



**Challenging Behaviour National Strategy Group (CB-NSG)
Post - Covid 19: A 'new normal' to deliver good outcomes
Learning and changing.....?.**

Thursday 8th October 2020, via Zoom.

PBS Academy and CQC presentation:

“Developing a resource(s) to guide inspections of facilities and services that support children, young people and adults with learning disabilities at risk of behaviours that challenge”

Feedback from discussion groups on presentation and suggested approach to inspections.

Key themes:

1) Family Involvement

- How easy is it for families to ask questions before, during and after an inspection e.g. can families flag “my child was asked not to attend during inspection” or suggest issues for CQC to ask questions about e.g. can I see the rainbow (seclusion) room?
 - Engage directly with families and ensuring this is done respectfully and sensitively. Include looking at feedback, concerns and complaints as part of the process – see “Ask, Listen, Do”
- Families should be sufficiently informed and made aware of PBS standards so that they can make informed input into documentation and ratings/standards.
- In addition, how well-informed families are about an institution’s PBS processes and how an institution uses their input should form part of inspection
- As well as family involvement, its essential to make sure the voice of the individual is heard- this may need specialist support e.g. if the person doesn’t communicate verbally

2) Culture

- Needs to be used to inform training materials to help bring about a whole culture change
- Assessments should always be person centric to ensure whatever method is in place, be it medication or PBS, is appropriate. PBS needs to be a framework, not an intervention
- Safe whistle-blowing opportunities

3) Standards

- Markers of standard should be constructed in light of PBS standards. Standards could be constructed whereby if no PBS plan is in place, they are automatically rated “inadequate”.

4) Training

- Needs to consider the high workload of staff, and address the consequent tendency to just choose the easiest option
- Inspectors trained to look for evidence that a provider knows its patients really well, and the tell-tale signs that they don't
- Staff need to be kept informed of the new plans throughout, to help bring them on board
- Inspectors should be specialists in Learning Disability and know what good practice looks like, what is possible & achievable.

Other topics that came up in discussions

- Support for the intentions behind the resource, but concern around whether it can be delivered on the ground.
- Ensuring rigorous inspection processes that prevent providers manipulating the process, for example by hand-picking families to talk to inspectors
- Inspection evidence should come from a variety of sources accompanied by analytic comparison of any discrepancies
- Acknowledging trauma, both past and ongoing and assessing whether the provider demonstrates good trauma awareness