



Challenging Behaviour – National Strategy Group (CB-NSG)

Thursday 24th November 2022 via Zoom

Workshop 1:

Workforce: Clinicians

Workshop Facilitator: Jackie Clarke and Alison Branch

Time: 11.00am-12.45 pm

The aim of the workshop is:

- To identify best practice for clinicians providing support for people with learning disabilities whose behaviour challenges, and to identify opportunities their roles present to lead and drive change.
- To identify barriers to the delivery of best practice and how clinicians can implement change

The objectives are:

- To discuss & understand the experiences of people with learning disabilities in relation to medical care (in particular those in inpatient units)
- To identify best practice
- To identify what barriers there currently are to providing high quality care, and what actions clinicians can take to overcome these
- To identify actions to include in a co-produced Transforming Care action plan for people with learning disabilities

Background

Clinicians play a key role in supporting people with learning disabilities whose behaviour challenges, and in particular in supporting those who are in inpatient units. People in inpatient units whose behaviour challenges that have been detained under the Mental Health Act have a Responsible Clinician, who oversees their care and treatment, including making recommendations about their care and treatment and when they are ready for discharge.

Barriers

- Not all Responsible Clinicians for people with learning disabilities are learning disability specialists
 - This is particularly important if they are not familiar with learning disabilities or behaviours that challenge
- Risk-averse and crisis management cultures
- There is a lack of learning disability community psychiatrists to support individuals to live in the community
- Lack of multi-disciplinary teams with the right skills and capacity

Opportunities

The BTRS Action Plan has several commitments relating to clinicians (see appendix A). Can we build upon these to achieve positive outcomes for people with learning disabilities whose behaviour challenges?

Workshop agenda (Timings TBC)

- 1. Welcome and introductions**
- 2. Presentation to give the background and context for this work**
- 3. Group discussion**
- 4. Actions**

Actions: (To be completed during workshop)

Action: What is needed	How it will be done	Who will do it	When it will be done
1.			
2.			
3.			
4.			
5.			

Appendix A - Building the Right Support Action Plan

Workforce: Clinicians

- ❖ BTRS Action Plan Commitments
- ❖ Our concerns
- ❖ Comments and recommendations from the Campaign Families group of family carers (in green)

Commitment	Content	Measure of Success	Key Concerns	What Else is Needed?
1c - Proposal to make it a statutory requirement for Responsible Clinicians to have regard to the findings and recommendations from Care (Education) and Treatment Reviews (C(E)TRs) and include them in the patient's care and treatment plan, unless there are good reasons not to	<p>Part of work to reform the Mental Health Act</p> <p>Means that, if a Responsible Clinician or Integrated Care Board deviates from the findings and recommendations of a C(E)TR, they would be expected to justify this</p>	Duty passes through Parliament	<p>Timescales for this happening are unclear – legislation to be introduced “when Parliamentary time allows”</p> <p>How rigorous will the justification process be?</p> <p>Not all Responsible Clinicians for people with learning disabilities are experts in learning disabilities (e.g. they are mental health specialists instead)</p> <p>Will tribunals also be required to have regard to C(E)TR findings?</p>	<p>Include in C(E)TR guidance to be published immediately, with an implementation plan and monitoring and reporting</p> <p>Train and support RCs to understand requirements & a mechanism for reporting/raising concerns and issues that prevent recommendations being carried out</p> <p>All people with a learning disability should have a responsible clinician who is a learning disability specialist (likewise, people who are autistic should have autism specialists)</p>

<p>1e - Continuing IC(E)TRs and work with the Oversight Panel to improve the circumstances of people with a learning disability and autistic people who remain in long term segregation</p>		<p>The IC(E)TR will help to improve the person's circumstances, supporting them to be discharged or move to a less restrictive setting</p>	<p>Not a SMART target</p> <p>There is a lack of data collected on how effective IC(E)TRs are compared to C(E)TRs – this is needed</p>	<p>Publish evaluation evidence that ICETRs make a positive difference to individuals and change poor practice, including how many people have moved out of segregation, and been discharged as a result of the reviews</p> <p>Publish statistics of number of people in LTS every 3 months, including interventions employed to improve circumstances. Review effectiveness and develop and implement plan to prevent new LTS and move people out of LTS</p>
<p>1i - Health and Care Act 2022 introduces a new requirement for registered providers to ensure their staff receive specific training on learning disability and autism, which is appropriate to their role</p>	<p>Clinicians among those who would be required to complete the training</p>	<p>Roll out of Oliver McGowan Mandatory Training programme</p>	<p>Not new and targeted for Building the Right Support</p>	
<p>1j - Providing community learning disability teams and intensive support teams with the opportunity to commence</p>	<p>Develop and deliver multi-professional learning disability and autism credentials mapped to the</p>	<p>40 clinicians from multi-professional backgrounds will be studying a credential</p>	<p>Not a SMART target, not new for BTRS</p>	<p>Publish commitments about funding and implementing service model element on community teams</p>

advanced and consultant level practice training by April 2023	learning disability and autism core capabilities frameworks Offer advance practice MSc development to staff working in specialist teams	Supported MSc Advanced Practice places will be available to staff working in specialist teams		to prevent and manage crisis
1k - Investing £1.5 million of funding into the development and trialling of autism training for staff working in adult inpatient mental health settings.	To be complete by March 2023	Progress will be reported to the Autism Strategy Executive Group, and the Delivery Board will receive an update as appropriate	Not related to learning disability	Develop similar appropriate training to raise awareness of learning disabilities, and in particular of challenging behaviour
1l - Developing autism training for staff working in mental health community and inpatient settings for all age groups	To be complete by April 2025			
2a – Refresh of C(E)TR policy	Will place increased focus on physical health and emphasis on the importance of actions that should follow on from C(E)TR Learning from Safe and Wellbeing Reviews to be included in policy refresh	Policy published Appropriate offer of C(E)TRs to individuals at risk of admission or in inpatient care	Policy due to have been published summer 2022 – has not been published Not a SMART target	Publish the evaluation of the Safe and Well reviews Identify actions to address the issues identified Co-produce and implement a resourced action plan with SMART targets that aligns with the advocacy action and implementation plan Provide local teams with skilled support and expertise to directly support discharge and

				<p>project manage and co-ordinate the multiple actions in different parts of the system to enable this to happen</p> <p>Role of Expert by Experience should be strengthened</p>
<p>2e - Discharge planning for inpatients detained under Part III of the Mental Health Act to help identify barriers and progress individual cases as appropriate</p>			<p>Not specific or targeted- action weak</p> <p>Have the barriers not already been identified in Baroness Hollins Review, CETR, S&W reviews – and are they being acted upon?</p> <p>Do all forensic patients have a provisional discharge date?</p>	<p>Need monitoring to ensure that recs from CETR are followed</p>
<p>5a - Proposal to limit the scope to detain people with a learning disability or autistic people under the Mental Health Act, as part of work to reform the Mental Health Act</p>	<p>People with a learning disability and autistic people will only be able to be detained for treatment under section 3 of the Act if a co-occurring mental health condition which would benefit from hospital treatment is identified</p>		<p>No timescale – legislation to be introduced “when Parliamentary time allows”</p>	