



**LLR Learning Disability and Autism Collaborative
Children and Young Persons (CYP) Dynamic Support Pathway (DSP)**

The Dynamic Support Pathway (DSP) is a pathway developed to provide support for CYPs with a Learning Disability, Autism or both who are deteriorating in their mental health and well-being whilst living in the community. The goal is to identify concerns early and bring those involved together so they can work together to identify additional support to prevent further deterioration and any escalation, which may lead to a crisis and/or an admission to a mental health or learning disability hospital.

Inclusion Criteria:

- Children and young people with a Learning Disability, Autism or both. This diagnosis must be confirmed, and evidence of this confirmation should be included within the referral form. Unfortunately, at this time the pathway will not be able to accept referrals for CYPs without this diagnosis.
- The person being referred should also be living within Leicestershire and have either a GP surgery that falls within the responsibility of a Leicester, Leicestershire and Rutland ICB or a home address that falls within the responsibility of a Leicester, Leicestershire or Rutland Local Authority.
- CYP fully or partially health funded (117) in an out of area placement can still be referred to the LLR DSP if it is thought that the level of risk/deterioration requires the CYPs to have a red rating and an urgent CETR is being requested.
- Any CYP Looked After Child placed out of area by a Leicester, Leicestershire or Rutland Local Authority.
- Already receiving support from health and social care services.



Dynamic support systems and processes rely on effective partnership working between health, local authorities, education and social care partners.

- When you make a referral, you will be asked to recommend/suggest the risk rating of the CYP's current situation. In simple terms this is also a question around the urgency of the situation. The CYP will move between the cohorts as their situation changes.
- Ideally the CYP will access the DSP as amber and be discharged from the DSP as green (deteriorating well-being has been addressed, patient has returned to their baseline and any impending crisis avoided). A new 'green' cohort has been added as a 'step down' from the DSP.
- Once the decision has been taken that multi-agency meetings (MAMs) are no longer required the CYP will be moved to the green cohort for two months. During this time a new referral to the DSP will not be required if the well-being of the CYP should deteriorate again. They can simply be moved to the amber or red cohort and the associated linked processes re-commenced. If the referrer is discharging the patient during this period then they should notify the DSP team so the patient can also be discharged from the DSP.
- If the agreed actions at the multi-agency meeting do not meet need or cannot be delivered and crisis is not avoided the CYP will be escalated to the 'red' cohort and a Care Education and Treatment Review will be arranged.
- If admitted the CYP will remain on the DSR (new minimum standard) in the blue cohort and immediately post discharge will be moved back to the amber section.

Below are the agreed criteria for referring an CYP to the Dynamic Support Pathway.

Rating	Guidance notes regarding when to apply this rag rating	Linked Processes
	There is a significant concern for the mental health and well-being of the CYP (any cause). The CYP is not in a	• Referral to the Dynamic Support Pathway. • Inclusion on the Dynamic Support Register. • Allocation of keyworker in line with identified need



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Amber	crisis; however, action is required to avoid the development of a crisis. Concerns may include: - A significant increase in behaviours that challenge. Support is required to prevent further deterioration in well-being, which may result in a future increased risk of referral to other services and/or hospital admission. - Deterioration in mental health and wellbeing may include but is not limited to social withdrawal, self-neglect, anxiety, increased verbal or physical aggression towards self and/or others, damage to property, self-harm, suicidal thoughts, escalating anxiety, increased ritualistic behaviours or internal experiences such as hearing voices which are having a significant impact on well-being. - The family/carer/placement provider is finding the situation difficult to manage. Carer strain may be becoming a concern. - The carer has a significant underlying physical or mental health condition that is affecting their ability to continue to provide the level of care and support required. - The CYP has recently been discharged from an in-patient environment.	- The request for a multi-agency meeting (MAM) is automatic once the referral has been completed. - Set up of the MAM. - The action plan detailing the additional support required will be developed at the first MAM. - Agreed actions will be followed up to ensure completion. - MAMs will continue for as long as required to ensure the well-being of the CYP is restored. - If the wellbeing of the CYP continues to deteriorate and there has been no improvement following the delivery of the interventions agreed at the multi-agency meetings the CYP will be escalated to the red rating on the Dynamic Support Register (DSR).



Red	The mental well-being of the CYP has continued to deteriorate despite the delivery of the appropriate interventions agreed at the previous multi-agency meetings. The CYP is now in a crisis which requires urgent resolution. • Crisis may occur because of non-resolution of any of the causes identified in the guidance notes for the amber rating of the dynamic support pathway. • There is a reason to suspect that the CYP has a mental health concern which will necessitate evaluation and may result in the diagnosis of a mental health disorder and the associated risks may necessitate CYP's potential admission to a specialist psychiatric bed. • The CYP has a known mental health concern which is continuing to deteriorate. The associated risks to self and others continue to escalate in the community setting despite all interventions, to address the mental health concern, being delivered.	• Significant urgent intervention is required to reduce risk and restore well-being. • Set up of a community CETR with an independent panel. • Escalate to director level (health and/or Social Care) for additional support if required. • Senior level directive to attend CETR. • Development of robust support plan. • Consideration to be given to the request of a Mental Health Assessment and/or subsequent Mental Health Act. Assessment (only if mental health condition if suspected/known).
Blue	CYPs who are currently within mental health or learning disability inpatient services. • CYP who were referred to the DSP prior to admission will no longer be removed from the register. • They will be moved from the red rating and placed on blue to reflect their current in-patient status. They will remain in this category for the entire length of their in-patient stay.	In-patient linked processes • Post admission CETR • CPA • On-going CETR at the required frequency • Commissioner oversight visits (6 weeks) • Discharge planning



	- Upon discharge, the CYP will be transferred to the amber rating group and a post discharge MAM will be arranged to evaluate the quality and implementation of the post discharge level of support being delivered. - A new referral to the DSP will <u>not</u> be required. Required referral information will remain on the system. - Once the multi-agency team are confident that the level of support is appropriate and in place (meeting needs) and the risk is reduced then the CYP can be discharged from the DSP using the agreed discharge process. - The CYP to be escalated to red if the level of support is not in place at the CYP once again becomes at risk of admission.	Post Discharge from Hospital - Transfer to Amber rag rating following discharge from hospital. - Post discharge MAM to check all post discharge support agreed is now in place and is sufficient to meet the needs of the CYP.
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Rating	Guidance notes regarding when to apply this rag rating	Linked Processes
Green	CYP whose mental well-being has settled /returned to their baseline and is no longer requiring multi-agency meetings that need to be managed by the Dynamic Support Pathway team. CYP will remain in this cohort for one month and then be removed from the DSP. If the referrer is discharging the patient during this period then they should notify the DSP team so the patient can also be discharged from the DSP.	- No multi-agency meetings taking place. - However, during this time the CYP can be moved back to the amber/red cohort if linked processes need to be re-activated quickly. - A new referral will not be required.

