

# Introduction to the developing role of the Greater Manchester Specialist Support Team (SST)

Helen Carron, *Specialist Speech and Language Therapist*, Hannah Dickinson *Highly Specialist Occupational Therapist*

Team Manager: Vicky Dunn ([victoria.dunn@merseycare.nhs.uk](mailto:victoria.dunn@merseycare.nhs.uk)) Head of Community Services: Julia Anderson ([julia.anderson@merseycare.nhs.uk](mailto:julia.anderson@merseycare.nhs.uk))

## Who are we?

A multidisciplinary team of health professionals and support workers with specialist expertise and experience in Learning Disability, Autism, Mental Health and Forensic Services. Established April 2018, we are in the primary stages of development.

## What do we do?

We work with adults with a learning disability and/or autism who offend, are at risk of offending or who have complex challenging behaviours. We work closely with CLDTs and specialist ASD services to identify what additional support may be needed.



## The Greater Manchester landscape

- 12 CLDTs spread across 10 CCG areas and Local Authorities.
- Over 170 different care providers including residential, supported tenancy and independent living, primarily from the independent sector.
- Access to four CCG commissioned specialist beds for planned assessment and treatment.
- Pathway also includes regional Low and Medium Secure provision at Mersey Care Whalley.



## 'Let me go home!' *transition from hospital services to community living*

Ben is 45 years old. He has Autism, schizophrenia and a mild learning disability. He has lived in hospital settings for most of his adult life. This year he was discharged to a specialist residential service. A six month transition process took place where Ben was introduced to his new home and staff team with support from SST support workers overseen by a Specialist Nurse.

SST OT worked alongside Ben to assess his environment to support him to keep himself safe. This meant that when Ben felt distressed, if he harmed himself or if his home was damaged, the risk to Ben was reduced. At the same time, the OT worked with Ben to maintain and develop his independence skills as much as possible.

Ben's staff team identified his shouting of inappropriate comments to members of the public as a concern due to the potential for negative reactions from others. SST SLT worked with Ben to develop his social thinking skills to enable him to consider the potential impact of his behaviour whilst also supporting him to develop more positive ways of interacting with others in the community.

Ben has now been living in the community for six months. He is well known and liked in his local community and is planning a holiday with his support team.



## 'I want to stay in my house!' *Preventing hospital admission*

Sammie is a 34 year old lady with a moderate learning disability, Autism and a diagnosis of attachment disorder. She spent some years living in hospital but has been successfully living in the community in a specialist residential house for the past two years. Earlier this year Sammie was referred to SST after her behaviour began to cause concern to the staff team. Sammie's staff team were struggling to manage her severe self harming behaviour and physical aggression.

Initially SST nursing met with Sammie, her provider and CLDT to develop a contingency plan and risk management strategies, which included access to SST 24 hour intensive support. SST OT explored the complexity of Sammie's motivation to increase participation in meaningful occupation whilst SLT explored how this information was presented to her. SST support workers visited Sammie twice weekly to gather information on her occupational performance together whilst role modelling positive interaction under the direction of OT, SLT & Nursing. SST Psychology provided consultation to local CLDT to review formulation in the context of increasing risk behaviours. SST are continuing to support Sammie intensively together with provider staff with the provision of specialist training.