**Mental Health, Learning Disability and Autism Inpatient Quality Transformation Programme**

**Annex 3**

The [NHS Long Term Plan](https://www.longtermplan.nhs.uk/) has a strong focus on expanding and improving the quality of community care for people with mental health problems, including people with a learning disability and autistic people.

As a result, more people are accessing community mental health services than ever before and there remains a real commitment to build on that progress, so that people can access timely, high-quality community support, closer to their families and loved ones.

Some people also need hospital support but the quality of the support provided to people with mental health problems, including people with a learning disability and autistic people in inpatient settings, can vary.

While many services across England provide safe, therapeutic inpatient care, our aim has to be to drive forward improvements in quality and safety across the board so that all patients experience excellent and meaningful care where staff and people they support can flourish.

In addition to positive work taking place locally, we know from learning from the safe and wellbeing reviews for people with a learning disability and autistic people and from listening to patients, families, clinicians, system leaders and other stakeholders that we need to go further to tackle some of the root causes and contributing factors and improve standards.

A new Mental Health, Learning Disability and Autism Inpatient Quality Transformation Programme was established in 2022 to support cultural change and a new bold, reimagined model of care for the future across all NHS-funded mental health, learning disability and autism inpatient settings. Central to this will be the acceleration of new models of care that enable systems to harness the potential of people and communities, within a citizenship model that promotes inclusion and respects their human rights. This programme will complement and further support our existing commitments to improve the quality of community care, and the Mental Health Act reform agenda.

This, and any related workstreams, will be co-produced with key stakeholders from across systems and especially people, families and staff. There will be specific consideration of the cultural change required to create and sustain an inpatient environment in which patients and staff can flourish, such as reducing restrictive practice. Ensuring that staff feel supported and proud of the work that takes place within inpatient settings will be key.

All mental health, learning disability and autism inpatient services for children and young people, adults and older adults are in scope of this programme, including specialised inpatient services.

In partnership with people and families, clinicians, systems, providers, partners and building on existing positive practice across the country, we will:

1. Explore and accelerate different therapeutic offers, including community-based alternatives to admission and a culture within inpatient care that is safe, personalised and enables patients and staff to flourish.
2. Have a clear oversight and support structure that is sustainable and transparent, where issues are identified early. Services that are challenged will have timely, effective, and coordinated recovery support.

The programme is underpinned by a £36 million investment over three years, and it focuses on the following themes:

**Theme 1. Localising and realigning inpatient services, harnessing the potential of people and communities**

* Support integrated care boards (ICBs) to have oversight of and report on use of inpatient settings for their population and understand inequalities within this.
* Co-create the long-term vision to localise and realign mental health, learning disabilities and autism inpatient services, including alternatives – and the service models underpinning them.
* Support ICBs and provider collaboratives to develop their local strategies to realign commissioned services in line with the co-created vision.
* Deploy implementation support.

**Theme 2. Improving culture and supporting staff**

* Co-produce the model and standards for safe therapeutic inpatient care which is trauma-informed, autism-informed and equality-focused.
* Deliver a programme of support which includes a focus on leadership and considers ‘ward to board’ requirements to generate cultural change alongside broader workforce development and learning networks.
* Co-produce inpatient roles that enable and sustain therapeutic inpatient care, building on good practice where it exists, and reducing administrative burden.
* Identify the longer-term workforce requirements to deliver the vision in full.

**Theme 3. Supporting systems and providers facing immediate challenges**

* Establish a mental health, learning disability and autism quality recovery oversight group across national and regional directorates which brings together existing support offers and identifies gaps where they exist.
* Through the oversight group, ensure the most challenged mental health, learning disability and autism inpatient units (NHS and independent sector) have an appropriate support package in place.
* Align support offers available to systems and providers facing immediate challenges in the context of the [NHS operating framework](https://www.england.nhs.uk/publication/operating-framework/).
* Strengthen the metrics in the [NHS oversight framework](https://www.england.nhs.uk/nhs-oversight-framework/) to account for mental health, learning disability and autism inpatient quality.
* Support provider collaboratives to provide quality recovery support to their local providers.

**Theme 4. Making oversight and support arrangements fit for the sector**

* Reset the roles and responsibilities for commissioning and assuring the quality of mental health, learning disabilities and autism inpatient care across the NHS and independent sector.
* Establish a new oversight and early warning signs framework for all NHS-commissioned mental health, learning disability and autism inpatient settings which increases patient, family and staff voice; this will focus on the causal factors of poor-quality care and align with the [Patient and carers race equality framework](https://www.england.nhs.uk/mental-health/advancing-mental-health-equalities/%29).
* Review existing data burden on inpatient services, and reduce metrics which do not clearly improve quality, ensuring measures relating to patient care and patient and staff experience are prioritised.

**How success will be measured**

* A greater proportion of people with mental health needs, including those with learning disability or autism, will be supported in their community, in ways that promote their citizenship and human rights.
* A greater proportion of those who do need hospital support will access it closer to those who know and love them.
* Improved patient experience.
* Improved staff experience in mental health, learning disability and autism inpatient services.
* More timely, expert and co-ordinated support for services when they need it, with feedback from people, their families and staff enabling earlier identification of challenged services.