

Building the right support for people with a learning disability and autistic people action plan

On 15 July the government published its [Building the right support for people with a learning disability and autistic people action plan](#). The plan brings together into one document key elements from existing reports, recommendations and announcements from across government and public services aimed at improving care and support for people with a learning disability and autistic people, to provide a clear view as to what must be delivered. For further information please contact Ella Fuller, NHS Providers senior policy advisor (ella.fuller@nhsproviders.org).

Key points

- The action plan is divided into six chapters:
 - keeping people safe and ensuring high quality health and social care
 - making it easier to leave hospital
 - living an ordinary life in the community
 - a good start to life
 - working with changes to the system
 - national and local accountability to deliver
- The plan sets out five principles to act as a guide and to help create a common vision across all commitments outlined in the action plan:
 - keeping people safe
 - personalised care and support
 - working together towards improvement and integration of care and support
 - holding ourselves and others accountable
 - inclusive decision-making
- Key commitments include:
 - a review of inpatient advocacy and recommendations for next steps by Summer 2022;
 - refreshing the Care (Education) and Treatment Review policy by Summer 2022;
 - consideration by the Department of Health and Social Care (DHSC) of a rapid review of funding flows which [was published](#) on 14 July 2022;
 - supporting employers to embed the learning disability and autism core capability frameworks across relevant social care and health workforces by April 2023;

- rolling out an accredited commissioning qualification and a training programme for 2 cohorts of senior leaders to increase their skills and knowledge to support local commissioners by April 2023; and
- developing and trialling autism training in (a) adult inpatient mental health settings (March 2023) and (b) mental health community and inpatient settings for all age groups (September 2022 to April 2025).
- The Building the Right Support Delivery Board will support implementation of the plan, with task and finish groups established in particular areas, and will hold commitment owners accountable for delivery. Individual organisations with responsibility for commitments will also use their own governance and reporting mechanisms and the levers within their power to drive progress.
- While the Delivery Board's primary focus is at a national level, it is recognised that regional and local level implementation is important to successful delivery. The government wants the action plan to be actively used by and to inform the health, social care, education, housing, and criminal justice workforce with the levers in their local areas to make positive change happen.
- The plan's emphasis is on strengthening community support, but it is recognised that there may be times when admission to a mental health hospital would be appropriate and offer a therapeutic benefit. The government therefore plans to retain some inpatient capacity to meet the needs of people with co-occurring, treatable, mental health conditions. Some capacity for forensic inpatient care will also be retained so that people with a learning disability or autistic people who come into contact with the criminal justice system have a safe and appropriate alternative to prison.

About the plan

The first section of the plan sets out what the government wants to achieve, learnings from work in this area so far and what is being done differently as a result, and analysis of latest data to understand progress to date on [original national plan](#) published in 2015 by NHS England (NHSE).

Key areas of focus

The key areas of focus set out in the action plan are:

- ensuring that people with a learning disability and autistic people of all ages experience high quality, timely support that respects individual needs and wishes and upholds human rights
- understanding that every citizen has the right to live an ordinary, self-directed life in their community
- keeping each person at the centre of our ambitions and ensuring that we consider a person's whole life journey
- collaborating across systems to put in place the support that prevents crisis and avoids admission

- ensuring that, when someone would benefit from admission to a mental health hospital, they receive therapeutic, high quality care, and remain in hospital for the shortest time possible
- making sure that the people with a learning disability and autistic people who are in mental health hospitals right now are safe and that they are receiving the care and treatment that is right for them
- working together to ensure that any barriers to an individual leaving a mental health hospital when they are ready to do so are removed.

Guiding principles

The plan sets out the following principles to act as a guide and seek to create a common vision across all commitments outlined in the action plan:

- keeping people safe
- personalised care and support
- working together towards improvement and integration of care and support
- holding ourselves and others accountable
- inclusive decision-making.

Contents of the plan

The action plan is divided into six chapters:

- 1 keeping people safe and ensuring high quality health and social care
- 2 making it easier to leave hospital
- 3 living an ordinary life in the community
- 4 a good start to life
- 5 working with changes to the system
- 6 national and local accountability to deliver

The objectives, timescales, milestones and the lead organisation(s) of commitments in the plan have been set out in [Annex A: Table of Commitments](#). Below we summarise the key commitments and timescales for delivery in each of the chapters.

1. Keeping people safe and ensuring high quality care

Key commitments and timescales for delivery in this chapter include:

- Completing a **joint DHSC and NHSE review of inpatient advocacy** and developing recommendations for next steps – Summer 2022

- Ensuring people with a learning disability and autistic people have received a **Safe and Wellbeing Review** if they were in mental health inpatient care as at 31 October 2021 – Summer 2022
- Continuing **Independent Care (Education) and Treatment Reviews** and work with the Oversight Panel to improve the circumstances of people who remain in long term segregation – all those within scope to be offered a review by end of 2022
- Completing a **pilot to reduce the length of time people remain in inpatient care in segregation**, as well as to support earlier transfers of care to less restrictive settings – extended until March 2023
- **Supporting employers to embed the learning disability and autism core capability frameworks** across all aspects of the social care and health workforces that support people with a learning disability and/or autistic people – April 2023
- Implementing a programme of **personalised workforce development** for staff who support those who may be at risk of admission or are ready to be discharged – April 2023
- Providing community learning disability teams and intensive support teams with the opportunity to commence **advanced and consultant level practice training** by April 2023 – April 2022 to 2025
- **Developing and trialling autism training** for staff working in:
 - adult inpatient mental health settings – March 2023; and
 - mental health community and inpatient settings for all age groups – Sep 2022 to Apr 2025

2. Making it easier to leave hospital

Key commitments and timescales for delivery in this chapter include:

- **Refresh of the Care (Education) and Treatment Review** policy – Summer 2022
- Helping to **speed up discharges** through the Community Discharge Grant – Spring 2023
- Publishing an action plan on the recommendations in **Neurodiversity in the Criminal Justice System: A review of the evidence report** – the **first iteration** was published on 30 June 2022
- Participating in **discharge planning** for inpatients detained under Part III of the Mental Health Act to help identify barriers and progress individual cases as appropriate – ongoing

3. Living an ordinary life in the community

Key commitments and timescales for delivery in this chapter include:

- Embedding a **strategic commitment in all local areas** to connect housing with health and care, increase local expenditure on support services, and boost supply of supported housing via £300 million investment from financial years 2022-3 to 2024-5 – end of 2024 to 2025
- **Capital funding programmes** underway to incentivise new supply of specialist and supported housing: Affordable Homes Programme, Care and Support Specialised Housing, NHS capital programme – 2026, 2024 to 2025 and 2024 to 2025 respectively

- Commissioning **independent research to understand the size, cost and demand of the supported housing sector**, including that which meets the needs of people with a learning disability and autistic people – end of 2023
- Providing funding to local areas to **deliver the Disabled Facilities Grant** (£573 million committed per financial year) – 2022-3 to 2024-5
- ADASS, LGA and the Building the Right Support Advisory Group to **identify 'What Good Looks Like'** which will be followed by a report that includes best practice examples – September 2022
- NHSE to expand programme that enables **the development of small community driven organisations** to deliver high quality, bespoke support to 6 additional integrated care systems (ICSs) – March 2023
- Undertaking **funded peer reviews** to support an area to develop and improve service delivery in an additional four ICSs – March 2023
- Rolling out an **accredited commissioning qualification** for current and aspiring commissioners – April 2023 (measure of success in the long term is a health and a social care commissioner per local area to have completed the qualification by April 2025)
- Rolling out of a **training programme for two cohorts of senior leaders** to increase their skills and knowledge to support local commissioners – April 2023 (measure of success is a senior leader per local area to have completed the qualification)
- **Developing a range of commissioning guidance** to build the capability and knowledge of the commissioning workforce, designed to complement qualifications and training – **autism** and **learning disability** focused guidance have both been published with webinars with sector partners held to promote use of the guidance
- Publishing **guidance setting out minimum expectations for Dynamic Support Registers** to identify children, young people, and adults most at risk of admission – Summer 2022

4. A good start to life

Key commitments and timescales for delivery in this chapter include:

- Continuing, as part of the NHS Long Term Plan, to test and implement ways to **reduce variation across diagnostic pathways** – March 2023
- Expanding an **autism early identification pilot in Bradford** to at least 100 schools over the next three years – delivery across other areas by July 2024 and evaluation of delivery by December 2024
- Testing and developing the above **pilot across four other local areas** with different demographics and commissioning models – delivery by July 2022 and evaluation of delivery by January 2023
- Announcement of up to **40 new and special and Alternative Provision free schools** – Spring 2022

- Continue **Autism in Schools** project in two ICS areas in each of the seven NHS Regions – March 2023
- Supporting local authorities to develop **innovative approaches to the delivery of respite care and short breaks** – delivery of first projects to commence April to June 2022, second year bidding round launches Autumn 2022
- A **full ICS footprint roll out of designated keyworkers** for children and young people with a learning disability and autistic children and young people – March 2023
- **Support for autism awareness training for education staff** in early years, schools, and further education settings – implementation from April 2022 to March 2025
- Continued **targeted support for families and parents of children and young people with special educational needs and disabilities (SEND)** and SEND services – implementation from April 2022 to March 2025

5. Working with changes to the system

Key commitments and timescales for delivery in this chapter include:

- **Undertaking a rapid review of funding flows**, which will make recommendations that DHSC will consider and act on as appropriate – the review **was published** on 14 July 2022
- **Reviewing section 75 of the NHS Act 2006** (which allows partners such as NHS bodies and councils to pool and align budgets) to simplify and update the underlying regulations. Post review, DHSC will publish **revised guidance on the use of pooled budgets** – Spring 2023

Reform of the Mental Health Act 1983

There are a number of commitments across the chapters that the plan highlights will be delivered via new legislation to reform the Mental Health Act 1983 (MHA) including:

- **limiting the scope to detain** people with a learning disability or autistic people under the MHA;
- making it a **statutory requirement** for responsible clinicians to have regard to the findings and recommendations from **Care (Education) and Treatment Reviews (C(E)TRs)** and include them in the patient's care and treatment plan, unless there are good reasons not to;
- introducing a **new power of Supervised Discharge** to enable the discharge of restricted patients into conditions in the community which amount to a deprivation of liberty; and
- introducing **new duties on commissioners** to ensure that there are adequate community-based services in their local area to support people with learning disability and autistic people and to hold a dynamic support register which includes an 'at risk of admission' component.

6. National and local accountability to deliver

The final chapter of the plan highlights the importance of promoting accountability within the system and recent policy developments relevant to improving outcomes for people with a learning disability and autistic people that will support this. This includes the changes introduced by the new Health and Care Act 2022 to increase integration between health and social care, and the new duty on the CQC to assess local authorities' delivery of their adult social care functions.

A range of specific actions are set out in the corresponding section in [Annex A: Table of Commitments](#) (page 35-39). These include:

- meeting the commitment made by the government, during the passage of the Health and Care Act, to go further by expecting all ICBs to have a named lead for learning disability and autism through the issuing of statutory guidance by NHSE;
- CQC's work to deliver an inclusive, public 'listening' service and improve how they undertake inspections; and
- the government's plans around adult social care and a commitment to publish a children's social care implementation strategy by the end of the year.

The final chapter also sets out details regarding governance, implementation and assurance of the plan. The Building the Right Support Delivery Board will support implementation of this action plan, with task and finish groups established in particular areas, and will hold commitment owners accountable for delivery. Individual organisations with responsibility for commitments will also use their own governance and reporting mechanisms and the levers within their power to drive progress.

This section also makes clear that, while the Delivery Board's primary focus is at a national level, it is recognised that regional and local level implementation is important to successful delivery. The government wants the action plan to be actively used by and to inform the health, social care, education, housing, and criminal justice workforce with the levers in their local areas to make positive change happen.

The plan also acknowledges that some local areas have had greater success in the aims of the original Building the right support national plan, and the government is keen to learn more about this regional variation and promote good practice. It is also keen not to lose sight of the positive outcomes that have been achieved with the right support and structures in place.

NHS Providers view

We have **previously highlighted** that there is clear evidence of a historical inequity in the development, commissioning and provision of care and support for people with a learning disability and autistic people, which means that many individuals are not able to access the care and support that they need, from diagnosis and throughout their lives, in a timely way. This needs to be addressed as a priority, and we welcome the publication of this action plan and its aim to provide clarity as to what must be delivered and by when.

The commitments outlined in this action plan should help to tackle the challenges impacting trusts' ability to consistently provide the right level and nature of support for these groups of individuals. This includes actions to address disjointed and fragmented approaches to commissioning and improve awareness and specialist skills and expertise amongst staff.

We have also emphasised previously the need for local systems to keep a sharp focus on the need to invest and strengthen community services and disinvest in inappropriate and poor-quality care, which this action plan should go some way to support. However, national funding mechanisms also need to be improved and made more transparent to help guarantee that funding for the sector reaches the frontline services that people with a learning disability and autistic people rely on and need the most. More investment can then be placed in establishing the full range of high-quality services people need to live as independently as possible. We look forward to hearing how DHSC plans to respond to the rapid review of funding flows that has now been published. Prioritising the NHS long term plan's ambition to give people a personal health budget where possible, with the appropriate governance and safeguards, is also important so that funding follows service users and they can get the tailored and bespoke packages of care they need.

However, there are further significant challenges impacting trusts' ability to consistently provide the right level and nature of support for these groups of individuals – most notably increasing demand, workforce shortages (particularly of specialist staff), and constrained funding for high-quality services in the community and social care. We are concerned this action plan will not fully address these issues. There has been an historical under-investment in the NHS' core capacity to deliver services for people with a learning disability and autistic people, which has been exacerbated by a sustained period of cuts to local authority support.

Greater action also needs to be taken nationally and locally to tackle the stigma associated with learning disabilities and autism, and raise awareness of the need to improve the accessibility and

quality of care and support for these groups of individuals. This is vital to ensuring appropriate support and priority is given to the full range of services people rely on, at levels which reflect the significant structural inequities these groups of individuals and services have suffered historically.

We welcome the plan recognising that there will be times when admission to a mental health inpatient setting would be appropriate and that some capacity for forensic inpatient care will also be retained. Discussions and decision making regarding the best approach to delivering high-quality, person centred care in highly specialist and forensic settings needs to be more balanced and evidence-based, taking into better account the nature of the care and support provided by these services and the geographic spread of their service user populations as per the approach taken for specialist physical health services.