DECISION-MAKER:		HEALTH AND WELLBEING BOARD				
SUBJECT:		SOUTHAMPTON CITY POLICY STATEMENT FOR WORKING WITH CHILDREN AND ADULTS WITH LEARNING DISABILITIES WHOSE CARERS AND/OR SERVICES ARE CHALLENGED BY THEIR BEHAVIOUR				
DATE OF DECISION:		30 th JULY 2014				
REPORT OF:		DIRECTOR QUALITY AND INTEGRATION, SOUTHAMPTON CITY COMMISSIONING, SOUTHAMPTON CITY COUNCIL				
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BRIEF SUMMARY

The Winterbourne View Final Report Transforming Care was released in November 2012. This followed an investigation into physical and psychological abuse suffered by people with learning disabilities and challenging behaviour at Winterbourne View private hospital. Transforming Care requires that by April 2014, each area will have a locally agreed joint plan to ensure high quality care and support services for all children, young people and adults with learning disabilities or autism and mental health conditions or behaviour described as challenging, in line with the model of good care set out within Transforming Care.

Good practice guidance on supporting people with learning disabilities, autism and those with behaviour which challenge emphasise:

- the responsibility of commissioners to ensure that services meet the needs of individuals, their families and carers;
- a focus on personalisation and prevention in social care;
- that commissioners should ensure services can deliver a high level of support and care to people with complex needs/challenging behaviour
- that services/support should be provided locally where possible.

Southampton's Joint Challenging Behaviour Policy Statement and associated action plan is our response to this requirement. To deliver this, the Challenging Behaviour Local Implementation Group was formed, which has representatives across Southampton's statutory and voluntary sector.

The Challenging Behaviour Policy Statement identifies areas of development that will

support commissioning intentions including ensuring systems are in place for preventative measures and early identification of those at risk, in order to avoid crisis. Also ensuring that those with the most complex needs, who are currently living within in-patient settings, are supported locally, with good quality provision. Service development will be tested within the commissioning cycle, to ensure improved individual outcomes.

In January 2014 Southampton's Health and Wellbeing Board was requested to support further consultation regarding the policy statement and for commissioners to scope and design the action plan. The action plan runs from 2014 – 2016. This is a live document and will be refreshed on an ongoing basis.

Information within the Southampton City Policy Statement for Working with Children and Adults with Learning Disabilities whose Carers and/or Services are Challenged by their Behaviour has been consulted on with various stakeholders across the city. Appendix 3 within the Policy Statement shows a summary of this consultation.

RECOMMENDATIONS:

- (i) Southampton Health and Wellbeing Board is requested to support the final Joint Commissioning Policy Statement for Working with Children and Adults with Learning Disabilities whose Carers and/or Services are Challenged by their Behaviour.
- (ii) Southampton Health and Wellbeing Board is requested to support the Joint Action Plan Working with Children and Adults with Learning Disabilities whose Carers and/or Services are Challenged by their Behaviour.

REASONS FOR REPORT RECOMMENDATIONS

1. As part of the governance arrangements outlined in the Winterbourne Concordat there is a requirement to gain Health and Wellbeing Board validation.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2. None. The Department of Health has indicated it expects Health and Wellbeing Boards to be confident that the right leadership and infrastructure is in place to secure delivery of the plan and reporting of the self-assessment required.

DETAIL (Including consultation carried out)

- The Challenging Behaviour LIG includes members from Health and Social Care across children's and adults' services. Throughout the process we have engaged with stakeholders including service users and their families/carers, Advocacy agencies, Solent NHS Trust, Southern Health Foundation Trust, Voluntary Sector and Housing.
- 4. The Policy Statement provides the city with a clear direction of travel within

it's vision, objectives and outcomes for the next five years in order to make necessary changes to support improvements in health and well-being for individuals who present behaviour that is challenging.

- 5. The key areas of priority for the policy include ensuring:
 - safeguarding systems are proactive, rather than reactive;
 - the safety of persons at risk by integrating strategies, policy systems and services within the framework of relevant legislation and promotion of human rights.
 - that prevention occurs in the context of person-centred support and personalisation, empowering individuals to make choices and supporting them to manage risks
 - that the health and social care system have robust quality monitoring in place
 - that information systems are capable of identifying and recording people with challenging behaviour across health, education and social care systems
 - there is comprehensive implementation across GP practices of annual physical health checks, with targeting of individuals at high risk, with access to expert opinion if needed.
 - that the outcomes for young people who present challenges are improved through the development of the 0-25 SEND Service
 - that plans are in place that meet the needs of people with learning disabilities who are ageing
- 6. The key areas for improvement (service gaps) include the following themes:
 - People living Out of Area
 - To develop supported living services for individuals currently living in inpatient care and residential care facilities, by implementing Complex LD Housing Business Case
 - Review how adults "at risk" due to challenging behaviour are monitored and supported through the Winterbourne at risk register, taking learning from children's services.
 - Access to meaningful activities
 - To improve the vocational educational opportunities for individuals and develop supported employment for individuals "at risk" due to challenging behaviour
 - To review day activities available to "at risk" individuals
 - Healthcare
 - To review the role of the Community Learning Disability Team and the Intensive Support Team
 - To ensure that all individuals at risk due to challenging behaviour have an annual health check, are supported to access all relevant screening programmes
 - To review how GP's are supported to assess, diagnose and treat individuals with highly complex needs, taking learning from children's services.
 - To review all physical intervention approaches to ensure that

individuals and cares are safe and well supported.

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- Housing supported by the Complex Housing Group
 - To strengthen partnership work with housing providers to ensure that suitable accommodation is available, to prevent crisis, reduce admissions to inpatient services and prevent placement in residential care out of area.
- Carers/siblings & Respite and short breaks
 - To ensure that carers and family siblings are well supported, have access to appropriate training and respite care is available.

Education

- To ensure that children and young people at risk are supported and special schools work in partnership with families.
- To consider pathways re residential provision for children within the city

Transition

- To implement Children and Young People Development Service (0 – 25 years) and ensure that individuals and families have access to specialist knowledge and skills to assess and manage behaviour that challenges.
- Workforce Development
 - To development and audit of a Good Practice Standards Checklist and develop a system wide workforce strategy.
- The Action Plan (Appendix 1) identifies how these areas will be addressed.

 Additionally, Southampton's Lifelong Autism Strategy 2012 2015 provides a strong outline of the City's need as well as a clear vision and action plan. Key areas for action aimed at improving the lives of children and adults with autism, including increasing awareness, ensuring access to diagnosis, improving access to services such as education and employment. The Strategy is not just about putting in place autism services but about enabling equal access to mainstream services, support and opportunities. This Strategy is currently being refreshed in line with the national strategy Think Autism.

RESOURCE IMPLICATIONS

Capital/Revenue

- 8. Within the Integrated Commissioning Unit (ICU) the Challenging Behaviour Action Plan will be implemented with ICU lead working across the system.
- 9. Evidence has shown that supporting people whose behaviour challenges with the correct model of care generates efficiencies.

Property/Other

10. None.

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

11. Autism Act 2009 Equality Act 2010

Other Legal Implications:

12. None.

POLICY FRAMEWORK IMPLICATIONS

13. LD Joint Health and Social Care Self-Assessment Framework (JHSCSAF)

Valuing People Now (2009)

Fulfilling and Rewarding Lives (National Adult Autism Strategy report (2010)

Think Autism (2014)

Transforming Care: A National Response to Winterbourne View Hospital Dept Health Final Report (2012)

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KEY DECISION? No

WARDS/COMMUNITIES AFFECTED:	All
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SUPPORTING DOCUMENTATION

Appendices

1.	Southampton City Challenging Behaviour Action Plan 2014 – 2016
2.	Southampton City Challenging Behaviour Policy Statement

Documents In Members' Rooms

1.	None
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Equality Impact Assessment

Do the implications/subject of the report require an Equality Impact	No
Assessment (EIA) to be carried out.	

Other Background Documents

Equality Impact Assessment and Other Background documents available for inspection at: Contact Kate Dench kate,dench@southampton.gov.uk

Title of Background Paper(s)

Relevant Paragraph of the Access to

Information Procedure Rules / Schedule

12A allowing document to be Exempt/Confidential (if applicable)

1.	The Winterbourne View Final Report – DH	
2.	The Concordat of Action – DH	

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