DEVELOPING BETTER COMMISSIONING FOR INDIVIDUALS WITH BEHAVIOUR THAT CHALLENGES SERVICES - A SCOPING EXERCISE

a research project funded by the Department of Health and carried out in collaboration with the Challenging Behaviour Foundation

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BACKGROUND

The revised Mansell Report identified a number of continuing problems faced by people with learning disabilities whose behaviour presents a challenge including break down of community placements, increasing use of out-of-area placements and the persistence of poor quality institutional solutions. The Valuing People Now delivery plan contained a commitment to a “scoping exercise to develop better commissioning for individuals with behaviour that challenges services”.

AIMS AND METHODS

- In-depth consultations with the families of six individuals with behaviour that challenges services aimed to provide an up-to-date picture of the outcomes of services for individuals and their families;
- Extended interviews with eight local authority and health commissioners sought to both identify obstacles to progress and consider the kinds of supports that might help in the process of local service development;
- As a scoping exercise the overall aim was to map out the issues “from a distance” and determine where future work was likely to be most useful.

FINDINGS

Family consultation

- Families reported a lack of expertise and capability in understanding and responding to challenging behaviour in local services. This was seen as an important factor in the use of out-of-area placements;
- Access to services was reported to be extremely difficult by families other than at times of crisis. As a result opportunities for crisis prevention were missed;
- Families reported a lack of support and training for themselves in their roles as carers, with often detrimental effects on their physical and mental health;
- A lack of information and training hampered the extent to which families could plan realistically, and hopefully, for the future;
- Families consistently reported not being included as essential partners in planning for their relatives;
- It was noted that all of the experiences reported by families have been commonly reported in the past and are well-documented in the professional and academic literature.
Commissioner interviews

- There was no evidence of significant, ongoing local work to implement the recommendations of the revised Mansell report;
- Commissioners reported continuing difficulties around the development of local services for people labelled as challenging;
- Discussions with commissioners identified a range of barriers to local service development:
  - Lack of coordination between adult and child services;
  - Lack of a systematic commissioning framework based on good quality information about the quantity and nature of local need;
  - Lack of confidence in the ability of locally available providers to deliver high quality supports to people labelled as challenging;
  - Wide variation in the application of NHS continuing care criteria and associated inter-agency perverse incentives;
  - (With exceptions) continuing difficulties between local authorities and the NHS in coordinated and integrated working;
  - Lack of specification of the commissioner role so that wide variation in the nature and quality of commissioning practice;
  - Family preferences (sometimes) for specialist, out-of-area placements perhaps in the context of earlier, local placement failures;
  - Lack of collaboration and understanding (in some areas) between commissioners and clinical support services;
- Commissioners considered and commented on a range of possible supports for their local practice.

National action

- The Challenging Behaviour National Strategy Group (CB-NSG) should coordinate and drive the process of improving the quality of outcomes for individuals whose behaviour challenges and their families;
- The Office of the National Director should encourage care providers to review and enhance their capacity to work collaboratively with local commissioners in the development and delivery of personalised supports for individuals whose behaviour challenges;
- The CB-NSG should, in collaboration with the Care Quality Commission, Skills for Health and Skills for Care, explore the possibility of establishing nationally accepted standards around the training and qualification of staff supporting individuals;
- The Office of the National Director should encourage the use of existing mechanisms (such as the Big Health Check and Partnership Board annual reports) to monitor and hold to account commissioners for their performance in developing better, more local provision;
- The Department of Health should review the application of continuing care criteria in order to clarify the reasons for the wide variation in numbers between areas and with a view to reducing perverse incentives;
- The Learning Disability Public Health Observatory should be asked to support commissioners to gather and use local information on need;
- The Department of Education should be asked to review policy on the use of out-of-area placements for children and young people with learning disabilities, with a view to the need for continued data collection and the development of prevention and early intervention efforts.

Support for commissioners

- A programme of nationally coordinated work should be developed to support a number of local commissioners (in every Region) to implement existing guidance. This programme should include attention both to the de-
development/redevelopment of personalised supports and the more systematic commissioning of provision which has the capacity to prevent and intervene earlier with challenging behaviour and mental health problems;

- A programme of dissemination activities centred on a new website should be developed to share lessons with all commissioners, collate evidence and examples of good practice in a manner accessible to commissioners, and encourage the development of specialist networks within the commissioning community.

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RESEARCH TEAM

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