

Meeting: Strategic Commissioning Board			
Meeting Date	07 February 2022	Action	Approve
Item No	7	Confidential / Freedom of Information Status	No
Title	Autistic Spectrum Disorder / Attention Deficit Hyperactivity Disorder Diagnostic Service		
Presented By	Will Blandamer, Executive Director of Strategic Commissioning		
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Clinical Lead	Maxine Lomax, Clinical Lead		
Council Lead	Adrian Crook, Director Adult Social Services and Community Commissioning		

Executive Summary
<p>Bury CCG has been an associate to the North East Sector (NES) contract for the provision of an adult Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD) diagnostic service since 2014.</p> <p>The service provider is LANC, and the current contract expires in April 2022. The lead commissioner is Heywood, Middleton and Rochdale (HMR) CCG.</p> <p>The paper provides an update on the service</p> <ul style="list-style-type: none"> • It is a requirement of the NHS long term plan to provide diagnostic assessment for ADHD / ASD in a timely manner with a clear driver to reduce waiting times over the next three years with specialist services. • Greater Manchester Health & Social Care Partnership (GMHSP) Autism Strategy has a clear vision on working towards individuals receiving a timely diagnosis and support. • The Autism Act 2009 sets out duties and expectations on local authorities and health to plan and commission appropriate service for adults with autism including a pathway for diagnosis. • LANC offer a multi-disciplinary assessment and diagnostic service with ongoing support and management for adults with ADHD and ASD across the North East sector including Bury, HMR and Oldham CCGs. • In 2019 re-tendering this service was paused, due to ongoing work to update the service specification and to review investment, as requested by GMHSP. • The LANC contract was extended until March '22 with some additional investment to meet the increase in demand and reduce waiting times. • Referrals into the service are made by GPs via a dedicated email address. Screening assessments are sent out to determine suitability of the referral. • Assessments take place in Townside Primary Care Centre.

- The service is commissioned to support 75 new referrals per month. There has been a significant increase in referrals into the service, between Jan '21 and Nov '21 the service received an average of 145 per month.
- The service is working hard to reduce waiting times.
- In July 2021, commissioners reviewed the service and reported significant improvements in service delivery, activity and quality targets.
- LANC received 39 compliments in quarter one of 21/22 from service users for the service they received.
- The service is registered with the CQC, an inspection of LANC was carried out in October '21 and rated the service inadequate.
- CCG commissioners carried out their own inspection and have given assurances that the service is safe and are assured that LANC have either met the requirements set out by the CQC or are working towards meeting them.
- As a result of the inspection GMHSP are providing an investment of £140,000 to support the development of systems and e-prescribing systems to sustain and bolster the service recognising the increase in service demands.
- LANC have requested investment for additional clinical staff which is being considered by GMHSP once further information is provided.
- Quality, Safety and Safeguarding leads will continue to support LANC in delivering improvements over coming months.
- The 3 North East CCGs invest in the contract, Bury CCG's investment for a further 12 months April 22 to March 23 is £157,623.
- Without the service there is a risk that adults are not supported in receiving the diagnosis for their condition and NHS Long term, GM and local priorities are not met.

Recommendations

It is recommended that the Strategic Commissioning Board:

- Approve the commissioning of the LANC contract for a further 12 months until March 2022 as a North East sector commission at a value of £153,623 for Bury CCG.
- Continue to work closely with the North East Sector commissioners, quality leads and Greater Manchester Health & Social Care commissioners to improve the service performance.

Links to Strategic Objectives/Corporate Plan	Yes
Does this report seek to address any of the risks included on the Governing Body / Council Assurance Framework? If yes, state which risk below:	No

Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Have any departments/organisations who will be affected been consulted?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any financial implications?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any legal implications?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any health and safety issues?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
How do proposals align with Health & Wellbeing Strategy?	The proposal aligns with the Health & Wellbeing Strategy and focuses on providing the right care at the right time.					
How do proposals align with Locality Plan?	The service underpins the principles of the Let's Do it Strategy. It provides a specialist diagnostic service in the community that is innovative, and person centered.					
How do proposals align with the Commissioning Strategy?	The service is a 1-year extension from April 22 to March 23, linked to the learning disability and autism strategy. This report evaluates service performance and delivery against the intended outcomes. The recommendation to extend this commission aligns with the Commissioning Strategy.					
Are there any Public, Patient and Service User Implications?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
How do the proposals help to reduce health inequalities?	<p>To tackle health inequalities, we need to strengthen community assets and increase individual / group resilience.</p> <p>This service is provided by a specialist organization, the delivery model focuses on supporting each individual adult. These adults often have symptoms of inattentiveness, impulsiveness, or hyperactivity and/or because of the associated difficulties or coexisting conditions that have been exacerbated by their life's pathways.</p>					

Implications						
Is there any scrutiny interest?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
What are the Information Governance/ Access to Information implications?	Information sharing agreements are in place between the provider and referrers.					
Has an Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG /Council/ Strategic Commissioning Board's Risk Register?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Additional details	<i>NB - Please use this space to provide any further information in relation to any of the above implications.</i>					

Governance and Reporting		
Meeting	Date	Outcome
Finance, Contract & Procurement Committee	16/12/2021	Discussed under AOB, update on CQC inspection provided, further update requested for Jan 22
Finance, Contract & Procurement Committee	20/01/2022	Approved the extension for 12 months of Lanc UK as detailed in the waiver submitted.

Autism Spectrum Disorder / Attention Deficit Hyperactivity Disorder Diagnostic Service

1. Introduction

- 1.1. The CCG have been an associate to the North East Sector (NES) contract for the provision of an adult Autism and ADHD diagnostic service since 2014. The lead provider is Heywood, Rochdale, and Middleton CCG. The service provider is LANC, and the contract ends in April 2022.
- 1.2. This report provides an update on the current service and recommendations for future provision of an adult Autism and ADHD diagnostic service.

2. Background

- 2.1. It is a requirement of the NHS Long Term Plan that the whole NHS will improve its

understanding of the needs of people with autism and work together to improve their health and wellbeing.

- 2.2. It is acknowledged within the NHS Long Term Plan that people wait too long before being provided with a diagnostic assessment. Over the next three years there is a driver to reduce waiting times for specialist services. This will be a step towards achieving timely diagnostic assessments in line with best practice guidelines.
- 2.3. Greater Manchester Health and Social Care Partnership's Autism friendly strategy for 2019-2022's key message has a clear vision to work towards making Greater Manchester an autism friendly place to live, where people receive a timely diagnosis and good support. It aims to ensure professionals have a good understanding of autism, and reasonable adjustments are made when required, where people can feel safe, have aspirations and fulfill potential and be a full member of the local community.
- 2.4. The GM strategy has four priorities. The health and support priority ensuring access to diagnosis and post-diagnosis support in every area, making sure that health and care have the right information on local need and are planning the right services locally.
- 2.5. As a result of the Autism Act 2009 there are clear duties and expectations on local authorities and the NHS to plan and commission an appropriate service for autistic adults. At the core of this there is a duty on every locality to have a pathway for diagnosing adults.
- 2.6. The service at LANC offers a comprehensive multi-disciplinary assessment and diagnostic service with ongoing support and management of adults with ADHD and ASD.
- 2.7. Autistic Spectrum Disorder (ASD) is a developmental disability where there is a triad of impairments, social communication, social interaction, and social imagination.
- 2.8. Autism is called a spectrum as, although all individuals will have difficulties in three main areas, their condition will affect them in very different ways. No two people with ASD will have the same difficulties.
- 2.9. The exact cause of ASD is unknown, there is evidence to suggest both genetic and environmental factors contribute to its development. ASD affects approximately half a million people in the UK alone.
- 2.10. Attention Deficit Hyperactivity Disorder (ADHD) is a neurodevelopmental condition whereby individuals find it difficult to focus their attention and to control their behaviour.
- 2.11. ADHD affects individuals across the lifespan and is more commonly seen in boys than girls. It is estimated that 1 or 2 children in every 100 will have significant ADHD. In many cases, ADHD coexist with other conditions including Autism, Tourette's Syndrome and OCD.
- 2.12. In 2019 NES Commissioners paused re-tendering this service as requested by

Greater Manchester Health & Social Care Partnership (GMHSP) due to ongoing work to update the service specification and a review of investments by GMHSP.

- 2.13. The contract with LANC was extended for a further 2 years, until March 2022. Additional investment of £228,000 per annum was approved to increase capacity to meet demand and reduce waiting times.

3. ASD / ADHD

- 3.1 The Learning Assessment and Neurocare Centre Ltd (LANC) have been commissioned to provide adult assessments for Attention Deficit Hyperactivity Disorder (ADHD) and Autistic Spectrum Difficulties (ASD) across the North East Sector, which includes Bury, HMR (Heywood, Middleton, and Rochdale) and Oldham CCG's.
- 3.2 The assessments are carried out face to face in a private room in Townside Primary Care Centre and everyone is provided with a personal care plan. The administrative base for the service is in Heywood.
- 3.3 Clients are supported by the service prior to their assessment to ensure they understand what it entails. The assessment involves a clinical interview with an Adult Psychiatrist and in some situations a cognitive assessment will also be completed.
- 3.4 Referrals into the service are made by GPs via a dedicated email address. Screening questionnaires are sent out to determine suitability of the referral. The service provides an update to the referring GP following assessment.

3.5 Activity

- 3.6 The number of referrals into the service is monitored and there has been a significant increase in 2021. The service was commissioned to support 75 new referrals per month across both the ASD and ADHD pathways.
- 3.7 COVID-19 impacted upon referral numbers and there was also an impact on the services ability to recruit and provide induction training for new staff which led to longer waits for assessments.
- 3.8 In 2021 referral numbers have significantly increased over and above the intended 75 per month. Referral breakdown below.

Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
82	100	125	96	99	146	132	124	152	246	298

- 3.9 The service has worked hard to reduce the number of people on the waiting list, however the increase in referrals has made this difficult. Waiting list and patient first appointments are detailed below.

	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21
Waiting List	418	335	295	277	188	167	181	226	255	245	417
New Referrals	82	100	125	96	99	146	132	124	152	246	298
Patient First Appts	165	140	143	185	120	132	87	95	162	74	78
Revised Balance	335	295	277	188	167	181	226	255	245	417	637

3.10 Waiting lists did reduce from 1,252 in April 2020 to 167 in June 2021, as of November 2021 they have increased to 417.

3.11 GMHSP has committed to invest additional funding into the service to support operational process improvements and provide more administrative and senior management support.

3.12 Targets

3.13 The service has 6 defined Key Performance Indicators (KPI) as detailed in the table below. In July 2021, lead commissioners, HMR CCG carried out a review which demonstrated significant improvements in service delivery and achievement of activity and quality related targets in 2020/21 as detailed below.

	Quality Requirement/KPI	Threshold	Provider Performance			
			Q1	Q2	Q3	Q4
1	100% of Adults who are referred with suspected ASD/ADHD are offered a health Assessment.	100%	Achieved	Achieved	Achieved	Achieved
2	100% of Adults who upon being diagnosed with either ASD/ ADHD condition are offered a Care Plan	100%	Achieved	Achieved	Achieved	Achieved
3	Waiting time: -Urgent cases contacted within 1 week from referral and seen within 6 Weeks Non Urgent cases contacted within 5 weeks from referral and seen within 12 weeks	95%	Urgent - 100%, non urgent, 95%	Urgent - 100%, non urgent, 95%	Urgent - 100%, non urgent, 95%	Urgent - 100%, non urgent, 95%
4	GPs will receive discharge summaries (and/or other relevant information) within 10 working days following discharge from all services.	90%	100%	100%	100%	100%
5	All Provider staff must be trained and certified up to and including Level 3 Childrens Safeguarding, in line with their role/function as specified within the Safeguarding Audit Toolkit	90% of staff	100%	100%	100%	100%
6	All Provider staff must be trained and certified up to and including Level 3 Adults Safeguarding, in line with their role/function as specified within the Safeguarding Audit Toolkit	90% of staff	100%	100%	100%	100%

3.14 In quarter one of 2021/22 the service received 39 compliments from service users either via email or feedback survey. Clients were grateful for the diagnosis they received and treatment which has improved their symptoms and management. The support provided by clinicians was also a factor, with their caring approach specifically noted. The administrative team have also been complimented for their caring nature

and knowledge.

3.15 CQC Inspection

- 3.16 The Centre is accredited and registered with the Care Quality Commission, the Independent Regulator of health and social care services in England.
- 3.17 The CQC undertook an unannounced, targeted inspection of LANC Heywood premises on 8th October 2021 in the areas of safe and well led following concerns raised by members of the public. As a result of their inspection the CQC rated the service as inadequate, identifying areas to improve upon before a re-inspection within a six-month timeframe.
- 3.18 CCG commissioners have carried out have their own inspection and countered some of the CQC's findings, providing assurance a safe service is being provided. As a result, the CQC has agreed to update specific areas of their report prior to publication. The consensus from commissioners is that the service being delivered is good, issues raised were more process / system inadequacies.
- 3.19 LANC has worked closely with HMR CCG, Adult Quality, Safety and Safeguarding Leads who are assured that LANC have either met the requirements set out by CQC or are working towards meeting them.
- 3.20 The Adult Quality, Safety and Safeguarding leads will continue to work with LANC to support the required improvements over the coming months.

3.21 Investment

- 3.22 Each of the 3 North East Sector CCGs invest in the contract, Bury CCG invests £157,623 per annum.
- 3.23 GMHSP has agreed to invest an additional £140,000 to support the development of mandatory reporting systems and e-prescribing systems to sustain and bolster the service recognising the increase in activity seen in recent months.
- 3.24 LANC has also requested investment totaling £230,000 for additional clinical staff. GMHSP has requested more detailed information about how this will be invested

4 Associated Risks

- 4.1 The service has in place policies and procedures to address staff, volunteer, and visitor safety. All staff and volunteers are suitably qualified for their roles.
- 4.2 Without this service there is a risk that adults are not supported, and their condition is not diagnosed.
- 4.3 If the service is not commissioned the NHS Long Term Plan, GM and local priorities are not met.
- 4.4 Improvements to the service have been made following the CQC inspection, despite

all the support and changes there is a low risk that the CQC re-inspection doesn't acknowledge the progress made and the service remains inadequate.

5 Recommendations

5.1 Based on this service information in this paper the recommendations are to:

- Approve the commissioning of the LANC contract for a further 12 months until March 2023 as a North East Sector commission, at a value of £153,623 for Bury CCG.
- Continue to work closely with North East Sector commissioners, quality leads and Greater Manchester Health & Social Care commissioners to improve the service performance.

6 Actions Required

6.1 The Governing body is required to:

- Approve the recommendations above to extend the current commission of LANC provision for a further 12 months until March 23.

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January 2022