Appendix 2:

Homes not Hospitals – key guidance and resources

Produced in collaboration with BASW and NICE



PREVENTING LONG-TERM IN-PATIENT MENTAL HEALTH ADMISSIONS	
Local leadership/service focus	
Local leadership	Strategic planning and infrastructure, <u>NG93, section 1.1</u> , including local leadership, joint commissioning and funding, planning and delivering services to local need. Managing risk and quality assurance
Services in the community	Developing services in the community, specialist behaviour support, intensive behavioural support during a crisis, NG93, section 1.4
Housing and related support	Giving people a choice of housing, <u>NG93, section 1.5</u>
Individual focus:	
Lead - practitioner	Importance of a named lead practitioner, QS101, statement 4 People with autism are offered named key worker, QS51, statement 4
Assessment	Assessment to identify possible triggers, environmental factors and behaviour, QS101 , statement 3, People with autism are referred to an autism team for a diagnostic assessment, QS51 , statement 1
Personalised plan	People with autism have a personalised plan developed and implemented in partnership between them, their family and carers, QS51, statement 3 Involving families and carers in developing the person's care and support plan, including how to prevent or respond to a crisis, QS101, statement 5
Support for families and carers	Early intervention and support for families and carers, NG93, section 1.3
Specialist support	Access to specialist behavioural support in the community, QS101, statement 8, Receiving support about where and how to live, QS101, statement 9, People with autism have a documented discussion with a member of the autism team about opportunities to take part in age-apppropriate psychosocial interventions to help address the core features of autism, QS51, statement 5
Health checks	Annual health check, <u>QS101</u> , <u>statement 2</u> People having a diagnostic assessment for autism are also assessed for coexisting physical health and mental health problems, <u>QS51</u> , <u>statement 2</u>
Crisis mental health support	People can access mental health services, including crisis support, when they need them, <u>QS14</u> , <u>statement 5</u> People using mental health services jointly agree a care plan with health and social care professionals, including a crisis plan if they may be at risk of crisis, <u>QS14</u> , <u>statement 6</u>

Resources

Quick guides:

- Arranging services for people with a learning disability and behaviour that challenges
- Person-centred future planning
- Advance care planning
- Enabling positive lives for autistic adults

Webinars:

- Webinar: <u>Commissioning and providing support</u> for people with a learning disability and behaviour that challenges (NICE/SCIE June 2018)
- Webinar: Enabling positive lives for autistic adults (NICE/SCIE February 2020)

SUPPORTING PEOPLE WHO ARE INPATIENTS IN LONG-TERM MENTAL HEALTH HOSPITALS **Commissioner and service provider focus:** Making the right use Exploring alternatives to inpatient admission, NG93, section 1.8 of inpatient services recommendations 1.8.1 - 1.8.3, 1.8.5 Individual focus: Planning and Before hospital admission, NG53, section 1.2 assessment Hospital admission Hospital admission including out of area admissions, legal status of the person being admitted, addressing personal concerns, NG53, section 1.3 People admitted to an inpatient mental health setting have access to Advocacy independent advocacy services, QS159, statement 1 Advance decisions or <u>CG136</u>, recommendations <u>1.11 – 1.1.12</u> In relation to restrictive interventions, NG10, recommendations 1.1.7 - 1.1.8 advance statements Hospital Shared learning example - Autism and Hospital Environment Project - adapting environment hospital and urgent care environments to meet the needs of people with autism Restrictive Do not use restrictive interventions to punish, inflict pain, suffering or interventions humiliation (1.4.6), NG10, 1.4.5-7. Also see QS101, statement 10 **Activities** People in hospital for mental health care can access meaningful and culturally appropriate activities 7 days a week, not restricted to 9am to 5pm, QS14, statement 8 Out of area People admitted to specialist inpatient mental health settings outside the area in which they live have a review of their placement at least every 3 months, placements QS159, statement 2, also see NG53, recommendations 1.3.10 - 1.3.12 Home community Maintaining links with home community, including relationships, employment and education, NG53, recommendation 1.1.6 Support for families Support for families, parents and carers throughout admission, NG53, section and carers 1.4 Crisis plan NG53, recommendation 1.2.9

Resources:

Quick guides:

• Reducing the risk of violent and aggressive behaviours

MENTAL HEALTH HOSPITAL ADMISSION Service and commissioner focus: Staff skills and values NG93, section 1.9 Involve people using mental health services in the delivery of training, CG136, Engaging people in improving care recommendations 1.1.19 - 1.1.20 Monitoring the Employing people to monitor the experience of care and evaluating care, experience of using CG136, recommendation 1.1.21 - 1.1.22, Information about training to become mental health services an advocate, CG136, recommendation 1.7.6 People using mental health services are asked about their experiences and their feedback is used to improve services, QS14, statement 3 **Individual focus:** Discharge and care NG93, Planning and review to support discharge, recommendations for plan inpatient services and community learning disability teams, 1.8.9 - 1.8.13NG53, care planning to support discharge recommendations 1.5.15 - 1.5.20, preparing for discharge recommendations 1.5.21 - 1.5.23CG136, section 1.7 Discharge and transfer of care People discharged from an inpatient mental health setting have their care plan sent within 24 hours to everyone identified in the plan as involved in their ongoing care, QS159, statement 3 Peer support NG53, recommendations 1.5.13 - 1.5.14 Follow up support NG53, recommendations 1.6.1 – 1.6.9 after discharge

DISCHARGE PLANNING AND FOLLOW UP SUPPORT FROM LONG TERM -IN PATIENT

Resources:

Quick guides:

• Improving young people's experiences in transition to and from inpatient mental health settings

Recorded webinars, podcast and vlog:

- Webinar: <u>Person-centred transitions between</u> <u>mental health inpatient settings and home for young</u> people (NICE/SCIE March 2019)
- Podcast: <u>Improving mental health transitions for young people</u> (NICE/SCIE May 2019)
- Webinar: <u>Supporting people with learning disabilities to live longer, healthier lives</u> (NICE/SCIE May 2019)
- Vlog: Supporting people growing older with learning disabilities (NICE/SCIE July 2019)