



# Transforming Care - Transforming Lives

Dr Sarah Blainey, Transforming Care in Autism, SLAM



# Overview

- What is Transforming Care?
- Transforming Care in Autism: the pilot
  - The team approach
  - What we have achieved
- What next?

# Transforming care: the background



**2011**

Panorama reports on abuse at Winterbourne View care home



**2012**

Term Transforming Care first used by Department of Health



**2015**

Publication of “Building the Right Support”  
Transforming care partnerships formed



**2017**

Service model specification published



**2019**

Panorama reports on abuse of people with autism and learning disabilities in specialist hospital  
  
NHS 10 year plan incorporates some Transforming care aims

# Transforming care: aims

To improve quality of *care* for people with a learning disability and/or autism

To improve quality of *life* for people with a learning disability and/or autism

To enhance community capacity, thereby reducing inappropriate hospital admissions and length of stay

# Why is Transforming Care important?

- Historical over-reliance on inpatient care
- Inappropriateness of services
  - E.g. Panorama investigations, people stuck in mainstream wards
  - Over reliance on medication
- BUT
  - Change has been limited & slow
  - Frustration of individuals & their families
  - Professionals, care providers & commissioners want progress

# Implementation

- 48 Transforming Care Partnerships
- Service Model Specification (2017)
  - Enhanced/intensive support services
  - Community based forensic support
  - Acute learning disability inpatient services
  - All underpinned by the principle that in the first instance, support should be offered by mainstream services, with reasonable adjustments



# Care & Treatment Reviews

- Tool for commissioners to evaluate current care
- Aim to avoid admission or reduce length of stay
- Include independent experts (clinical and expert by experience)

# Autism in the mental health system



## **Autistic people are a small proportion of the population**

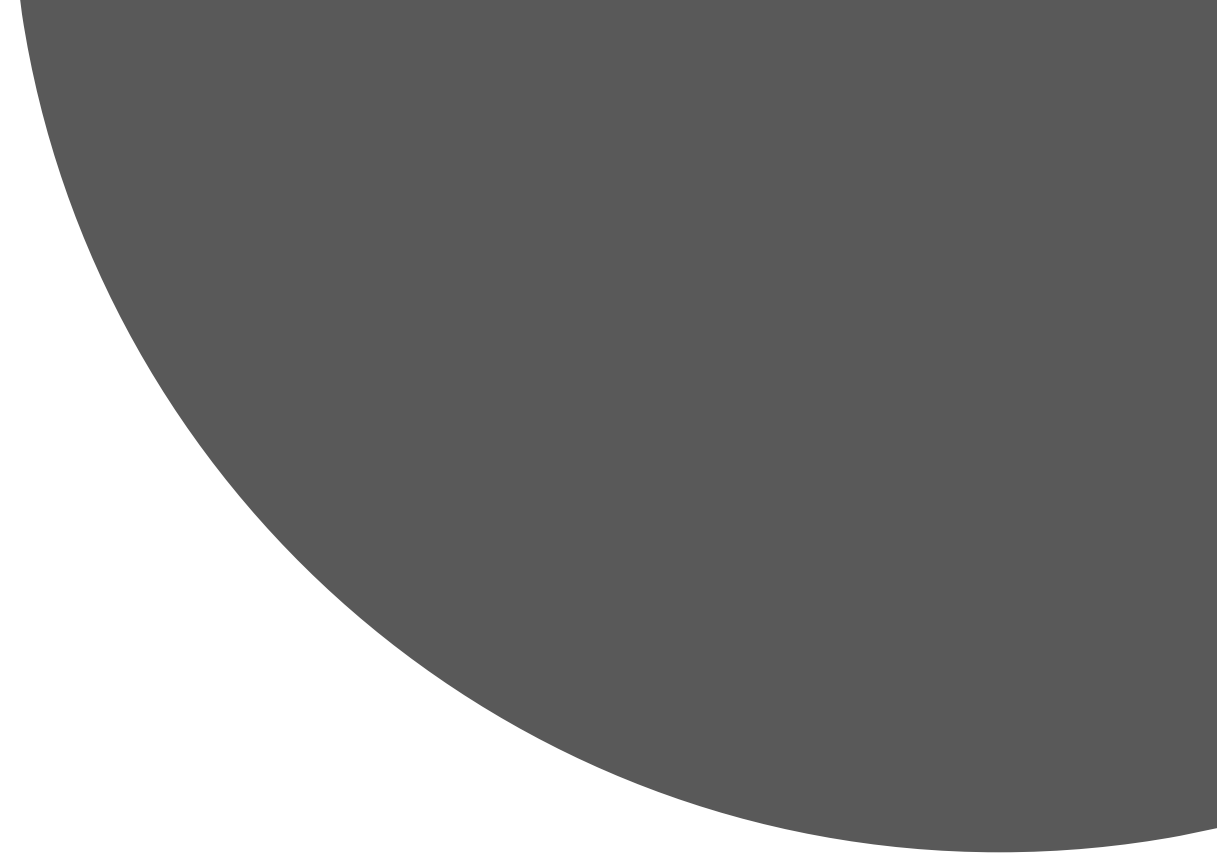
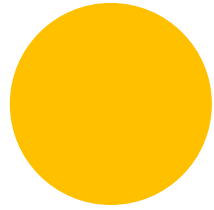
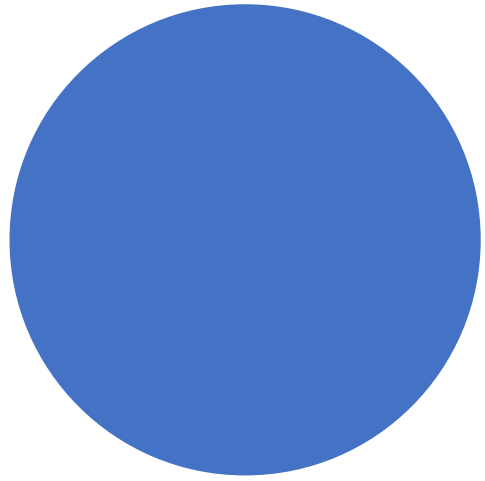
BUT a significant proportion of mental health service users

AND likely to experience discrimination, delays and difficulties accessing MH services



## **Increased risk of suicide, crisis presentations**





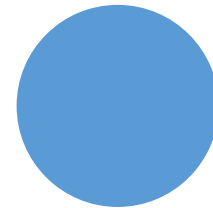
Transforming care in  
Autism: a pilot



- There was a recognised lack of community-based, intensive support services for adults and children with autism within South East London
- Opportunities to improve:
  - CTR completion
  - Community service skills in working with autistic service users
- Opportunities to reduce
  - Inappropriate admissions
  - Length of stay

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# The background



# Factors affecting admissions in SE London



## **Problems with accommodation**

Inappropriateness, homelessness, evictions



## **Social stressors**

Employment  
Family/relationship problems



## **Problems with medication**

Compliance, effectiveness



## **Problems with services**

Access  
Ongoing support



# The scope

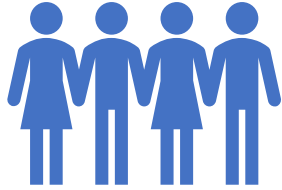
1. Improve outcomes for adults with autism
  2. Upskill community providers
- Covering Lambeth, Lewisham, Southwark
    - Total population of ~1 million
    - Significant social deprivation



# The team

- Two Clinical Psychologists
  - One Consultant Nurse
  - One Assistant Psychologist
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- Subsequently developed to include psychiatry input

# What does the service offer?



## **Crisis pathway**

Working with people at risk of or currently inpatient to facilitate community based support

Working with mainstream services to support care



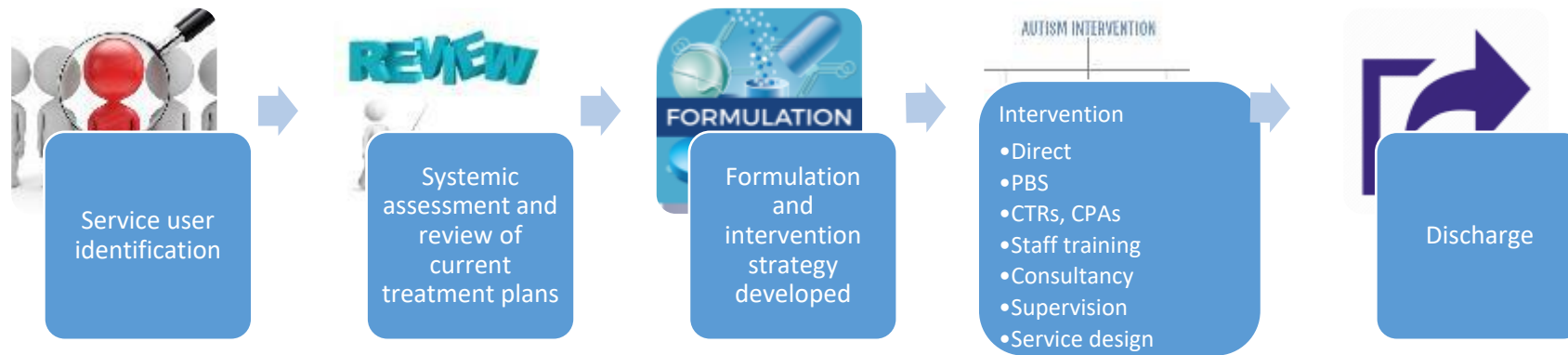
## **Developing capable local services**

Teaching

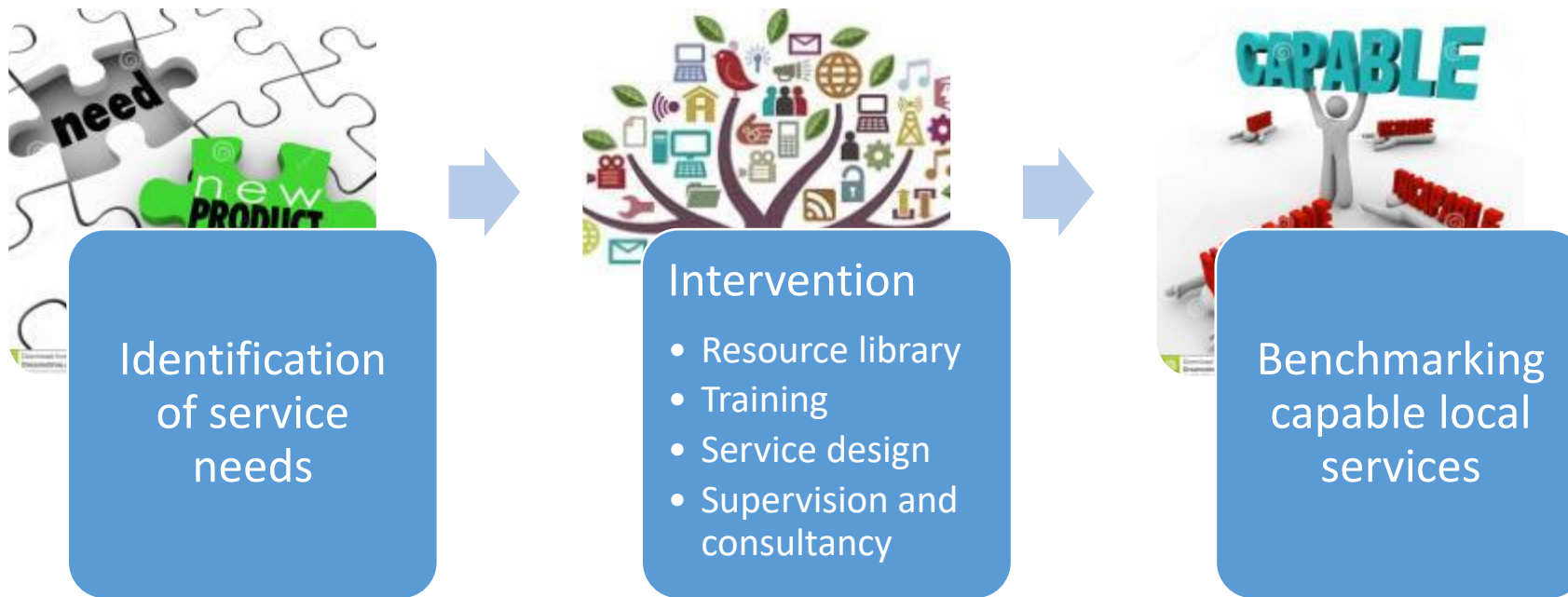
Consultation

Resource provision

# Crisis Pathway



# Service design pathway





What has  
been  
achieved?

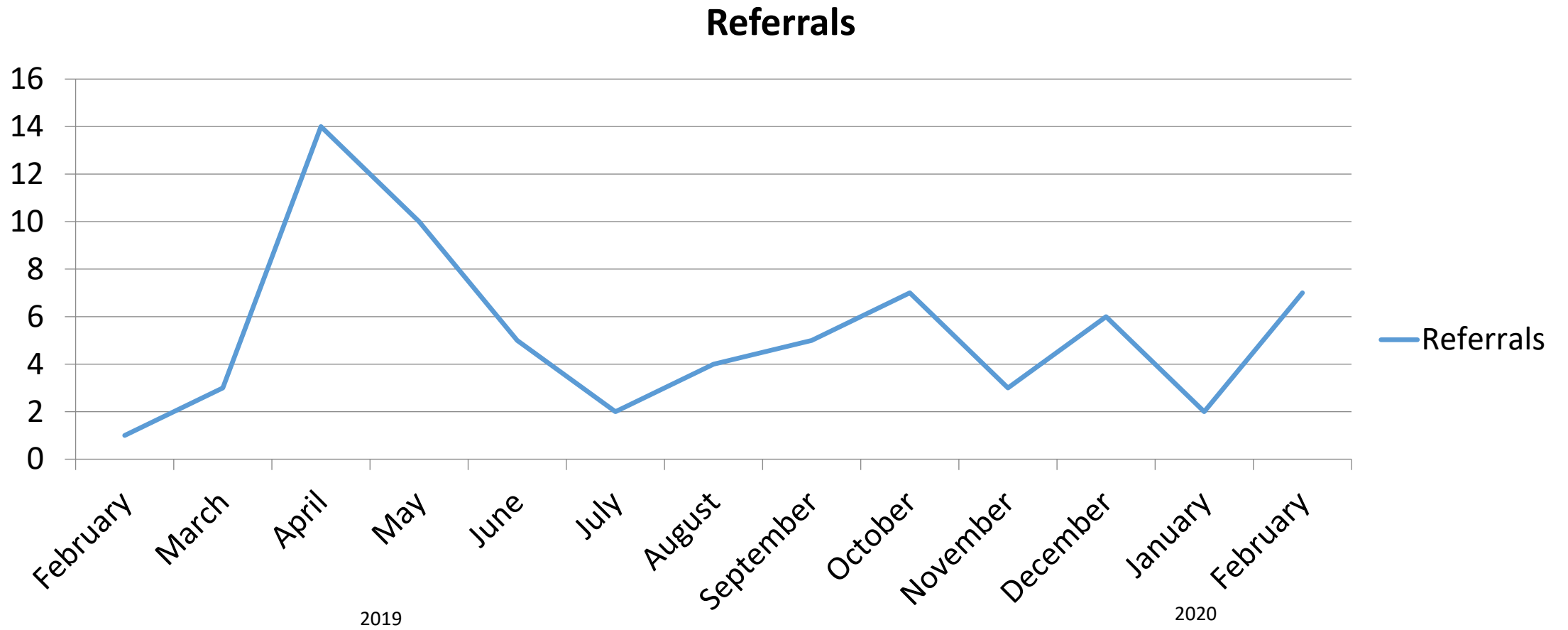
Training  
delivered across  
all boroughs to  
over 30 services

Individual  
assessments  
and intervention  
for 16 service  
users

Consultation  
and supervision  
in relation to a  
further 5

Signposting for  
all referrals

# Referrals over time





# Who has been referred?

- 10 currently inpatient
- Remainder at risk of admission
  - Frequent users of crisis services
  - Accommodation difficulties
  - Community services struggling to manage presenting problems
- Many not suitable – LD, forensic risk, not at risk of admission

# Crisis pathway: what has been offered?



## Thorough assessment

Communication needs  
Neuropsychological  
assessment



## Full formulation, incorporating autism specific needs



## Individual work on autism related difficulties

Joint work with current  
provider



## Family work

Family intervention  
Understanding autism and  
mental health



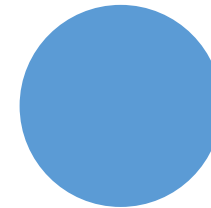
## Consultation and coworking with current staff

Staff training  
Positive behaviour support  
planning

- 30 year old woman with ASC and psychotic episodes
- Under Early Intervention in Psychosis team
- Cycle of brief admission, discharge, readmission
- Intervention:
  - Improving communication with services
    - Communication passport
    - Training for support staff
  - Incorporating ASD needs into care plan
    - Sensory assessment, longer term care planning
- Outcome – no further admissions since TCA involvement started

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# Case example



# Service development pathway



## **Training**

Introduction to autism

Working with people with autism  
and mental health needs



## **Resource library**

Clinical resources

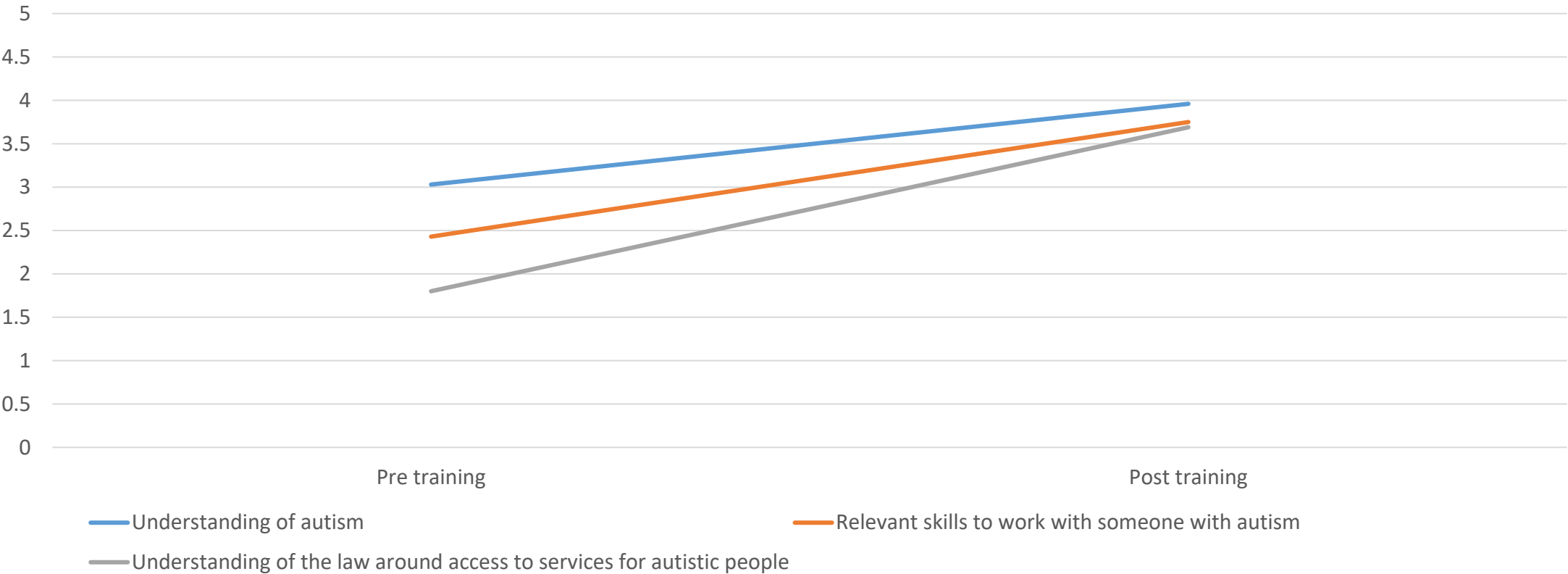
Research evidence



## **Consultation**

# Training improved understanding of autism

Self-ratings of staff attending training sessions



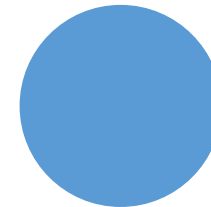
- Training has led to improvement in mainstream mental health service knowledge of autism and Transforming Care Agenda:

*“I was unaware of the legislation related to autism.”*

*The training content is very relevant to my role. It made me realise that as a service we should make preparation for people with autism”*

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# Training feedback





# Consultation



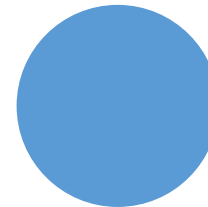
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- Consultation clinic
- Feedback
  - *"Consultation was extremely helpful. I felt listened to and was given excellent advice and guidance. The team took time to hear my views and explore further avenues of support with me"*

- Complexity of people referred
  - Significant unmet needs
- High levels of demand for autism specific input
- It's important for autism to be everyone's business
  - Care pathways
  - Individual care

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# What have we learned?



# Next steps



## Extending the MDT



## Refining the crisis pathway

Developing at risk registers  
Refining the offer to services



## Focus on developing capable local services

Embedding TCA in mental health care pathways



## Longer term follow up of service user outcomes

# References

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