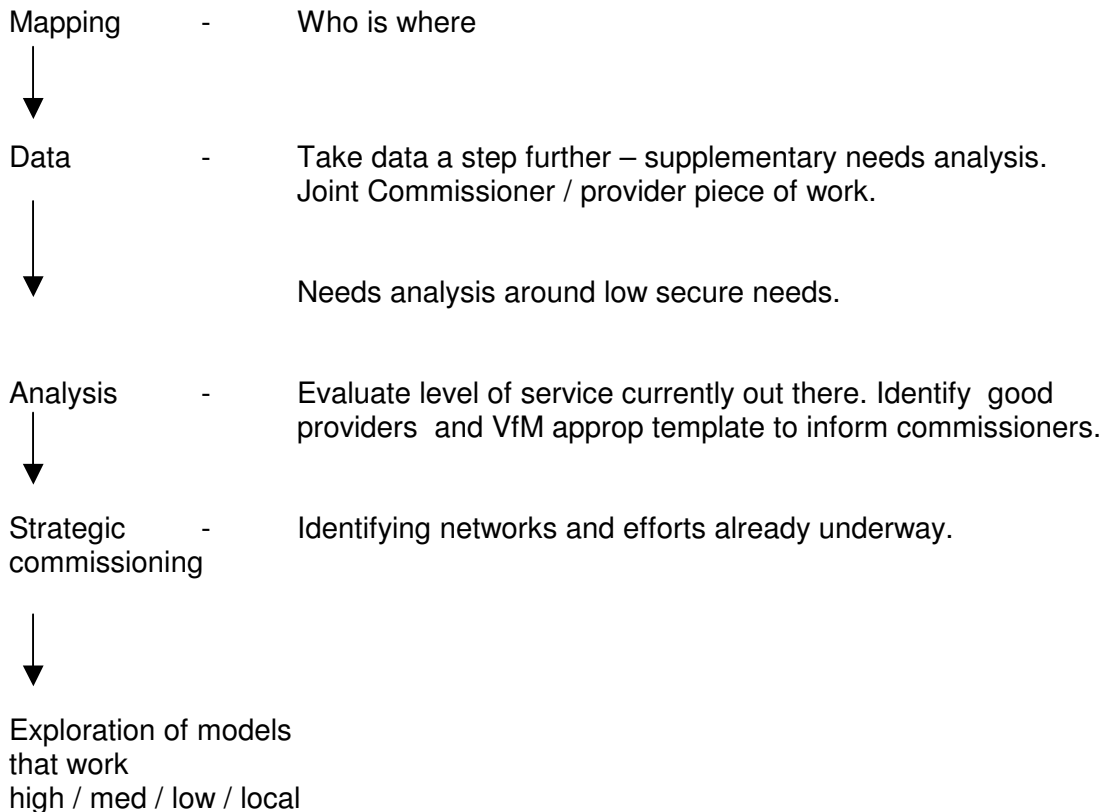


BREAKING THE CYCLE REGIONAL HEALTH AND SOCIAL CARE LEADS FEEDBACK FROM CHESHIRE AND MERSEYSIDE

KEY ACTIONS WE WILL TAKE FORWARD

1. Invite Andrew Keefe, via NWTDT, to undertake work asap across the Cheshire and Merseyside area to build on his data collection in Cumbria and Lancs



Andrew confirmed that this work cost £15k for Cumbria / Lancs – and much of his prep for the data collection aspect has already been done. We should like this work to be undertaken during next 6 months, to inform the Centre for Excellence work.

Request to NWTDT that we use our vouchers and inquire with Andrew whether he could do this for us.

2. Good practice models and training offered to provider staff and commissioners working with this group around:- Positive risk assessment → Functional analysis → Defining support packages

Staff from Olive Mount agreed to work with specialist NHS Trusts to lead on this work and present potential evidence-based approach to risk assessment and support planning that could follow people through the system with more consistency of approach. Ann Kingdon offered support around functional analysis.

3. Commissioners ensure that Breaking The Cycle is presented for adoption across local Partnership Boards and statutory organisations. Provide clear message to NHS LD/Mental health trusts that this is work that they will be required to engage with and to develop their strategy to support this work.

Local commissioners will encourage LD health specialists to link in to managed networks co-ordinated by Sheila Wright
To present to Partnership Boards and Joint Commissioning Boards within local areas for comment and adoption.

Support we would seek from NWTDT, Task Group etc.

Promotion of Breaking the Cycle across all key strategic groups, including ADSS, specialist NHS Health trusts and key health networks

Request for NWTDT to circulate Centre of Excellence material across the Cheshire and Merseyside group – feedback on content of format to Janice, Philippa or Marie

Convening of Senior level conference to reinforce strategic relevance of joining up and whole systems co-operation around this work

Nominations to work with Regional groups

- Centre for Excellence work – Janice Wycherley and Marie Mahmood (Representation may be sought from a health perspective to advise on clinical issues – inpatient services to respond to NWTDT)
- Regional Breaking The Cycle – Michelle Montrose and Mary Kirkham
- Training co-ordination – Richard Whitehead

Other key messages from Cheshire and Merseyside health and social care leads

What we are striving for:-

- Joint/common risk assessment and training across the system. J Ram gold standard to meet the key needs of the majority
- We must ensure that Providers, and especially NHS LD/MH Trusts accept forensic work as an important and legitimate part of their roles. Commissioners ensure they develop strategy and a lead – Engage with secure services, identify local lower level services. Provide them with information and support. Who services for. Where the mild LD / behaviour needs people sit.
- Feed into managed network.
- Commissioners clear statement – clinical network co-operation – leadership, within a whole systems approach. Bringing back / invest to save and preventative

Need to work into Probation / others systems - be positively interfering – work with, not instead of.

We require capacity within the medium secure sector to support local areas with the embedding of consistent, effective assessments.

J. Ram

- Can move with people through system, review and update
- Lead to the development of clear Service specifications

Given that people move around – potential of sharing info across area via managed networks.

Tough Times work – Use of independent sector hospitals. Potential for sharing info re cost and quality.

Ensure liaise with local CLDTs where people placed. Networks across region to link into local CLDTs.

Ensure we capture information and explore issues around those who fall outside of everyone's statutory responsibilities, 'Other Vulnerable Adults.'

Additions from Charlie Barker's response

- Keep it simple – strategy of 2 sides A4
- Say it often – simple messages repeated consistently
- Get better at networking – plagiarising and learning from each other
- Individualised budgets could present greatest challenge and opportunity to the system
- Ensure right skills mix – invest in training people to commission right
- Get the issue on the agenda of the Crime and Disorder Partnership Boards locally – safety +public protection + people severely disadvantaged within the system

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3.1 Marie Mahmood / Janice Wycherley – Centre for Excellence Workplan

3.2 Michelle Montrose & Mary Kirkham

3.3 Richard Whitehead – Training co-ordination

Good stories – not linked up.

Lancs / Cumbria

Pooled budget disaggregation – issue for Charlie.

Charlie response

Discussion as we have matured.

High cost has put highlight on agenda – keep the path.

On the road.

- Keep it simple in terms of what we do. Complex for us. They want accomm, job, and control.



Strategy of 2 sides of A4.

- Get better at networking. Plagerism rules ok. Learn what works from each other.
- Indiv budgets could be biggest challenge to system. Our job is to facilitate and commission in entirely different way.
- Ensure right skills max. Got skills and knowledge – including how to commission right.
- message simple. Bring people back. Keep people safe if detained. Prevent next crisis.
- Say it often.
- 3 key things in each area.
 - 3 key things across area.
- * Get item on Crime & Disorder. **PB.**
 - Attach agenda to crime & disorder partnerships.
Safe – protection – disadvantage in system.

Advise Lynn who provide feedback from each and contact detail.