

Living Good Lives Webinar: creating a positive and therapeutic culture in hospitals with a rights-based approach for adults with learning disabilities and/or autistic adults

Monday 8th November 2021

Programme

12:30	Chair: Juliette Millard, NICE Fellow & Head of Clinical Governance, Newcross Healthcare Solutions	Welcome and introduction
12:35	Brian Cranna Head of Hospital Inspection, CQC	CQC overview of current issues in hospitals for adults with learning disabilities and/or autistic adults
12:45	Alexis Quinn, Restraint, Reduction Network Manager & expert by experience	Video presentation of Alexis's lived experience
12:55	Hannah Learner, Clinical Specialist Occupational Therapist, working within Neurodevelopmental Services, for Sussex Partnership NHS Foundation Trust	Right environment - Setting up an environmental project that assessed inpatient units and other hospital environments for their 'Autism Friendliness'
13:05	Charlotte Scott Principal Social Worker, North Yorkshire	The role of the social worker in rights-based practice and advance care planning
13:15	Joy Duxbury, Professor of Mental Health at MMU, NICE Fellow & Chair and Trustee of the Restraint Reduction Network	Restraint, reduction and NICE guidance for evidence informed best practice in hospitals
13:25	Panel Discussion	Q & A
13:50	Chair: Juliette Millard	Summing up of key points and close



Juliette
Millard

NICE Fellow

Head of Clinical Governance,
Newcross Health Care Solutions



Brian Cranna
Head of Hospitals Inspection,
Care Quality Commission

What we have found during our inspection of hospitals for people with a learning disability and autistic people



Why we have changed our approach

We continue to see that autistic people, and people with a learning disability and/or mental health condition aren't getting access to the right care.

- [Professor Glynis Murphy Independent reports](#)

Recommendations about how we need to improve our regulation.

- [Out of sight who cares review](#)

Focused on the use of restrictive practices such as restraint, seclusion and segregation.

- [Closed Cultures](#)

Creating the right methods and policies for at risk services.



Changes in our approach

Change of approach – not a change in methodology.



- Focus on the persons experience of care.
- Increased time observing what happens in the service and how people are supported.
- Speaking to more people in the service as possible and their families or carers.
- Speaking to more people who come into contact with the service or the people being supported.
- Increased range of tools and guidance to support our cross sector inspection teams.

What we have found



- **People are not receiving the care and treatment they should expect**
 - **Hospitals are not providing specialist care and treatment**
 - **Staff are not given the training and support to meet the needs of people in their service**
 - **People are observed rather than actively supported**
 - **People are spending too long in hospital**

What we have found



- **People have been subjected to restrictive practices, poor care and in some cases abuse.**
 - **Restraint and restrictive practices are being used frequently and incidents are not being reported.**
 - **Staff are not being provided with support, supervision and debriefing following incidents to improve care.**
 - **There is high ratio of non-registered staff to Registered Nurses impacting on oversight of care and treatment.**
 - **There has been evidence of factors related to closed cultures.**

- **People are living in poor environments.**
 - **Some hospitals are poorly maintained.**
 - **The design and space of buildings does not always reflect the needs of people using the service.**
 - **The service does not meet the principles set out in Right Support, Right Care Right Culture.**

Challenge to hospital services



A focus on the person not the patient

How is the persons humanity recognised and respected?

How are the persons lifestyle and ambitions taken account of?

What is the purpose of the service, the placement, the ‘treatment’ and how is that making a difference so the person can get on with their life?

How do the skills of the staff reflect this purpose?

How confident are staff to speak up, how do managers encourage this and what difference has it made?

Do families feel listened to and are they confident to raise their concerns?



Unbroken

Alexis Quinn

Author of Unbroken and Manager of the Restraint Reduction Network



Autism and Environment: Making Positive Changes To Restricted Lives

Across Sussex

Hannah Learner, Specialist Occupational Therapist,
Transforming Care Autism Team,
Neurodevelopmental Service,
Brighton.

TCAT - Introductions

- We aim to....
- Help clients and colleagues understand the strengths that come with neurodiversity as well as the challenges and associated vulnerabilities.
- Differentiate between unmet mental health needs and unmet Autism needs and support colleagues with their formulations in respect of this.
- Make recommendations to support a discharge or prevent an admission.

Autism and Hospital Environments Project

March-May 2019

- This was a short term project **funded by NHS England under Transforming Care** aimed at:
- Supporting urgent care and acute services to make their environments more autism friendly
- Minimising exacerbation of distress of the ASC population when in crisis
- Reducing unnecessary hospital admissions for people with ASC
- Providing support and training about the development and use of sensory tool kits as an intervention for managing distress for people with ASC (in ANY setting).
- Providing face to face training on ASC and crisis care <https://youtu.be/XG7kqeLrDsM>



OUTCOMES

Each setting was given a report with the following recommendations and suggestions:

- Autism screening for all patients on admission
- Adaptations to working practices to support communication (as part of auditory processing sensory considerations)
- **A Quiet room to 'escape' to**
- **Environmental adaptations to enable noise, light, smell, touch experiences & movement experiences to be 'turned up' or 'turned down'**
- Awareness raising for all staff via SFPT webinars & workshops



Following on from this

Sensory Takeaways! Summer 2020

- Recognition of the impact of sensory needs on emotional regulation for TCAT patients. (Some dx EUPD) & the Autistic Community.
- Anecdotally - a reduction in urgent care presentations for some patients following use of sensory tools e.g. weighted blanket – **opportunity to send people home with a sensory item and monitor impact more formally.**
- 2019 OT (environment) advice provided when SPFT developed a new Psychiatric Decision Unit (The Haven).
- Training to promote good autism practice. Advice on sensory tools to use with autistic patients.

Sensory Takeaways – Evaluation

- Case-note review on pre and post urgent care presentations.
- Survey monkey sent to staff on their views on usefulness of the project pre and post.
- Interviewed community lead practitioners for evaluation of impact of sensory items
- Staff keeping items for ‘eat in’ (sabotaging the take-away ethos)!
- All positive feedback and wanted it to continue as a project
- Sensory items incorporated into individual’s care/crisis plans
- Most popular item – Weighted fox!



Staff Feedback

- *“We had one young woman present, she was mute at the time and very distressed. I just put the weighted fox next to her and at first she couldn’t even look at it. Then a bit later I saw her tentatively stroking its nose, then at about 3 in the morning she had fallen asleep cuddling it. She took it home and it’s now in her plan to come back with it, it was magical to watch.”*
- *“The gym ball was used as a distraction by one patient, we were struggling to engage her and as you know our service means we have to get to the root of distress quite quickly, so we sat on the floor and rolled the ball to one another. She found this extra distraction enabled her to engage in conversation with us about what was going on for her as she found the process less traumatic & confrontational that way.”*

Current & Future Initiatives:

- Ward environment projects across sussex in-patient units
- CYPS post-diagnostic pathway to involve re-working the sensory environment & sensory routines on the wards
- Audits & QI projects

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Sussex Partnership
NHS Foundation Trust

The Role of the Social Worker in Rights based Practice and Advance Care Planning

Charlotte Scott, Principal Social Worker

What is Rights Based Practice?

- Social Workers should promote human rights for all people with learning disabilities and autistic people that they support.
- This includes supporting their rights to make decisions.
- Supporting their right to a family and private life and to choose how they would like to live.
- Being up-to-date with all laws and policies that apply to the people they support. Understanding these laws and policies will help them make decisions, provide the best quality care and protect the people they work with from discrimination and abuse. Social Workers need to know when to use laws and policies when championing the rights of people with learning disabilities and autistic people (BASW, 2020)

The Legal Framework – the foundations of Rights Based Practice

Mental Capacity Act 2005

Deprivation of Liberty Safeguards 2008

Liberty Protection Safeguards

Mental Health Act 1983 (amended 2007)

The Care Act – well being principle and the Strengths Based Approach

Human Rights Act 1998 and the ECHR

Article 5 & 8 in particular:

Promoting the right to liberty (Article 5 ECHR), and the right to private and family life (Article 8) – and the right to appeal when these rights are infringed upon by the state.

The role of the Named Social Worker:

- To believe in what people can do rather than what they can't do
- To listen and learn from the people they support and their families
- To understand policies and laws that apply to people with learning disabilities and autistic people
- To know what services there are to help the people they support
- To work well with other professionals
- To work in the best interest of the people they support

Tools for Practice

BASW guides: [the role of the social worker.pdf \(basw.co.uk\)](https://www.basw.co.uk/resources/the-role-of-the-social-worker.pdf)

- Empowering others by being informed about their own duties and responsibilities, about an individuals rights - and upholding these in practice
- Think about communication – eg pictorial aids, signing, easy read guides
- Rights based practice = relationship based practice?

Ensure work is MCA 'compliant' – whatever the decision

- Ensure that where appropriate an MCA is carried out and Best Interest Decision recorded when key decisions are being made about an individual's health, care and accommodation arrangements
- Take an active part in any Care and Treatment Review
- Have conversations with individuals and families to establish views, wishes and beliefs in advance of the person being unable to make their own decisions
- When a person is assessed as lacking capacity to make a specific decision consult widely, identify any LPA for Health and Welfare, speak with family and friends to establish previously held views and wishes
- Involve the person in decision making – promote participation

- In circumstances that appear to amount to a deprivation of that person's liberty consider how those care and accommodation arrangements could be less restrictive
- Challenge 'blanket' restrictions
- Beware 'risk averse' practice
- Ensure that Support/Treatment Plans are as close to the wishes and outcomes identified by the individual – if a Best Interest Decision contradicts what a person's wishes include a clear rationale for why this is the case
- Use a decisional matrix or 'balance sheet' to document the rationale for a best interest decision – this tool can also support assessing capacity – if the individual is able to 'use and weigh' information

Closing Thought.....on Social Workers....

They get to know what people's hopes and dreams are and try to make them come true

BASW, The Role of the Social Worker & Legal Literacy

LIVING GOOD LIVES KEY NICE GUIDELINES

PROFESSOR JOY DUXBURY



RELEVANT GUIDANCE – INTERSECTIONAL

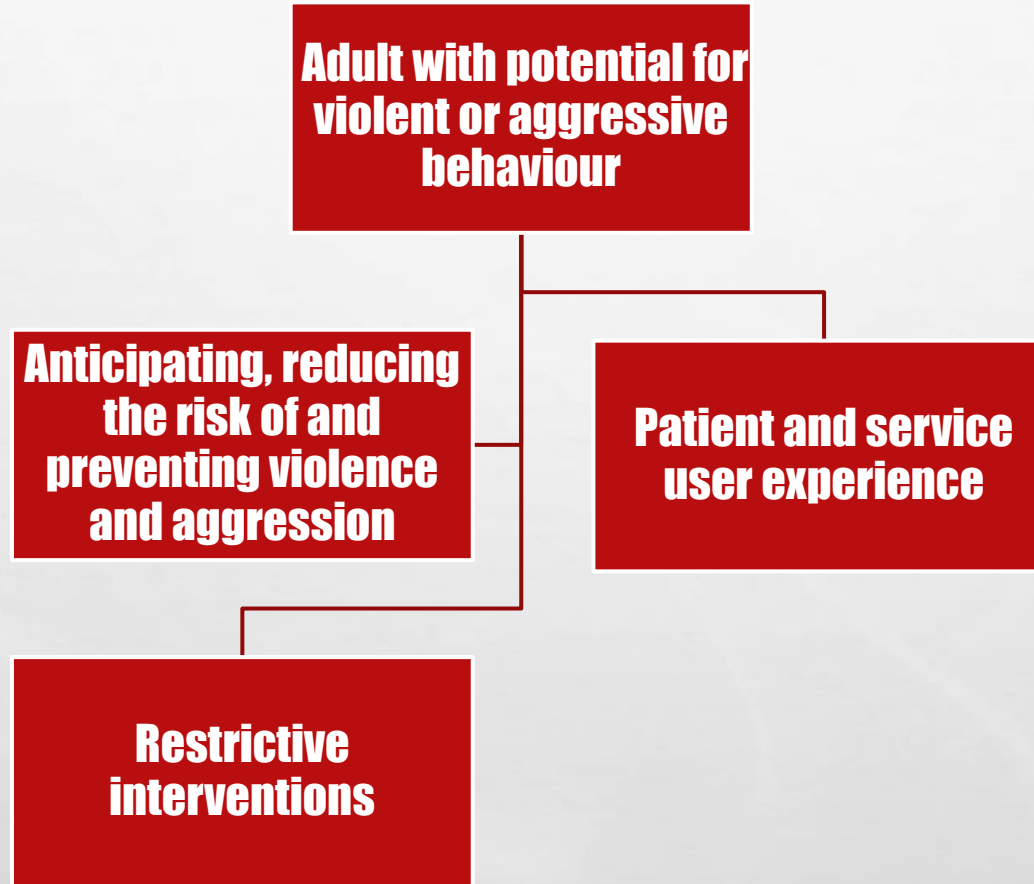
- **GUIDANCE**

- NG10 VIOLENCE AND AGGRESSION: SHORT-TERM MANAGEMENT IN MENTAL HEALTH, HEALTH AND COMMUNITY SETTINGS 2015
- NG11 CHALLENGING BEHAVIOUR AND LEARNING DISABILITIES: PREVENTION AND INTERVENTIONS FOR PEOPLE WITH LEARNING DISABILITIES WHOSE BEHAVIOUR CHALLENGES 2015
- NG54 MENTAL HEALTH PROBLEMS IN PEOPLE WITH LEARNING DISABILITIES: PREVENTION, ASSESSMENT AND MANAGEMENT 2016
- NG93 LEARNING DISABILITIES AND BEHAVIOUR THAT CHALLENGES: SERVICE DESIGN AND DELIVERY 2018
- NG197 SHARED DECISION MAKING (2021)

- **QUALITY STANDARDS**

- QS51 AUTISM 2014
- QS15 PATIENT EXPERIENCE IN ADULT NHS SERVICES 2012 (2019)
- QS154 VIOLENT AND AGGRESSIVE BEHAVIOURS IN PEOPLE WITH MENTAL HEALTH PROBLEMS 2017
- QS101 LEARNING DISABILITY: BEHAVIOUR THAT CHALLENGES 2015 (2019)

IMPACT PATHWAYS



KEY THEMES

- **TWO WAY ASSESSMENT/TRIGGERS AND NEEDS**
- **PRIMARY PREVENTION**
- **PERSON CENTRED APPROACHES**
- **SHARED DECISION MAKING**
- **ORGANISATIONAL STRATEGIES**
- **TRAUMA INFORMED CARE**
- **REFLECT AND REVIEW**

EVIDENCE BASED APPROACHES

- **SIX CORE STRATEGIES**
- **SAFEWARDS**
- **RESTRAIN YOURSELF/NO FORCE FIRST**
- **POSITIVE BEHAVIOUR SUPPORT**

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Questions & Answers

Resources which may be useful

- [CQC 'Out of sight – who cares?: Restraint, segregation and seclusion' review](#)
- [How CQC identified and responds to closed cultures](#)
- [CQC 'Right Support, Right Care, Right Culture'](#)
- [Skills for Care website and resources](#)
- Violence and aggression: short-term management NICE guidance ([NG10](#) and [QS154](#))
- Decision making and mental capacity NICE guidance ([NG108](#) and [QS194](#))
- Advance care planning NICE [quick guide](#)
- [National Autistic Society good practice guide for mental health professionals delivering talking therapies](#)
- [NICE Checklist for Autism-Friendly Environments](#)
- [NICE Autism and environmental adaptations within inpatient mental health units shared learning example](#)
- **BASW England Homes not Hospitals:** [The Role of the Social Worker and Legal Literacy BASW England](#)
- **BASW** [Capabilities Statement and CPD Pathway: Resources](#) to support autistic people, social workers, social work organisations and educators.
- [Toolkit for Autistic Adults, Toolkit for people with learning disabilities](#)
- **BASW** [Capabilities Statement and CPD Pathway: Resources](#) to support people with learning disabilities, social workers, social work organisations and educators

Thank you for listening

This event was co-produced by

