

The impact of COVID-19 on Learning Disability Services in Somerset

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Working with people and providers

- Welfare calls with providers: checking how are they, saying thanks, picking up and addressing concerns and capturing good news stories.
- Weekly multi-agency discussions across health and social care around calls to providers, sharing information and intelligence to ensure a collaborative approach and coordinated response.
- Weekly commissioning attendance at virtual RCPA meetings: ensuring care providers have a forum through which to raise key issues, concerns or plans for the future.



Working with people and providers:

- Supporting providers to work on an outreach basis for people unable to attend day service provision.
- Understanding the need and opportunity for future change: Recognising from people supported that they want to do things differently once COVID restrictions are eased and working with providers around how to achieve this and transform the market.



Coming out of COVID 19:

- Day Opportunities: How do these look different? Current review looking at how people can return safely, how will it look different, what do people supported want?
- Housing pathways: Working on a housing pathway that supports people having fair equitable housing options. Supporting professionals to be involved at the right time to ensure a more seamless pathway transition for people.



Coming out of COVID 19:

- Respite and Emergency accommodation: A review that recognises the need for a 'menu' of options. Highlighted through how respite has been delivered differently during COVID and through emergency accommodation that has been needed.
- Continuing open discussion with providers: Different conversations about the future of support for adults with a learning disability to continue and involve all stakeholders.



Transformation:

Steps 2 Independence (S2I):

Time-focussed, outcome-targeted work with individuals, with activity tailored to the goals that people want to achieve.

The focus for S2I is to shift from an hourly rate commissioning model to a more flexible and person-centred approach.



Transformation:

Brain In Hand:

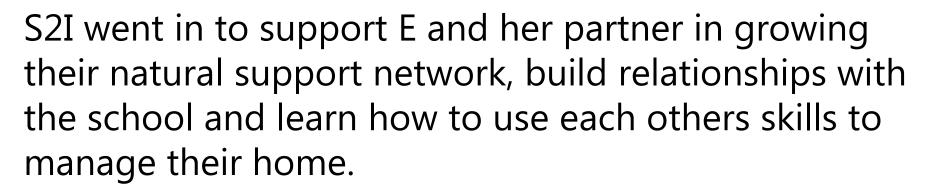
Brain in Hand is a personalised app that links the user with their carers and support teams. It provides people with their own specific ways to cope, and is tailored to the individual's needs giving them the confidence to do what is important to them.

It can give prompts, reminders and links to verbal responders or people's own circle of support, who can intervene when asked, offering reassurance and the help needed to get back on track.



Case Studies:

S2I: E was receiving support at home with her daughter and partner. The family had become dependant on the support although the annual review showed that the support was restrictive to the family, especially the daughter.



Since S2I E is receiving no formal support. E has reported that she is happy and being supported around how to access employment.



Impact S2I & Brain in Hand (BIH) from COVID

- Both projects will have been paused to some degree due to COVID demands.
- S2I has been paused most significantly as staff have had to be redeployed into supported living and residential services. COVID restrictions have also significantly impacted as staff have not been able to work in people's homes to achieve goals.
- BIH has been paused in relation to set ups, but is now being looked at virtually. In addition, the collation of case studies is having to be done in a different way so this work has also been slowed.

