

Appendix 1:

Three Examples of Best Practice Commissioning with Citizens and Communities

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The professional association for
social work and social workers

1

Community Learning Disability service – London Borough of Camden

What is the service?

Camden Learning Disabilities Services is an integrated health and social care service for people with learning disabilities. The service, as part of Camden Council, provides an integrated approach to assessment, care management, care coordination, therapeutic intervention, health professional training and support for people with learning disabilities.

What does the service look like?	This is how you can make the difference	Keys to success
<ul style="list-style-type: none">Mental health services – in-reach support, specialist advice regarding people that have a learning disability.No Admissions Treatment Unit (ATU) admissions for several years. Local Mental Health hospital occasional admission – 3 in 2020 this year for short stays.No re-admissions – successful transition from hospital with arrangements in place and working well 3-4 years post discharge from ATUs.	<ul style="list-style-type: none">The Learning Disabilities Service has responsibility for both budgets: Continuing Health Care and Social Care – this enables quick conversations and quick decision making.Positive relationships with the mental health trust-changed model- used to have allocated beds now have in-reach support and this has led to low level of admissions.The Learning Disabilities Service can make referrals to psychiatry and psychology where the risk of a person being admitted to hospital is higher – preventative approach. Timelines?	<ul style="list-style-type: none">Everyone has the same aim and the individual with lived experience is at the centre of this work. The person with lived experience has a psychiatrist when they are in a Mental Health hospital but also has a community consultant psychologist so the responsible clinician role is shared. The community consultant has a clear idea and understanding of the community resources which supports discharge.People who have previously been in an ATU are highly supported by the team and a named social worker is allocated.What works best is a psycho-social model of care and support – a good psychology team stops escalation.

What is the service?

The Adult Autism Service for North East Lincolnshire was developed in conjunction with Mental Health Services and in response to feedback from people with Autism, their families and professionals who felt there was a gap in support for those over 18 years of age, the service is provided by Care Plus Group in partnership with NAVIGO.

Driven by the Clinical Commissioning Group vision with a commissioners framework, accommodation, key providers not in competition with each other, led by social workers and psychologists, multi-disciplinary assessment, support, and accommodation needs looked at together, person, family, everyone is included who is part of the person's circle of support.

What does the service look like?	This is how you can make the difference	Keys to success
<ul style="list-style-type: none"> ● Multi-disciplinary working in social care, specialist intensive support service, mental health providers- bespoke provision designed to keep people safe, agreement for cross- organisational working, pathways to prevent hospital admissions. NAVIGO are the provider of this service. ● Facilitate full text MDT meetings support colleagues instantly involving people from the start rather having to go through a referral route to engage professionals afterwards. Not just about partnership working its about WHEN- involvement from the beginning- it is everybody's business. ● Framework of providers- not really- good working relationships- SHARED DECISION MAKING and SHARED RESPONSIBILITY. ● Never had any hospital beds- always had to work creatively with adults with learning disabilities and mental health needs to meet people's needs in the community. 	<ul style="list-style-type: none"> ● Drivers locally for specific autism service- referrals were going to mental health- MH were lobbying CCG saying we can't respond to people's needs. ● Mental Health services and local commissioners looked at a model that was already out there and working and looked to transfer this to NE Lincolnshire. ● Supporting people in their local community continuation of this at one point there was no-one placed out of area. ● Commissioners: enabled delivery and adapted the model of working to support faraway CIC development – this is an added bonus- commissioners thinking creatively outside of statutory functions. This is in addition to statutory provision. ● The idea is to say here's some money see what you can do with a view to replacing other provision if it works. ● Commissioners can invest in people who know the whole picture. ● NICE guidance- how did you use it? Marry it up with what works best, important to follow it, we did not use it in isolation. Just doing the diagnostic test misses the 	<ul style="list-style-type: none"> ● Everyone has the same aim- enabling people to thrive. ● Consistency and continuity of leadership – being around from the start helps. ● Needs led, person-centred approaches that differ from NHS medical model- identifying what the person needs to enable them to live a good life. ● Psychology element- leadership that comes from this perspective enables services to be developed that are person centred and needs led, partnership working is easier. ● Having a separate service for autistic people an integrated service can be offered later down the line. Establish a separate service then get the skills that are transferable out ● Operate a "You said, did" approach and people feel listened to.

What does the service look like?	This is how you can make the difference	Keys to success
<ul style="list-style-type: none"> ● Local intensive support team- Psychology led model - commissioners knew this worked well for people with learning disabilities and complex needs and replicated this model for autism in partnership with mental health services. ● The diagnostic AND SUPPORT service is delivered as part of the same service ● It is autistic people working in the service that make decisions through the partnership board which has to be 50% autistic people to be quorate. ● Community Interest Companies – all service provision social care and health. ● Focus – provides adult social care service and is engaged in micro-commissioning. ● NAVIGO – provides the mental health service. 	<p>person. Augmented the guidance and the diagnostic service by putting it together with an assessment and support service.</p> <ul style="list-style-type: none"> ● Within 6 months of having the new diagnostic and support service, cleared the waiting list and now the service operates an appointment within 4-6 weeks. ● Co-production- how we involve people in service design and delivery and having this built into the system as a fundamental part of how we deliver services. ● Forums in NE Lincolnshire- initially autistic adults with parents has gained momentum and now 25-30 people every couple of weeks meet and have a voice ● In North East Lincolnshire- anyone who is autistic can attend the board and represent the forum. At least 50% autistic people to be quorate. Moved the board meeting to be a forum and changed the time so it was outside working hours to enable people to attend and professionals also attend at this time which works better for people. ● Led by people autistic people, certain opportunities- autism support workers developing faraway Community Interest companies (CICS) the directors of these companies are autistic people, neuro-diverse from a leadership perspective. 12 month pot of funding- small investment to develop a scheme to develop autistic mentors. CIC's benefit the local community so demonstrate investment in community development. 	

Autism specific service – Bristol Autism Service for Adults part of the Avon and Wiltshire Mental Health Partnership Trust

What is the service?

BASS: (Bristol Autism Services for Adults) provide a service to adults with an Autism Spectrum Disorder (ASD) and professionals and carers who support them.

There are allocated services for four geographical areas: Bristol, Bath and North East Somerset (BANES), North Somerset and South Gloucestershire.

The service has been running in Bristol since 2009, in 2013 the bespoke services in BANES and North Somerset started and in 2014 the service started in South Gloucestershire.

What does the service look like?	This is how you do it	Keys to success
<ul style="list-style-type: none"> ● Assess and diagnose people who are referred by their GP. ● Support colleagues in mental health services to work with individuals with Autistic spectrum disorder (ASD). ● Provide an advice service with groups on mindfulness, stress management, social cognition and interaction, as well as an opportunity to book one to one sessions. ● Social prescribing to help individuals with ASD to link with the community and access social opportunities. ● Social support assessments for people accessing post diagnostic services. ● <u>Post-diagnostic support</u> - psycho-education, employment and benefits support, problem solving and signposting. ● <u>Training in Asperger syndrome</u> and ASD ranging from one hour awareness sessions to a full days training. ● Training in autistic spectrum conditions ranging from one hour awareness sessions to a full day's training. 	<ul style="list-style-type: none"> ● Partnership working and training for social workers across 4 local areas. ● Fully health commissioned, integrated Mental Health Trust, social care input some funding for Andrew's post. ● Multi-disciplinary team with 30+ staff comprising of – occupational and speech and language therapists, psychology, assistant psychologists, learning disability nurses, psychiatry-non-prescribing and social workers. ● Started as a diagnostic service. ● Support to people is provided via an advice service (currently operating remotely due to covid-19) consultation, training, raising awareness, outward facing. ● Lots of co-working, offering support to social workers. 	<ul style="list-style-type: none"> ● The service do not hold a caseload or care coordinate but can stay involved to work alongside and support other professionals. ● This is a sustainable model as the aim is to share knowledge and develop skills and experience of social workers across the partnership trust to work with autistic people effectively. ● Planning the service around the person.