



CB-NSG Nov 2021

PM Workshop 5: *External Support Group: Working with clinical teams to support individuals in a local area*

Workshop facilitators: Vivien Cooper (CEO of the CBF), Dr Theresa Joyce

The aim of the workshop was to share how the ESG have been working to create best practice and support individuals across different regions.

Workshop objectives:

- Provide information about how the ESG is trying to inspire best practice
- Collate feedback on how the ESG could be improved/developed

The External Support Group (ESG) is an initiative set up by the CBF that brings together a number of individuals with significant practical experience in supporting individuals with complex needs in community settings- including developing individualised packages of support – and maintaining that support to provide good outcomes for individuals. The ESG will focus on practical *doing with*, not *doing for*, local teams and will adopt an investment approach- investing additional capacity and enhancing existing skills leaving a sustainable legacy.

Workshop discussion:

The group agreed that a 'neutral approach' to working with local teams is best and encourages a model of 'co-learning', but that it is difficult to achieve this neutrality. It would be easy for ESG members to become very involved in local teams' projects and issues.

One of the workshop attendees questioned whether the ESG could begin a project which addresses the 'decreasing legitimacy' of the CQC as a regulator. A silent inspector – to accompany ESG members – to care provisions within local teams was suggested. This may be valuable for families, to know that there is a team of people trying to improve the quality of care delivered to their relatives.

Another CB-NSG attendee suggested that it may be very difficult to scale up the ESG to meet the current level of unmet need. If this is to be achieved, the ESG must discuss how to mobilise

local teams to make a difference in entire areas, and must organize meetings with the right aims and people attending.

One of the workshop attendees suggested that often the person who oversees or writes someone’s care plan or care specification will be employed by a hospital provider and therefore state that it is in the individual’s best interest to be cared for in a hospital setting. In addition, the person writing the care plan may not have a sufficient understanding of what community care provision local authorities are able to provide.

Local areas should also focus on coordinating well with each other, and relational modes of working, in order to facilitate discharge and community care provision for people with learning disabilities.

Another attendee noted the powerlessness people in the learning disability sector feel in the face of the quantity of reviews and recommendations for adults with learning disabilities, and their care, and the lack of change which ensures. They wondered whether, when reviews are commissioned, and organization could make one of the review recommendations to work alongside an organization like the CBF or Mencap, to ensure that the total recommendations are committed to and followed through.

The ‘system’, and often family carers, do not have faith that people could be supported in a community setting, whether that is because they are unaware of the support offered by community provision or doubt the availability and existence of the resources for this support. The ESG could provide a form of ‘gentle persistence’ amongst hospital providers and families, that community provision does, and where it does not – should, exist.

Finally, another workshop attendee felt that the ESG should not be too focused on scaling up to meet need. They also added that we should all remember that people ‘get ready for living in the community’ by living in the community, therefore clinicians’ opinions on ‘readiness’ are not always reliable.

Actions:

Action	How will it be done?	Who will do it?	When will it be done?
Sharing the ESG perspective and model of thought	Disseminate this through website, written pieces (ESG website page is now live) Shared info to focus on ESG projects (senior intervenor role?)	ESG member	

Circulate CBF best practice document to ICS/PCs (at 'place' level)	(So that services cannot say "it's not possible to deliver X") Link to ICS best practice action	Need to find someone to influence in ICS Task for ESG	
CQC to consider introducing 'silent inspectors' of facilities	Or roll-out unannounced inspections to all facilities	Steve Holmes / Alison Carpenter (CQC) ESG to get in touch	