

## **Appendix 1**

### **Medway Transforming Care - Case study**

The patient's name in this case study has been changed.

Lucy was born in Medway in 1992. She was diagnosed with hearing difficulties around 18 months of age. She is still hard of hearing and has input from ENT services. Lucy attended infant school then a mainstream junior school. She had considerable difficulties at school both socially and academically and also reported having been bullied and that she was unhappy. She then went on to a Special Needs Secondary school before moving on to mainstream college in Kent.

Lucy reported that she had some difficulties at home and her behaviour was challenging. She recalls having arguments with her parents and male siblings. She has been physically violent towards her mother and father and has a history of high risk behaviours towards others. She remained living at home with her parents till just prior to her 18th birthday, when she was placed in a supported living accommodation, due to the risk of physical aggression that she presented to her family.

She moved from the supporting living accommodation due to difficulties with peers and conflicts within the placement. Her placement subsequently broke down and she was moved to a new supported accommodation in Kent. Lucy's behaviour did not improve, however, and she was physically violent on numerous occasions towards staff and also damaged property.

A Mental Health Assessment (MHA) was requested and Lucy was detained under the MHA 1983 (amended 2007) on S.2 and subsequently on S.3 for a period of 2 years. She received a diagnosis of emotionally unstable personality disorder, autism, ADHD and learning disability.

Lucy was discharged to a specialist provider, then moved on to other specialist providers and continued to present abusive, violent and challenging behaviour, each provider was unable to manage the risk Lucy posed to herself and others.

Although each Transforming Care patient has needs that are unique to them, their experiences of being in a secure hospital setting or community supported living/residential placement often include common themes. Placements break down, providers are unable to manage the level of risk and challenging behaviour, and patients do not necessarily improve or feel better in secure hospital settings which are often very costly.

Lucy's parents had highlighted the need for any future placement in the community to be tailored specifically to her needs to ensure that another placement breakdown didn't occur. Lucy and her family asked for her social and occupational needs to be paramount to any new care package. Lucy also wished to move back to Kent to be near where her parents, siblings and extended family now lived and to be housed in a property in which she could have 24hr care provided in the community. A future goal for Lucy was to have a dog, attend college and have inclusion within her local community.

Lucy was recorded as a Transforming Care Patient due to her diagnosis of LD and autism. Through this programme, she was offered two Care and Treatment Reviews (CTRs) to assess the right care and support that she needed. Both reviews recommended Lucy should be discharged into the community in accordance with Building the Right Support (BRS), the National Plan for Transforming Care. At this time there was no treatment or discharge plan in place.

Medway had recruited a Complex Case Coordinator in 2017 to coordinate discharge plans for TC patients in secure hospital beds. With the Coordinator in post overseeing the discharge process and the driver provided by the recommendations from the CTRs, Lucy was subsequently discharged into a bespoke placement, approximately 10 minutes away from her parents with a staff team around her, at the beginning of January 2018. Her mother resigned from her job in order to oversee the set up of the care package and provide support, as she felt this was their last chance to get it right for her daughter.

Lucy's mum has overseen the set up of her staff team with the support of her social worker and Lucy is now receiving a Direct Payment (DP) from social care. The health component of her care package will be paid via a Personal Health Budget (PHB).

Since discharge from hospital in January 2018, Lucy has been doing well and experiencing improved quality of life. For example, she wanted to lose weight and has been able to have much more control over her food and mealtimes. She has successfully lost weight and is gaining in self confidence. She has visited the opticians recently and chosen her own spectacle frames, something she has never previously been able to do. She is also volunteering at a local rescue centre twice a week and is accessing the community for leisure activities, including having facials and manicures and going to Costa for a coffee which she greatly enjoys. Her mother stated, she "laughs and giggles so much now and that sparkle" she had told me about is "back". Recently, Lucy went out for a family dinner one Saturday night and was very excited, as she had not been out for a family meal for many years.

Mum has also emailed to tell us that Lucy would like to volunteer at a local riding stable and wishes to assist a dog trainer at dog training classes. She has also been helping her Dad, who is refurbishing their cloakroom and has asked that her mother looks into courses where she can learn DIY.

Mum confirmed it has not always been easy and they have had some 'bumps in the road along the way' but they will sit and reflect on any issues that have arisen on a daily basis, including how things could have been handled differently. Mum said it has been a lot of work but she is proud at how much progress has been made and how well Lucy is doing.