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Baroness Bull House of Lords London SW1A 0PW

8 June 2020

Dear Deborah,

I do hope you have been keeping well during these strange times and I do miss our chats in the Lords. I committed to write to you during the Private Notice Question on 30th April about the impact of coronavirus on the care of individuals with learning disabilities. Apologies for the time it has taken to respond, I was keen to ensure you received a thorough and considered response.

We recognise that Covid-19 poses specific challenges for people with a learning disability, autistic people and their families and carers. We are working hard across government, the NHS, social care and with delivery partners to ensure that we mitigate these challenges as much as possible and to ensure the safety of people with a learning disability and autistic people, including in inpatient mental health settings.

I also want to assure you that we remain committed to supporting people of all ages with a learning disability or autism to live well in the community, rather than in inappropriate hospital care. Building the Right Support is our national plan to ensure this happens and we and all delivery partners are committed to implementing Building the Right Support in full.

You asked how many planned moves of children and young people with learning disabilities from assessment and treatment units back into supported living environments have been delayed by coronavirus. While NHS Digital does not hold data specifying whether the reason for delayed discharge was related to coronavirus, the Department of Health and Social Care (DHSC) is monitoring the impact of coronavirus on people with learning disabilities detained in residential settings and is working with NHS England and Improvement, the care sector and stakeholders on this important matter. Data collections (including on restrictive practices) continue to be collated and published. Since the start of the coronavirus outbreak, NHS England and Improvement has been clear that discharges from inpatient settings of people with a learning disability should continue as usual as far as possible. The latest published data (provisional and suppressed) from Assuring Transformation (at the end of April 2020) showed that the number of children and young people in an inpatient setting had reduced by 15 from the end of March to 190.

Decisions about the best course of action, treatment and care pathway for people with learning disabilities and autistic people should be made between the individual, their families and the professionals providing their care. Residential care settings must always seek to fully protect the rights of people with learning disabilities and autistic people, including throughout the course of this pandemic.

With regards to your second question about what steps are being taken to ensure the complex needs of individuals with learning disabilities are being met while they wait, NHS England's regional teams are active in supporting local areas to progress discharge plans, to overcome any barriers, and to prioritise people with the most complex needs to ensure there is a continued focus on discharge into the community.

Care (Education) and Treatment Reviews (C(E)TRs) are continuing by virtual means as far as possible and commissioner contacts are taking place with the patients that they commission care for via alternative methods such as telephone calls or virtual meetings. Even during this emergency period DHSC expect that guidance about the principles of C(E)TRs for people with learning disabilities and/or autism should be followed.

Each region also has a detailed plan for the continuation of services during the Covid-19 pandemic, including impatient services for children and young people with a learning disability or autism. These plans, alongside mechanisms such as continued C(E)TRs are providing continued oversight of service delivery, helping to gauge capacity and demand to ensure that individuals still get the care that they need. For some of the young people with most complex needs, who require particular planning arrangements for their discharge, NHS England are piloting a senior keyworker role in line with the Long Term Plan commitment. The role will focus on ensuring the system works cohesively to provide clear and comprehensive plans for people to leave hospital safely and return to the community provision that will best meet their needs.

Every person with a learning disability must receive the same high-quality care that we would all expect.

I hope this information is helpful in explaining the steps being taken to support people with a learning disability in inpatient settings during the coronavirus pandemic. I am placing a copy of this letter in the House Libraries.

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ELIZABETH BERRIDGE

PARLIAMENTARY UNDER SECRETARY OF STATE