## You Said, We did

Building the Right Support (BRS) is the national plan, published in 2015, that sets out how areas will close some inpatient facilities for people with a learning disability, autism or both and develop high quality community services closer to home. As part of an evaluation of the programme we have asked those involved for their feedback. We take the feedback seriously. Here are some of the things we have done following the feedback we received.

You said	We did
There is a lack of accessible housing, it is often poor quality and of limited choice.	We have employed 9 Housing Leads across all NHS regions who are working jointly with the Regional Local Government Association Advisors to support TCPs in developing a pipeline of housing delivery, engaging with local partners and accessing capital funds.  NHS England has made £100 million of Capital Grant available to adapt and remodel existing housing stock and develop new models of accommodation, including shared ownership.  We have provided a suite of tools to support TCPs in planning and developing new accommodation, including national guidance: Building the right home, in addition to a number of webinars, workshops and housing surgeries.
	Each area is developing a housing plan that uses information about the accommodation needs for their Transforming Care population to identify gaps in local provision and engage local housing teams and providers in the delivery of housing solutions.
Workforce continues to be a concern for many TCPs.	NHS England continues to work with Health Education England and Skills for Care to improve the recruitment, retention and development of the learning disability and

autism workforce. Some of things that have been done include:

A national recruitment campaign is being developed for the social care sector. This is in addition to a nationwide campaign to recruit all nurses, including learning disability nurses to the NHS in its landmark 70<sup>th</sup> year.

Support has been made available to areas to help them develop locally relevant and action focused workforce strategies.

A programme of work, with Royal Colleges, to change workforce culture has been established so that it is aligned with the aims of Building the Right Support.

A national group has also been set up to explore the likely impact of Brexit on this sector.

Children and young people services are still underdeveloped in part of the country.

NHS England has established a Children and Young People Team to raise the profile of this group and work towards meeting their needs.

NHS England are investing £2m in transformational funding working in partnership with the Department for Education to accelerate progress of Transforming Care for children and young people who have learning disabilities, autism or both with a mental health condition and / or behaviour that challenges. Six TCPs have been identified who have the potential to make a step change in improving support and provision and reducing out of area and away from home placements in 2018/19 across health, social care and education, providing the opportunity to explore, develop learning and progress innovative approaches. These TCPs will take an active role in sharing learning and experience with other TCPs across England.

Each region now has dedicated children and young people Strategic Case Manager supporting and challenging TCPs in relation to their delivery for children and young people.

Areas are supported to complete a Dynamic Risk Stratification Process that covers children

and young people and make sure that children and young people have a CETR when they need one.

We have developed and published guidance for CCGs and local authorities called 'Developing Support Services for Children and Young People with learning disabilities, autism or both.'

An interdepartmental steering group, including the Department of Education, Department of Health, HEE, Parent Carer reps and voluntary sector partners has been established with an independent chair to drive cross system changes and improvements for children and young people with a learning disability or autism.

We meet termly with parent carers and sometimes more regularly with particular groups, and have parent carer and young peoples' representatives who sit on our steering and operational groups.

There is a lack of skilled commissioners with knowledge and credibility.

Through guidance such as the national service model, we have set a clear vision as to 'what good looks like' to support commissioners in the development of high quality support for people with a learning disability or autism or both.

We continue through our work with TCP partners to promote good practice and innovative approaches, and support peer to peer learning. Our work to support commissioning activity includes:

- Support to develop and shape the provider market to ensure the availability of local, high quality support through practical support, guidance and the sharing of good practice;
- Work to support commissioner development, including the qualification in commissioning for wellbeing with over 60 local authorities taking part.
- Delivery of a mentoring project for commissioners looking to develop and encourage the growth of small, highly personalised providers.
- Other projects such as 'Ask, Listen, Do' emphasise the importance of listening

	to and learning from experiences of individuals and families: creating the mechanisms to hear from people who use services can improve service delivery and support commissioners in their planning.
Co-production is inconsistent and varied.	NHS England employs Learning disability advisors with lived experience who champion co-production and inclusiveness.
	A co-production tool kit has been written with clear advice and guidance on how local areas can work successfully in a co-productive way.
	NHS England has a Learning Disability and Autism Advisory Group made up of experts by experience who play a key role in the scrutiny and oversight of Transforming Care and Building the Right Support.
	The Local Government Association facilitates the national Transforming Care Empowerment Steering Group whose members are also experts by experience and contribute to and provide advice on how to work in co-production and with a person centred approach.
	At the regional and local level, there are a range of mechanisms which support co-production: some regions have appointed specific expert by experience posts to support Transforming Care work, others utilise existing networks and partnerships including through Learning Disability Networks.
Local authorities are less visible in this process.	Resource and capacity remain a challenge: nationally the programme has bolstered the support available to local authorities and, at the local level, local authority partners remain committed to the Transforming Care Agenda, and improving outcomes for people with a learning disability, autism or both.
	The LGA and ADASS are national delivery partners and promote and support the work through things like the ADASS learning disability policy network and the regional learning commissioning networks. There is a dedicated ADASS lead for Transforming Care and learning disability and, to promote additional capacity, in 17/18 the LGA appointed seven regional senior advisors to work with

	local authorities and TCPs partners. The LGA
	also have a dedicated finance lead to support
	work around funding flows.
Finance continues to be a problem,	'Building the Right Support' set out that local Transforming Care Partnerships should use the
particularly who pays for what.	total sum of money they spend as a whole
	system on people with a learning disability or
	both to deliver care and support in a different
	way that achieves better outcomes for people.
	To support this NHSE invested £30m in
	transformation funding, recognising that there
	would be a need to invest in new community
	support before reducing use of inpatient provision.
	To support the flow of funding through the
	system there is now a mechanism for funds to
	flow from specialised commissioning hubs to
	local partnerships as individuals are discharged.
	We have utilised feedback from local areas to simplify the Funding Transfer Agreement and
	established a cross system finance group to
	support the flow of funds and to address
	strategic issues as they arise.
	We are also publishing model agreements for
	use by local partnerships that will support the
	pooling of budgets or transfer agreements and
	are providing support to TCPs to develop
	comprehensive and robust finance plans.
	The Local Government Association (LGA) has a
	dedicated finance advisor to provide advice,
	guidance and bespoke support to local
	authorities and TCP partners.
	The LGA and ADASS (Association of Directors of
	Adult Social Services) have just completed a
	series of finance workshops in each region to support local problem solving and the sharing
	of approaches.
	We have also supported the development of
	guidance, including updating the 'Who Pays' guidance.
	A personal budgets toolkit is available to
	support people to have real choice and control
	over how their health needs may be met

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Community services – there is still so much to do!

In 17/18 the LGA commissioned a number of action learning sets to support TCPs with market shaping activities. In 18/19 there will be additional support available for TCPs, particularly focused on supporting the development of the care and support provider market. NHSE have been leading a mentoring project for commissioners looking to develop and encourage the growth of small, highly personalised providers.

An additional £10 million investment by NHS England has been made available to TCPs to develop, new high quality community services these include intensive support services and community-based forensic services.

A peer review process for specialist community services aimed at supporting places to improve on service delivery is now available for TCPs across the country.

TCPs are exploring new ways of working to ensure the provision of high quality care and support. Arden, Solihull and Lancashire TCPs provide case studies as examples of their approach of working with the provider market. Naturally more time will be needed to assess the longer term maturity and sustainability of the improvements made in local care and support markets.

Also the regions work in partnership with TCPs and providers to undertake detailed assessments on need, and support joint solutions and approaches.