

## **Evidence/Policy briefing: Early intervention to meet the needs of learning disabled children and young people with behaviour which challenges**

The Challenging Behaviour Foundation (CBF)/ Council for Disabled Children (CDC) Early Intervention project published an evidence paper<sup>1</sup> which estimates that there are around 41,500 children in England with learning disabilities (LD) who display behaviours that challenge. They have the same right to a healthy and happy life, with access to a range of opportunities as all children and young people, but to achieve this they need skilled and effective support from a range of services.

Challenging behaviours may include aggression, destruction, self-injury, and other behaviours (for example running away) which pose a risk to individuals and to those around them or which have a significant impact on everyday life.

There is strong evidence that appropriate early interventions, including NICE recommended parental training programmes like, CANPARENT<sup>2</sup>, Triple P and Incredible Years models can lead to improved parenting skills, improved parental well-being and reduced behavioural problems among children.<sup>3</sup>

Positive behavioural support (PBS) represents the most effective evidence-based approach to supporting people with LD and behaviours that challenge but the use of PBS in England is limited. PBS interventions are informed by a functional assessment to determine the cause of an individual's behaviour<sup>4</sup>. Once the causes of an individual's behaviour are established, factors can be altered to reduce the challenging behaviour. For example, elements of the individual's environment can be changed or the individual taught new skills, resulting in more effective and more acceptable behaviour. PBS intervention by local behaviour support teams can lead to potential savings through reducing out of area residential placements.<sup>5</sup>

Looking over the life course, such savings can be considerable. The average cost of keeping a child in an in-patient unit is £250,000. The average annual service cost for supporting an adult who displays severely challenging behaviour is

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<sup>1</sup> Early Intervention for children with learning disabilities whose behaviours challenge ( CBF, 2014)

<sup>2</sup> NICE (2013). *Antisocial behaviour and Conduct Disorder in Children and Young people: The NICE guidance on recognition, intervention and management* [Online]. Available at: <http://www.nice.org.uk/guidance/cg158>.

<sup>3</sup> Barlow, J., Smailagic, N., Bennett, C., Huband, N., Jones, H., & Coren, E. (2011). Individual and group based parenting programmes for improving psychosocial outcomes for teenage parents and their children. *Cochrane Database of Systematic Reviews, Issue 3*. Art. No.: CD002964. DOI: 10.1002/14651858.CD002964.pub2.

<sup>4</sup> O'Neill, R. E., Horner, R. H., Albin, R. W., Storey, K., & Sprague, J. R. (1990). *Functional analysis of problem behavior: A practical assessment guide*. Sycamore Publishing Company, Sycamore: IL.

<sup>5</sup> Lemmi, V., Reid, C., Sholl, C., Buescher, A., Ferdinand, M., Trachtenberg, M., Knapp, M. (in press). Economic evaluation of intensive therapeutic intervention for children and adolescents with learning disabilities and challenging behaviours.

£379,000. This is aside from the improved outcomes likely to result from a supportive community placement.

However, currently the dearth of effective community interventions is such that between 100-200 children are living in assessment and treatment units and over 1000 children with learning difficulties or Autistic Spectrum Disorder (ASD) are boarding in residential special schools, over one third of them in another local authority area (there are many more in independent special schools).

There are a number of current initiatives which have the potential to impact positively on this lack of community provision.

**Transforming Care** – The Transforming Care Programme was a commitment from the DH Winterbourne View Review Concordat Programme of Action. The purpose of the programme is to transform services locally to ensure that those with learning disabilities and/or autism inappropriately placed in hospital are able to move to community based settings; and to ensure that sufficient community based services are in place to prevent others taking their place.

NHS England has allocated £45m over three years to fund the Programme.

It includes a specific Child and Adolescent Mental Health Services (CAMHS)/learning disability project for children and young people, funded by DH up to March 17. The aims are to:

- prevent unnecessary admission to hospital and avoid lengthy stays, ensuring treatment has clearly defined outcomes
- To identify specific pathways that will enable children and young people to remain with or near to family and get the support they need
- To encourage innovative ideas to be tested/evaluated of supporting children, young people (CYP) and families through a grants process
- To ensure that children and young people with LD and/or autism leave school with a good education, health and care plan that supports their transition to adulthood

NHS England, the Local Government Association (LGA) and Association of Directors of Adult Social Services (ADASS) set up six partnerships in June 2015 (called Fast Tracks) bringing together commissioners across health and care. The six areas are now part of the 48 Transforming Care Partnerships (TCPs), outlined in Building the right support that are driving service redesign across England.

The six sites are located in the North, and East and Midlands regions, and were set up to lead service changes, test new approaches and share learning across England, to support wider service transformation.

Each area was invited to bid for a share of £10 million to kick-start service change and be involved in shaping the new national approach outlined in the national plan, Building the right support, from 2016/17.

After publication of Building the right support, areas were asked to establish TCPs by 15 December 2015. Following this process the number of TCPs reduced from 49 to 48 (including the six fast track areas).

### **Integrated Personal Commissioning (IPC)**

IPC is a new approach to joining up health, social care and other services at the level of the individual. It aims to enable people, carers and families to blend and control the resources available to them across the system in order to 'commission' their own care through personalised care planning and personal budgets. In tandem, IPC also supports people to develop their knowledge, skills and confidence to self-manage through partnerships with the voluntary and community sector (VCSE), community capacity building and peer support.

There are nine IPC demonstrator sites; Stockton on Tees, Barnsley, Cheshire West and Chester, Lincolnshire, Luton, Tower Hamlets, the South West, Hampshire and Portsmouth. The sites will be funded for two years and over the course of that time must focus on the needs of the following groups:

- Children and young people with complex needs, including those eligible for education, health and care plans.
- People with multiple long-term conditions, particularly older people with frailty.
- People with learning disabilities with high support needs, including those who are in institutional settings or at risk of being placed in these settings.
- People with significant mental health needs, such as those eligible for the Care Programme Approach (CPA), or those who use high levels of unplanned care.

There is a Voluntary Sector Partners Programme being set up to provide support to local areas. Details will be announced soon on the NHS England website <https://www.england.nhs.uk/commissioning/ipc/partners-prog/>

### **Future in Mind Local Implementation Plans**

The Children and Young People's Mental Health and Wellbeing Taskforce was established in September 2014 to consider ways to make it easier for children, young people, parents and carers to access help and support when needed and to improve how children and young people's mental health services are organised, commissioned and provided. They produced the Future in Mind report which was structured around five key themes:

- Promoting resilience, prevention and early intervention
- Improving access to effective support – a system without tiers
- Care for the most vulnerable
- Accountability and transparency
- Developing the workforce

The report sets out a number of complex and significant challenges which prevent the system adequately supporting the mental health needs of children

and young people. One of the groups recognised as at particular risk were those with challenging behaviour as a result of learning disabilities and or autism.

Each local area was tasked with producing a Transformation Plan setting out how they will address those challenges locally. Plans were produced last year and should now be available to view on Clinical Commissioning (CCG) websites.

For more information about effective local interventions for this group of children see [www.pavingtheway.works](http://www.pavingtheway.works)

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