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# Case studies: community support for people with a learning disability and autistic people

### Case Study 1: Ealing Intensive Therapeutic and Short Breaks Service

The Ealing Intensive Therapeutic and Short Breaks Service (ITSBS) is a specialist service that supports children and young people aged 5-17 who have a learning disability and/or are autistic and are at risk of being moved to a residential placement. By providing personalised psychological and behavioural support, therapies, support to the young person and their family, and short breaks, the service aims to enable the child/young person to avoid residential placements (e.g., a residential school or an inpatient admission) and to remain with their family in the community.

As of 2022, the ITSBS had provided support to 47 children with an average age of 12. Of the 28 young people supported between 2012 and 2017, 23 remained living at home, with 13 either being stepped down to a less intensive CAMHS-LD service or being discharged completed due to no further input being needed<sup>1</sup>, and out of the 47 supported up until 2022, only 8 were in residential placements<sup>2</sup>.

Between 2012 and 2017, only three young people were admitted to an inpatient setting - two of whom experienced planned six-month stays before returning home, and one of whom was referred to the ITSBS while already in an inpatient unit and was supported by the ITSBS to return home.<sup>3</sup> The average length of stay in an inpatient unit for people who are autistic and/or have a learning disability is nearly 5 years.4 Between 2018 and 2022, no children who accessed the ITSBS were admitted to an inpatient bed.<sup>5</sup>

Children who received support from the ITSBS showed a significant reduction in challenging behaviours and were less likely to be admitted to residential placements. Family carers reported improved wellbeing for both their children and themselves<sup>6</sup>.

In 2013, the average cost of a 52-week residential school placement for a child with a learning disability or who is autistic was £171,176 per year, and the average cost of an inpatient bed for a child/young person with a learning disability or who is autistic was £250,000 per year<sup>7</sup>. Adjusted for inflation, in 2021 this would have been £193,815 for a residential school placement and £283,064 for an inpatient bed.

The annual cost of support and follow-up for 7 young people under the ITSBS was approximately £110,000 in 2021 - significantly less than the cost of one residential school placement or inpatient bed.

<sup>(</sup>PDF) The Ealing Intensive Therapeutic and Short Breaks Service: an update five years on (researchgate.net)

<sup>&</sup>lt;sup>2</sup> EARLY-INTERVENTION-REPORT-A4-FINAL.pdf (cerebra.org.uk)

<sup>&</sup>lt;sup>3</sup> (PDF) The Ealing Intensive Therapeutic and Short Breaks Service: an update five years on (researchgate.net)

<sup>&</sup>lt;sup>4</sup> Learning disability services monthly statistics from Assuring Transformation dataset: Data tables - NHS England Digital

<sup>&</sup>lt;sup>5</sup> EARLY-INTERVENTION-REPORT-A4-FINAL.pdf (cerebra.org.uk)

<sup>&</sup>lt;sup>6</sup> NHS Long Term Plan » Youngsters in Ealing benefitting from an intensive therapeutic and short break service; EARLY-INTERVENTION-REPORT-A4-FINAL.pdf (cerebra.org.uk)

<sup>&</sup>lt;sup>7</sup> Early Intervention Project: Briefing Paper (challengingbehaviour.org.uk)











Further information and examples of early intervention programmes, including the benefits and cost-savings associated with these, can be found in the reports Investing in Early Intervention (Challenging Behaviour Foundation, University of Warwick, Council for Disabled Children, Mencap, and Cerebra) and Paving the Way (Council for Disabled Children and Challenging Behaviour Foundation).

### **Case Study 2: Named Social Worker Pilot**

The Department of Health and Social Care commissioned the Social Care Institute for Excellence (SCIE) and Innovation Unit to pilot a Named Social Worker programme, which ran between 2016 and 2018 and involved nine local authorities.

Individuals who received named social worker support experienced high levels of satisfaction, better packages of support, faster (and smoother) discharges from inpatient hospitals, less restrictive measures, and greater stability of placements<sup>8</sup>. The programme therefore resulted in them experiencing better outcomes, including avoiding admission into inpatient units<sup>9</sup>, and higher quality of life. Named social workers reported increased skills and knowledge and higher levels of satisfaction with their work<sup>10</sup>.

The cost-benefit analysis of this pilot found that the financial return on investment was 5.14 for every £1 invested in the programme, £5.14 would be saved 11. Local authorities made significant savings, primarily linked to less expensive care packages for those supported by named social workers<sup>12</sup>. The wider system also benefitted from better cross-service coordination and a stronger evidence base of good social work in local contexts 13.

Having a consistent social worker improves the quality of relationships between the person. their family, and their social worker, and evidence suggests that this can help avoid trauma experienced by individuals and their families 14. This in turn, as well as improving quality of life, reduces the likelihood of crisis. It also aligns with NICE guidance for people with learning disabilities<sup>15</sup> and autistic people<sup>16</sup>, which emphasise the importance of a named lead practitioner.

#### Case Study 3: Black Country Emergency Response Team

During the COVID-19 pandemic, Black Country Healthcare NHS Foundation Trust identified that (due to the changes in these caused by the pandemic) the support measures in place were not adequately meeting the needs of people with learning disabilities and autistic people. They therefore invested additional funding to pilot an extended Emergency Response Team.

<sup>&</sup>lt;sup>8</sup> Summary of evaluation findings - SCIE

<sup>9</sup> Stories from the Named Social Worker pilot sites - SCIE

<sup>&</sup>lt;sup>10</sup> Summary of evaluation findings - SCIE

<sup>11</sup> Cost Benefit Analysis - SCIE

<sup>12</sup> Cost Benefit Analysis - SCIE

<sup>&</sup>lt;sup>13</sup> Summary of evaluation findings - SCIE

<sup>&</sup>lt;sup>14</sup> Role of the social worker and legal literacy (basw.co.uk)

<sup>15</sup> Quality statement 4: Named lead practitioner | Learning disability: behaviour that challenges | Quality standards |

<sup>&</sup>lt;sup>16</sup> Quality statement 4: Coordination of care and support | Autism | Quality standards | NICE

















The team, consisting of 10 highly skilled social care workers, was based around the person and their family and was on call 24/7, and worked with the person's team and clinical teams to develop ways to support them in the least restrictive environments possible. It was also possible to access Respond support when needed. Extra funding enabled staff to be available on call and IST teams were expanded to include weekend work, with additional staff being available for crisis support to prevent staff from 'burning out', and a supported living provider provided a team to provide extra hours/on call crisis support.

These measures resulted in a 55% reduction in inpatient population, through a significantly reduced admission rate and improved discharge rate and reduced length of stay<sup>17</sup>. In 2022-23 the Emergency Response Team supported 51 people from being admitted to hospital at an equivalent annual cost to a single assessment and treatment bed<sup>18</sup>.

Alongside the Emergency Response Team, in June 2023 Black Country Healthcare NHS Foundation Trust created a 'Crash Pad', short term emergency accommodation that can be used by adults who are autistic and/or have a learning disability that are at risk of hospital admission in order to avoid this 19. Between January and March 2024, 24 individuals were supported through the Crash Pad, enabling them to receive support in a secure environment without the need for admission into an inpatient unit.

Workshop 4: Commissioning (challengingbehaviour.org.uk)

Baroness Hollins' final report: My heart breaks - solitary confinement in hospital has no therapeutic benefit for people with a learning disability and autistic people - GOV.UK (www.gov.uk)

<sup>19</sup> Crash Pad: Pioneering Hospital Admission Avoidance - Empowering U