# The External Support Group: A Shared and Collective Approach 1960 The Challenging Behaviour Foundation



The External Support Group (ESG) is an initiative set up and coordinated by the CBF that brings together several individuals with significant practical experience in supporting individuals with complex needs to leave hospital to live in community settings - including developing individualised packages of support - and maintaining that support to provide good outcomes for those individuals.

## WHAT WE KNOW ABOUT SERVICE USER'S STORIES AND PAST EXPERIENCES

- Long histories of difficulties, often a 'reputation' and a series of placements that did not last
- Often been in hospital for a long time
- Often segregated from others
- Reviewed regularly? Outcomes
- Commissioners are distant often don't really know the person
- Families feel marginalised

#### WHAT WE DO IN PRACTICE

- Provide a team of 2 or 3 people who have skills relevant to the needs of the service user and the service.
- Bring people together (staff and family) to jointly understand the person's needs and history.
- Help teams (including family) develop a new/comprehensive formulation - the formulation is often limited and not up to date which means plans are not based on the person's current needs
- Help teams and families look at (often re-analyse) ABC's and other records and develop a more comprehensive PBS plan
- Ensure the work and knowledge is shared by all although it will be led by a few
- Ensure leaders are supported through discussion of interventions and adapted support, support and training for staff and support for them as individuals
- Have series of workshops (not just 'training') when support staff can talk through issues, learn about adapting their support and problem-solve
- Support MDT, who may feel 'stuck'
- Engage with others (e.g senior managers) who can help maintain a focus on the person, their support and their future
- Leave when the service feels competent

### WHAT DO WE KNOW ABOUT STAFF DIFFICULTIES IN **SUPPORTING PEOPLE**

- Interventions and support have often been the same for some time
- Staff have often 'run out of ideas' about what to do
- MDT's not able to prioritise support to the person
- Leaders often struggling with team morale and with directing the team
- Support to leaders is inconsistent
- Staff are under a lot of pressure, with little change occurring for them, the service user or their families

## Contact us through the CBF



This process includes local team identifying individuals to the ESG members.



If agreed, ESG identifies a core group of 3 members with the particular skills and knowledge required. They work with local team around the person to agree terms of engagement.

ESG and local teams (with the person and family/advocate) work together - reviewing the current situation and future aims for the individual.

Objectives of input are agreed, and actions implemented.

#### WHAT WE DO TO TRY AND INTERVENE IN THESE **CIRCUMSTANCES**

- Work with the team, "Back to basics" review all documentation and look at:
- The team's understanding of how the person got to be here (fresh pair of eyes)
- Look at the plan and what it is based on (formulation)
- What do the staff know and understand about why the person is doing what they do
- What is the person's life like and what do <u>they</u> want
- What are the families views/understanding of what is happening for their relative
- What are the leaders thinking about the whole situation
- o Is there pressure on the team and where is it coming from

#### **KEY MESSAGES**

- External support needs to work alongside, and collaborate with staff, doing work with them, not instead of them. That includes staff at all levels of the organisation, not just those providing direct support. It is also important to jointly agree indicators between the service, family and external support in relation to what effective change looks like
- It is important to revise and deliver specific interventions and support based on current (often updated) understanding of the person's needs, developed in collaboration with those who work with the person and their family.
- There is no quick fix. Good discharges take time. It helps to have a roadmap with milestones that are time bound.
- It can feel risky to bring about changes especially if things seem stable. Provision of external support can support change and risk-taking, by openly addressing this – whilst also being clear about what all participants want and need to achieve.