey Learning Disability and Autism Strategy 2016-20

PURPOSE

Surrey’s Learning Disability and Autism Partnership Boards have come together, so that people with a learning disability and/or autism can have a voice, be safe, be informed, remain healthy and confident to be part of their community.

I’PRINCIPLES

- I have choice and control over my care.
- I live in the community with support from my family and carers.
- I have a fulfilling and purposeful everyday life.
- I get good care from all health services.
- I can access extra health and social care support when needed.
- I am supported to stay safe.

Vision Statement

People with learning disabilities and/or autism have the right to the same opportunities as anyone else to live satisfying and valued lives. They should be able to have a place to live, to be involved in the design and delivery of the support they receive.

Context

In Surrey there are:
- 5,700 children with learning disabilities and 2,700 with autism, of whom
- 647 are 10-17 year olds with learning disabilities and 98 with autism
- 21,400 adults 18+ with learning disabilities and 8,021 with autism of whom
- 4510 adults with learning disability and 2014 with autism are over 65

Of these:
- We are aware of 343 young people aged 18-17 identified as likely to be eligible for adult social care – of whom 98 have Autism
- 4,000 adults are in receipt of Adult Social Care aged 18 and over

Surrey needs to support these individuals in response to The Care Act and relevant legislation, through public, private and voluntary sectors, working together making best use of resources and working with their communities and neighbourhoods, recognising that demands are increasing while financial resources are decreasing.

Our Strategic Goals

1. Living My Life
   Individuals have a great start to life and are supported to live and age well having opportunities to contribute to their local community

To support this goal we will
1.1 Ensure people are supported to participate in purposeful activity including education, training, employment and volunteering.
1.2 Ensure carers have their needs identified and met to help maintain their caring role.
1.3 Promote the use of personal budgets and health budgets to develop opportunities.
1.4 Work with District and Boroughs to promote inclusion in local communities.
1.5 Develop housing options with providers and the NHS through co-design.
1.6 Plan with providers for an appropriate skilled workforce.

2. Staying Healthy
   Individuals have the right support that enables them to stay well and receive the right care and treatment they need

To support this goal we will
1.1 Ensure that people are informed, supported and have access to annual health checks, screening and health promotion.
1.2 Ensure that everyone has access to good quality health services, which make reasonable adjustments to meet their needs.
1.3 Develop joined up health and social care providing seamless care and support.
1.4 Provide local responsive alternatives to admission to hospital.
1.5 Develop a skilled workforce to meet needs when individuals have complex needs.

3. Keeping Safe
   Individuals supported in both Surrey and out of county will experience quality services that are responsive to individuals’ needs keeping them safe delivering value for money

To support this goal we will
3.1 Work with friends, families and communities to prevent isolation and promote inclusive lives.
3.2 Ensure the community is educated to help stop discrimination and prejudice.
3.3 Ensure people have access to the right information, advice and advocacy to make informed choices about the support they need.
3.4 Ensure people are cared for and safeguarded in their local community.
3.5 Work with Police and Criminal Justice
Surrey Learning Disability and Autism Commissioning Strategy

VISION
People with learning disabilities and/or autism have the right to the same opportunities as anyone else to live satisfying and valued lives. They should be able to have a place to live and to be involved in the design and delivery of the support they receive.

PURPOSE
Surrey’s Learning Disability and Autism Partnership Boards working together, so that people with a learning disability and/or autism can have a voice, be safe, be informed, remain healthy and confident to be part of their community.

‘I’ PRINCIPLES
- I have choice and control over my care.
- I live in the community with support from my family and carers.
- I have a fulfilling and purposeful everyday life.
- I get good care from all health services.
- I can access extra health and social care support when needed.
- I am supported to stay safe.
Surrey Learning Disability and Autism Commissioning Strategy

Living My Life

Stay healthy

Keeping Safe
Surrey Learning Disability and Autism Commissioning Strategy

In Surrey there are:

- 5,700 children with learning disabilities of whom 647 are aged 16 to 17 years old.
- 2,700 children with autism, of whom 98 are aged 16 to 17 years old.
- 21,400 adults with learning disabilities, of whom 4510 are aged over 65.
- 8,921 adults with autism, of whom 2014 are aged over 65.

Surrey needs to support these individuals in response to The Care Act and relevant legislation.

We need to recognise that demands are increasing while the financial resources we have are decreasing.

Public, private and voluntary sectors need to work together with their communities and neighbourhoods, to make the best use of resources.

Of these people:

4,000 adults are currently in receipt of Adult Social Care. We are also aware of 343 young people aged 16 to 17 identified as likely to be eligible for adult social care, of whom 98 have Autism.
Our draft strategy for Surrey focuses on helping people to be part of their local community.

Other local strategies have informed this draft strategy for people with a learning disability and/or autism. These include the Surrey Carers Strategy, the Surrey Police Strategy and the Surrey Accommodation Strategy.

We want people to have the care and support they need at home

We want people to have a home that is right for them in their local community. People should have the care and support they need. If they need extra support because of their behaviour or a mental health problem they should have this extra support at home.

We do not want people to have to go to special hospitals for care and support.. If a person does need care and support away from their home we should help them to get the right treatment, and make sure they are able to move back home as soon as possible.

We want to help people to be active members of their local community

We want people to use the support and services that are for everyone in their local community.

We want to help everyone in the community to understand how to support and include people with a learning disability and/or autism.
Surrey Learning Disability and Autism Commissioning Strategy

I live in the community with support from my family and carers.

My care staff have good support and training.
I live in a home that is right for me. I have a tenancy agreement.
My family have support to help them care for me.

I feel safe at home and in my community.

I am involved in activities in my community.

I have support to communicate and have my say.

I have support to learn new skills, be more independent and find a job.

I get good care and support from health services.
Living my life

People have a great start to life, are supported to live and age well having opportunities to contribute to their local community.

To support this goal we will:

- Ensure people are supported to participate in purposeful activity including education, training, employment and volunteering.
- Ensure carers have their needs identified and met to help maintain their caring role.
- Promote the use of personal budgets and health budgets to develop opportunities.
- Work with District and Boroughs to promote inclusion in local communities.
- Develop housing options with providers and the NHS through co-design.
- Plan with providers for an appropriately skilled workforce.
Surrey Learning Disability and Autism Commissioning Strategy

Staying healthy

People have the right support that enables them to stay well and receive the right care and treatment they need.

To support this goal we will:

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- Ensure that everyone has access to good quality health services, which make reasonable adjustments to meet their needs.
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3. Keeping safe

People supported both in Surrey and out of county will experience quality services that are responsive to individuals’ needs keeping them safe delivering value for money.

To support this goal we will:

- Work with friends, families and communities to prevent isolation and promote inclusive lives.
- Ensure the community is educated to help stop discrimination and prejudice.
- Ensure people have access to the right information, advice and advocacy to make informed choices about the support they need.
- Ensure people are cared for and safeguarded in their local community
- Work with Police and Criminal Justice
Transforming care for people with learning disabilities and/or autism

Supporting people in Surrey with a learning disability and/or autism who display behaviour that challenges, including those with a mental health condition
Introduction

In February 2015 at a Public Accounts Committee hearing, NHS England committed to publishing a plan for closing some inpatient services for people with a learning disability and/or autism who display challenging behaviour.

NHS England then published the National Plan for building the right support and a Service Model in October 2015, jointly with the Association of Directors of Adult Social Services in England (ADASS) and the Local Government Association (LGA).
Transforming care for people with learning disabilities and/or autism

Making care better for children, young people and adults who have behaviours that challenge.

We need to help people to be more independent, and have better health and well-being.

We want to have better services in the community for people and close some special hospitals.
Since Winterbourne View Surrey has discharged 54 people from hospital. We know we have made lots of progress but we have much more to do.

The National Transformation Plan tells us how to make changes that will last. It’s about making services in the community better for people.
Transforming care for people with learning disabilities and/or autism

The national service model, jointly produced by NHS England/LGA/ADASS is the basis for change in Surrey, alongside our joint commissioning strategy.
Transforming care for people with learning disabilities and/or autism
Transforming care for people with learning disabilities and/or autism

Feedback from NHS England on our Local Transforming Care Plan.

<table>
<thead>
<tr>
<th>NHS E South East</th>
<th>Surrey</th>
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</table>
| 1 Mobilise communities
  *Governance and stakeholder* | |
| 1.1 Is the health and care economy clearly described? | Met |
| 1.2 Are the governance criteria (as set out in BRS) fully met? | Met |
| 1.3 Are stakeholder engagement arrangements clearly described? | Met |
| 1.4 Has the plan been co-produced with children, young people and adults with a learning disability and/or autism and families/carers? | Met |
| **Understanding the status quo**
  *Baseline assessment of needs and services* | |
| 2.1 Is the population/demographics clearly described? | Met |
| 2.2 Has current inpatient usage been clearly described? | Met |
| 2.3 Is the current care system clearly described? | Met |
| 2.4 Is the current estate clearly described including key challenges, and in relation to housing for individuals? | Met |
| 2.5 Is the case for change clearly described? | Met |
| 2.6 Are improvement priorities for the current model of care clearly described? | Met |
| 2.7 Current state: please see the ‘current state’ tab of the activity and finance template attached as an annex. | Met |

| 3 Develop your vision for the future
  *Vision, strategy and outcomes* | |
| 3.1 Are aspirations for 2018/19 clearly described? | Met |
| 3.2 How will the improvements (set out above) be measured in relation to the 3 domains: reduction of inpatient usage, quality of care and quality of life? | Met |
| 3.3 Are key principles for care and support to people with a learning disability and/or autism who display behaviour that challenges described? | Met |
| 3.4 Reduced reliance on inpatient services: please see the relevant tabs (LD patient projections and activity and finance) of the template attached as an annex. | Met |

| 4 Implementation planning
  *Proposed service changes (incl. pathway redesign and resettlement plans for long stay patients)* | |
| 4.1 Is the new model of care clearly described? | Met |
| 4.2 Is the plan for commissioning new services clearly described? | Met |
| 4.3 Is the plan for reducing and/or decommissioning services clearly described? | Met |
| 4.4 What existing services will change or operate in a different way? | Met |
| 4.5 Is the plan for encouraging the uptake of more personalised support packages clearly described? | Met |
| 4.6 What will care pathways look like? | Met |
| 4.7 Is the plan for people making the transition from children’s services to adult services clearly described? | Met |

| 4.8 Is the plan for commissioning services differently for children transitioning to adult services clearly described? | Met |
| 4.9 Is the plan for changes to the local estate/housing base clearly described? | Met |
| 4.10 Is the plan for ‘resettling’ people who have been in hospital for 5 or more years clearly described? | Met |
| 4.11 How does this transformation plan fit with other system plans and priorities? | Met |

| 5 Delivery
  *Plans need to include key milestone dates and a risk register* | |
| 5.1 Are the programmes of change/work streams needed to implement this plan clearly described? | Met |
| 5.2 Have programme leads and support been identified for each of these programmes? | Met |
| 5.3 Are the key milestones identified? – including milestones for when particular services will open/close? | Met |
| 5.4 Are the risks, assumptions, issues and dependencies clearly identified? | Met |
| 5.5 Are risk mitigations clearly identified? | Met |

| 6 Finances | |
| 6.1 Finances: please see the relevant tabs (activity and finance and transformation funding) of the template attached as an annex. | Not able to say |
### Transforming care for people with learning disabilities and/or autism

#### Who are we talking about in Surrey

<table>
<thead>
<tr>
<th>Cohort</th>
<th>In C</th>
<th>OoC</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. People with a learning disability and/or autism who have a mental health condition, such as severe anxiety, depression or a psychotic illness, and those people with personality disorders, which may result in them displaying behaviour that challenges.</td>
<td>4 NHS 5 CAMHS</td>
<td>1 NHS</td>
</tr>
<tr>
<td>2. People with an (often severe) learning disability and/ or autism who display self-injurious or aggressive behaviour, not related to severe mental ill-health, some of whom will have a specific neuro-developmental syndrome with often complex life-long health needs and where there may be an increased likelihood of displaying behaviour that challenges.</td>
<td>2 NHS 197 LA 67 CHC 8 PHB</td>
<td>2 NHS 81 LA 10 CHC 19 children</td>
</tr>
<tr>
<td>3. People with a learning disability and/or autism who display risky behaviours which may put themselves or others at risk and which could lead to contact with the criminal justice system (this could include things like fire-setting, abusive, aggressive or sexually inappropriate behaviour)</td>
<td></td>
<td>1 NHS</td>
</tr>
<tr>
<td>4. People with a learning disability and/or autism, often with lower level support needs, from disadvantaged backgrounds (e.g. social disadvantage, substance abuse, troubled family background), who display behaviour that challenges, including behaviours which may lead to contact with the criminal justice system.</td>
<td></td>
<td>1 NHS</td>
</tr>
<tr>
<td>5. Adults with a learning disability and/or autism who have a mental health condition or display behaviour that challenges who have been in inpatient settings for a very long period of time, having not been discharged when NHS campuses or long-stay hospitals were closed.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Children with Challenging behaviour placed in 52 week schools</td>
<td></td>
<td>Circa 17</td>
</tr>
</tbody>
</table>
Transforming care for people with learning disabilities and/or autism

The service model is structured around 9 principles seen from the point of view of a person with a learning disability and/or autism:

1. I have a good and meaningful everyday life.

2. My care and support is person-centred, planned, proactive and coordinated.

Future goal

- More people will have access to mainstream services.
- People with challenging behaviours will have access to supported employment services.
- People will have access to meaningful daytime services.
- Introduce support navigators through match funding proposals.
- Cultural shift from power within the organisations to the individuals and their families.
- The HCP team being increased with an integrated workforce to ensure people receive twice yearly CTRs.
I have choice and control over how my health and care needs are met.

- Continue to work with children and their families of children whose behaviours present as challenging
- Ensure people with Challenging Behaviour have access to Direct Payments
- Introduce a local offer for Personal Health budgets and integrated personal commissioning budgets for people with complex needs
- To engage with the voluntary sector to ensure a wide range of service provision.
- Ensure local advocacy is reaching those with challenging behaviour
My family and paid support and care staff get the help they need to support me to live in the community.

I have a choice about where I live and who I live with.

- Ensure that the early intervention programme is meeting the needs of children with challenging behaviours
- Ensure appropriate training available for families and paid staff
- Work with local strategic providers to develop short term alternative models of care.
- Develop a small group of strategic providers to meet the needs of people whose behaviours challenge.
- Ensure people with learning disabilities and/or autism with behaviours that challenge are explicit within market position statements
- Ensure Personal Health budgets can be used to contribute towards housing costs
- Joint working between commissioners and housing strategy colleagues to ensure strategic housing planning
Transforming care for people with learning disabilities and/or autism

- Ensure that people with a learning disability are offered an Annual Health Check
- Ensure that people have the option of a Health Action Plan
- Annual completion of the Green Light toolkit audit by mental health commissioners with action plans
- Care & support pathways within mainstream primary and secondary NHS services are meeting the needs of people with learning disabilities and/or autism with behaviours that challenge
- Ensure the availability of specialist integrated multi-disciplinary health and social care support in the community for people with a learning disability and/or autism, for all ages (including an intensive 24/7 function
- Interagency collaborative working between specialist and mainstream services
- Introduce a community forensic liaison role to help divert people ending up in forensic pathway and services.

I get good care and support from mainstream health services.

I can access specialist health and social care support in the community.
Transforming care for people with learning disabilities and/or autism

If I need it, I get support to stay out of trouble

If I am admitted for assessment and treatment in a hospital setting because my health needs can’t be met in the community, it is high-quality and I don’t stay there longer than I need to.

- Mainstream services aimed at preventing or reducing anti-social or ‘offending’ behaviour make adjustments to meet the needs of people with a learning disability and/or autism.
- Access to specialist health and social care support for people with a learning disability and/or autism who may be at risk of/have come into contact with the CJS.
- Hospital admissions are supported by a clear rationale of assessment and treatment.
- Services are as close to home as possible.
- All stakeholders are working together to ensure discharge planning processes start from the point of admission.
- Support for families and carers exists within commissioning frameworks.
Transforming care for people with learning disabilities and/or autism

Surrey’s Local Transforming Care Plan
Our eight workstreams

We have agreed eight key areas of work we need to do:

1. Prevention, Information, Advice and Advocacy
2. Workforce Development
3. Quality
4. Funding
5. Estates
6. Service development
7. Community Positive Behavioural Support Network
8. 0-25 year olds (SEND)
Transforming care for people with learning disabilities and/or autism

Surrey’s Local Transforming Care Plan
Our eight workstreams

1. Prevention, Information, Advice and Advocacy

Lead people: Mary Hendrick and Tom Moore.

Key milestones:

- Develop information in accessible formats to facilitate better engagement within universal services.
- Develop communications plans.
- Develop information sharing structure.
2. Workforce Development

**Lead people:** Sonya Sellar and Hannah Dwight.

**Key milestones:**

- Project Terms of Reference drafted and agreed.
- Commissioning parties agree budget and authorise go-ahead.
- Project Manager appointed and project underway.
3. **Quality**

**Lead person:** Chris Hastings.

**Key milestones:**

- Surrey People Standards drafted.

- Surrey People Standards signed off by all stakeholder groups.

- Surrey People Standards rolled out.
4. Funding

Lead people: Jo Poynter, Dianne Woods, Paul Goodwin and Martin Jacobs.

Key milestones:

• Pooled commissioning budget

• Surrey Cost and Pricing Model and benchmarks developed and agreed.

• New placements priced and costed with Surrey Cost and Pricing model.

• Existing placements re-costed with Surrey Cost and Pricing model.
5. Estates

*Lead person:* Andrew Price.

**Key milestones:**

- Agree plan of how accommodation needs of priority people will be met.
- Accommodation developed by providers to meet needs.
Transforming care for people with learning disabilities and/or autism

Surrey’s Local Transforming Care Plan
Our eight workstreams

6. Service Development

**Lead people:** Lead link commissioners.

**Key milestones:**

- Priority people defined.
- Assessments complete.
- Providers identified and engaged.
- New services specified.
- New services operational.
- People resettled through a detailed, informative and inclusive process.
Transforming care for people with learning disabilities and/or autism

Surrey’s Local Transforming Care Plan
Our eight workstreams

7. Community Positive Behavioural Support Network (CPBSN)

Lead person: Tom Moore.

Key milestones:

- CPBST specified.
- Detailed design of CPBST complete.
- CPBST operational.
8. 0-25 year olds (SEND)

Lead person: Frank Offer.

Key milestones:

- Transform the customer experience
- Rebuild the system around the customer
- Reshape the SEND local offer
- Develop inclusive practice.