

Learning Disability and Autism (LDA)

Overview of our current system

South East London ICS is responsible for the health and care of and estimated 9,000 people with a learning disability and an estimated 21,000 autistic people. Nationally and locally we know that life expectancy for people with a learning disability is lower than the general population and have higher rates of death from avoidable causes than for the general population - 49% vs 22%. Between 20-30% of autistic people also have a learning disability and 70% of autistic people also have a mental health condition and 40% have two or more mental health conditions. In March 2022, there were 66 SEL adults and 6 SEL children and young people per million receiving care in hospital, compared with the Long Term Plan ambitions of 30 and 15 per million respectively by March 2024. By March 2023 we anticipate that the numbers in hospital per million will be 59 adults and 6 CYP.

Strengths / opportunities

Inpatient Reduction and Admission Prevention (all age)

- Rate of admission for adults has halved since 2019 from an average of eight admissions per month to four. This has led to a significant reduction in non-secure and secure inpatients and the achievement of target. Intensive Support Teams and Autism Support Services have contributed to the reduction.
- Case Management and resources to undertake Care Education Treatment Reviews (CETRS) is well established. Work on Dynamic Support Registers (DSRs) and implementing a consistent offer across south east London is a further opportunity to prevent admissions.
- The SELECT Keyworking Service is well implemented and supports admission prevention for children and young people.

Improving quality of life/care – whole population

- Well established SEL steering groups for Annual Health Check and LeDeR – (Learning from the lives and deaths of people with learning disability and autistic people)
- Specialist LDA Prescribing Advisors to stop over prescription of psychotropic medication in adults and children (STOMP and STAMP)
- Good quality oversight as placing commissioners and host commissioner for inpatient settings.

Challenges

Strategic response to Autism

- Significant variation in the development and implementation of place based Autism Strategies.
- Significant waiting times for Autism Assessment for diagnosis and post diagnostic support across all ages.

Care, Support, and Housing

- Underdeveloped provider market for:
 - good quality housing and accommodation options within south east London.
 - delivery of good quality care and support packages.

Workforce

- Difficulty in recruiting and retaining good quality learning disability workforce for example Learning Disability Nurses and support staff.

What we've heard from the public

The key messages from our SEL LDA User, Parent, Carer Forum for Co-production is; the need to improve community services and alternatives to hospital admission; support for the expansion of Keyworking and autism support services. We also heard from learning disability and autism ambassadors as part of the ICS strategy development process that people need more support in the community around mental health and being safe – most people had experienced 'mate crime'. The issues of training and time that workers have to support with talking about feelings, support to live healthily such as with cooking rather than microwave meals, support with attending and taking part in healthy activities and groups were seen as important to support with prevention. The need for confidence training for people and support from key workers as well as the health professional being seen was highlighted as important in accessing health services as was the rolling out of health passports with personal health profiles to support a more holistic approach to care and support without people having to tell their story many times.

LDA - Our vision and objectives

Our vision

South East London Learning Disability and Autism Programme **vision** is for people with learning disabilities and/ or autism to achieve **equality of life chances, live as independently** as possible and to have the **right support** from mainstream health and care services.

Our key objectives – what we want to achieve over the next five years

The top things that we want to achieve over the next five years builds on achievements in the last four years where the objectives were to

- Reduce long term inpatient care by reducing the reliance on inpatient beds
- Improve quality of life and /care by delivering co-ordinated care
- Enable community living by commissioning to improve community services and capacity.

In the next five years:

1. In addition to further reducing the number of inpatients, the focus will be on ensuring appropriate admissions, reducing length of stay, repatriating people to south London and improving the quality of inpatient and community services.
2. Reducing health inequalities in terms of improving outcomes and access for people with a learning disability and autistic people, in both hospital and community settings.
3. Significantly reduce the waiting times and the number of people of waiting lists for autism diagnostic assessment across all ages and develop post-diagnostic support for people with an autism only diagnosis.
4. Develop community alternatives to hospital admission to meet the needs of current inpatients as well as prevent admission by providing safe and effective care and support in the community.

LDA - Our priority actions

Our priority actions – what we will do

The Learning Disability and Autism Programme will set out a programme plan to deliver and achieve the objectives set out. Given the significant achievement made toward achieving 23/24 objectives in the Long Term plan, the LDA programme will continue to support and maintain priority actions that have been achieved and embedded. The first three priority actions require a strategic response with ICS partners as these have challenged the system in previous years. All other actions fit broadly into reducing long term inpatient care by reducing the reliance on inpatient beds and improve quality of life and /care by delivering co-ordinated care and includes work in progress.

1

Implement the SEL LDA Strategic Response to Autism – includes significantly reducing the waiting times and the number of people of waiting lists for autism diagnostic assessment across all ages and develop post-diagnostic support for people with an autism only diagnosis.

2

Develop the SEL Care and Support offer in the community with ICS partners - local authorities, ICB and provider collaborative. Includes understanding the current costs within the ICS, developing the market, developing providers for inpatient secure, non-secure and community options, accommodation and housing

3

Develop the Learning Disability and Autism workforce to deliver quality services, care and support to people with a learning disability and autistic people.

4

Reduce long term inpatient care by reducing the reliance on inpatient beds

5

Improve quality of life and /care by **delivering co-ordinated care**.

Strategic response to autism

Implementation of the SEL LDA Strategic Response to Autism – includes significantly reducing the waiting times and the number of people of waiting lists for autism diagnostic assessment across all ages and develop post-diagnostic support for people with an autism only diagnosis.

How we will secure delivery

Actions for 23/24

- Implementation of an SEL Autism Strategic Framework in support of the six (6) SEL Place-based Autism Strategies.
- Build on findings from review of Adult Autism pathway to support the development of diagnostic and post diagnostic Autism support and services to reduce variety and ensure equity across all six boroughs by Q4 2023/24.
- Development of the Autism Dashboard to understand SEL population/prevalence.
- Monitor and evaluate clearance of waiting list and times for Autism Diagnosis with providers.
- Implement Core Offer for CYP ASD Assessment Pathway currently in development.

Actions for 24/25

- Continue implementation of Adult Autism pathway with a focus on reducing variation and improving equity for diagnostic assessments across all 6 boroughs.
- Continue implementation of the CYP Autism Assessment Pathway to intervene early and reduce variation across all six (6) boroughs

Intended outcomes in 5 years time

- Waiting times for Autism Assessment and Diagnosis will be 12 weeks in all SEL boroughs for adults and children and young people.
- Improved Autism post-diagnostic support services in each SEL borough.
- Fully functioning Autism Dashboard to understand need and trends in SEL.

LDA priority action 2 – SEL care and support offer

SEL care and support offer

Develop the SEL Care and Support offer in the community with ICS partners - local authorities, ICB and provider collaborative. Includes understanding the current costs within the ICS, developing the market, developing providers for inpatient secure, non-secure and community options, accommodation and housing

How we will secure delivery

Actions for 23/24

- Fully implement the LDA Pathway Strategy and Panel in partnership with the Mental Health and Community Provider Collaborative (South London Partnership – SLP) who are responsible for secure inpatients and their discharge to the community as the least restrictive environment.
- Continue development of FIND - Forensic Intellectual and Neurodevelopmental Disabilities service to meet needs in the community.
- Recruitment of a SEL LDA housing lead to update and support implementation of a SEL housing plan across SEL boroughs.
- Build on the analysis of inpatient and community provision costs to inform commissioning decisions and future requirements across health and care.

Actions for 24/25

- With ICS partners – local authorities, ICB and SLP provider collaborative implement community housing and accommodation options for secure and non-secure patients, including bespoke options required.

Intended outcomes in 5 years time

- Adequate and timely community accommodation and support for people admitted to secure and non-secure settings.
- Reduction in the number of adults and Children and Young People in hospital over five (5) years to 30 and 15 per million respectively.

LDA priority action 3 – LDA workforce

LDA workforce

Develop the Learning Disability and Autism workforce to deliver quality services, care and support to people with a learning disability and autistic people.

How we will secure delivery

- Continue to build on develop and expand the SELECT Keyworking Service to meet the need of children and young people and particularly those 18-25.
- Working collaboratively across ICS partners, as required to capture workforce needs into SEL Workforce transformation plans.
- Review of the workforce in community learning disability and autism services across SEL to identify gaps in services of staff/professions and models of working.
- Update and review the Learning Disability and Autism Workforce Baseline Data Collection information to understand gaps in services including vacancies.
- Develop and build on recruitment and retention plans for Learning Disability and Autism services.
- Utilise our Anchor institutions and partners in ICS to encourage employment of people with learning disabilities and/or autistic people.
- Delivery of Understanding Autism and Oliver Mc Gowan Mandatory Training (OMT) across SEL.
- Implement Care Education Treatment Reviews (CETRs) and Dynamic Support Registers (DSR) guidance and support for staff.

Actions for 23/24

- Continue to implement mandatory training across SEL.
- Continue to implement workforce transformation plans with partners specifically recruitment and retention plans for LDA workforce and establishment/clarification of the minimum vacancy rate for LDA services.

Actions for 24/25

Intended outcomes in 5 years time

- Fully developed key working service for children and young people up to 25 with 100% of inpatients with and allocated keyworker and 100% of CYP rated red on Dynamic Support Registers (DSRs) allocated within service.
- Fully operational and effective Learning Disability and Autism services staffed at appropriate agreed level.
- At least 75% of staff in ICS completed Oliver McGowan Training.
- Increase in the number of people with learning disabilities and autistic people employed in local anchor institutions with support and adjustments made within workplaces.

LDA priority action 4 – reduce long term inpatient care

Reduce long term inpatient care

Reduce long term inpatient care by reducing the reliance on inpatient beds

How we will secure delivery

Actions
for
23/24

- Support local areas to develop and improve Dynamic Support registers (DSRs) for all ages and implement operational procedures for the new DSR and CETR guidance.
- Fully implement Local LDA Steering groups in all six boroughs.
- Continue with business as usual Case Management for inpatients.
- Continue focused inpatient surgery and targeted work with people in assessment and treatment over five (5) years.

Actions
for
24/25

- Fully operationalise Dynamic Support Registers and place based steering groups that lead on admission prevention and discharges from hospital.

Intended outcomes in 5 years time

- Reduction in the number of adults and children and young people in hospital over five(5) years to 30 and 15 per million respectively.

Coordinated care

Improve quality of life and /care by delivering co-ordinated care

How we will secure delivery

Actions for 23/24

- Implement identified projects to achieve Annual health Checks (AHCs) for people 14+ - for example LDA Health Ambassador roles and AHC Coordinator roles.
- Implement STOMP Clinics (Stopping the Overprescribing of Psychotropic Medication)
- Continue to implement the Learning from the lives and deaths of people with a learning disability and Autistic people (LeDeR Programme)
- Host Commissioner oversight visits within all learning disability and autism setting including mental health hospitals.
- Support implementation of a SEL Core offer for Community Health services for SEND (Special Educational Needs and Disability) with the Community Provider Network and CYP Programme

Actions for 24/25

- Fully embed good quality effective AHCs and improve the capacity needed in primary care networks (PCNs).
- Implement learning from initial and focused LeDeR reviews across SEL within place and in primary care.
- Undertaking quality oversight of inpatient hospital setting by placing commissioners, using Host Commissioner framework and guidance.
- Embed SEND guidance and consistent Local Offers within the SEL SEND Group/Network.

Intended outcomes in 5 years time

1. Achievement of over 75% of people with a learning disability and autistic people having annual health checks.
2. Reduction in avoidable deaths for people with a learning disability and Autistic people to 20% (currently 49% nationally)

LDA enabler requirements

Workforce

- Collaborative working across ICS partners, as required to capture workforce needs into SEL Workforce transformation plans.
- Review of Learning Disability and Autism Workforce Baseline Data Collection information
- Anchor institutions to actively facilitate and encourage the employment of local people with a learning disability and autistic people.

Digital

- Access to acute and primary care systems for implementation National Reasonable Adjustment Digital Flag in support of Guy's and St. Thomas (GSTT) "Fast Follower" pilot work.

Estates

- Access to advice from Estates Team to support the development of community options and bespoke developments.

Data

- Operational Learning Disability and Autism Dashboards that were developed during 2022/23.