

Central Bedfordshire Health and Wellbeing Board

Contains Confidential or Exempt Information No.

Title of Report Winterbourne View Progress Report

Meeting Date: 5 September 2013

Responsible Officer(s) Dr Diane Gray-Director of Strategy and Service Redesign
Julie Ogley- Director of Social Care, Health and Housing

Presented by: Michelle Bradley-Head of Mental Health and Wellbeing
Elizabeth Saunders-Assistant Director of Commissioning

Action Required:

1. **Healthier Communities and Older Peoples Board (HCOP) to receive regular progress reports on the alternative care and accommodation support packages being arranged for the 8 individuals moving from inpatient hospital settings**
2. **HCOP Board to receive regular reports on the joint strategic plan from Bedfordshire Clinical Commissioning Group which cover the development of pooled budget arrangements**
3. **HCOP Board to receive regular reports on the development of the service specification and implementation of the Bedfordshire wide specialist community support service for people who's behaviours may challenge**
4. **HCOP Board to receive a progress report on work with Children's Services around the transition process**

Executive Summary

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| 1. | This report provides an update on the progress and key work streams which are being undertaken by health and social care partners in Central Bedfordshire in response to the severe concern highlighted by the Panorama undercover programme at the Winterbourne View Private Hospital in May 2011 for people with a learning disability and the subsequent Department of Health enquiry. |
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Background

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| 2. | On the 31 May 2011, a BBC Panorama television programme showed people with challenging behaviour being abused by staff at a private hospital called Winterbourne View. Following this programme the hospital was subsequently closed. |
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2.1	The abuse which took place at Winterbourne view was deeply disturbing and shocking and was assessed as criminal. The kinds of abuse which was uncovered covered a range of physical and emotional forms.
2.2	The Minister of State Paul Burstow commissioned the Department of Health, (DOH) to carry out a full review into what had happened at Winterbourne View. The overall aim was to identify what went wrong but also look at what lessons could be learned so that care and support for people with challenging behaviour, who also may have associated learning disability and/or autism was being delivered in the most appropriate setting and was of a good quality.
2.3	The final report from the DOH was published in December 2012 and from this a mandatory requirement was set on every Clinical Commissioning Group (CCG) and Local authority in England and Wales to develop a localised plan which would address the following areas to demonstrate that better outcomes and safe practice was being delivered for people with learning disabilities or autism who have behaviours which challenge.
2.4	To address the issues set out in the DOH Report a Bedfordshire wide Winterbourne View response coordination group was set up on the 4 th February 2013. This comprises of representatives from the BCCG and Central Bedfordshire and Bedford Borough Councils. The BCCG as the lead agency coordinated the development of a cross Bedfordshire Action Plan and the Bedfordshire Steering Group will continue to operate and provide the monitoring of the delivery of the various actions.
2.5	A Central Bedfordshire focused Steering Group has now been established to ensure that these wider actions and targets as set out for Central Bedfordshire are achieved.
2.6	The following areas are the main focus for activity for June 2013 to June 2014:
	<ul style="list-style-type: none"> <li data-bbox="395 1559 1461 1827"> • In Patient Hospital Review Process Everyone with a learning disability who is in a hospital setting now will have had a comprehensive review of their needs carried out before the end of June 2013, with the aim for those who do not need hospital care to be moved to a community setting by 1st June 2014.
	<ul style="list-style-type: none"> <li data-bbox="395 1845 1461 2024"> • Development of Joint Strategic Plan and Service Developments Every CCG area will have a locally agreed joint plan for improving services for people who's behaviours challenge

	<ul style="list-style-type: none"> Monitoring Quality of Service Delivery and Care Providers of Services will be held accountable for poor care and contractual arrangements need to be robust with monitoring mechanisms which ensure areas of concern are addressed. This includes safe prescribing practice for medication.
	<ul style="list-style-type: none"> Additional Work streams: Safeguarding Winterbourne View Stock Take Children's and Adult Services Commissioning Appendix 1. Table of the Winterbourne View Actions Appendix 2. Winterbourne View Stock Take Submission

Detailed Recommendation	
4.	This section sets out the main areas of activity which are being undertaken in Central Bedfordshire.
4.1	<p>In Patient Hospital Review Process</p> <p>The BCCG have established a list of all NHS funded people with challenging behaviour placed in independent hospital settings. This register has been shared with the local authority and is reviewed as part of the Winterbourne Central Bedfordshire steering group meetings.</p> <p>All of these individuals have had a care needs review carried out which was completed by the 1st June 2013, following which a number of people have been identified as needing to move from low secure hospital placements. The completion of the reviews met the stringent targets set out in the recommendations of the DOH Report.</p>
4.2	Of the reviews carried out:
	<ul style="list-style-type: none"> 3 have been carried out by the National Specialist Commissioning Group and a formal feedback meeting has been arranged with colleagues from the National Specialist Commissioning Group on the 30th August 2013 to discuss the outcomes of the reviews which they have carried out, so that individual discharge support plans can begin to be put together for each individual. From the information received from the Specialist Commissioning Group by the BCCG in preparation for this meeting in August, all 3 individuals have now been deemed ready for discharge, which is a change from the initial feedback given in June which indicated possible continuation of need for treatment.

	<ul style="list-style-type: none"> 5 further reviews have been carried out jointly between CBC and BCCG which have resulted in discharge support plans being put in place to commence the process of moving the individuals to alternative, non hospital based accommodation. This process will be driven forward in a timely way, and will be completed by June 2014.
4.4	<p>Development of Joint Strategic Plan and Service Developments</p> <p>A local assessment and diagnosis support for Autism has been commissioned locally and began on 1 July 2013. This has replaced the previous commissioned service which was based at the South London Maudsley Hospital, meaning people no longer have to physically travel a considerable distance to receive assessments for a formal diagnosis of autism. As part of the agreed local model to support post diagnosis, Autism Development Workers have been appointed to Central Bedfordshire and they will provide long term support and signposting.</p>
4.5	<p>. There is now in place a comprehensive programme for training in relation to Autism; it is delivered by a person with autism and a psychologist. There are currently two levels of autism training which is provided: the first targeted at front line practice staff, receptionists, leisure staff etc, the second at social workers, mental health nurses, GPs and care home staff. The training has been well attended and the feedback has been excellent.</p>
4.6	<p>The progress being made within Bedfordshire against the National Autism Strategy – Fulfilling and Rewarding Lives has been highlighted as good practice by the National Autistic Society.</p>
4.7	<p>The current Central Bedfordshire Learning Disability Commissioning Strategy is being refreshed. Information from this and the JSNA will be used by the BCCG and CBC to put in place a Joint Strategic Plan to develop the proposals for a revised treatment and support service, which is currently provided by SEPT Specialist NHS Trust based in Bedfordshire which will better support people with challenging behaviour to:</p>
	<ul style="list-style-type: none"> Avoid inpatient admission
	<ul style="list-style-type: none"> Support through a care and treatment plan individuals in the community
	<ul style="list-style-type: none"> Avoid having to make out of county placements-particularly to private hospitals.
4.8	<p>The timescales for the procurement of this service are currently being agreed between BCCG and CBC and BBC.</p>

4.9	<p>There are currently no pooled budget arrangements in place between CBC and BCCG, for learning disability spend. A business case, which will include a full financial options appraisal for developing this will also form part of the Joint Strategic Plan and is being scheduled to be completed by November 2013. Financial spend for BCCG and CBC for CHC and s117 aftercare packages can currently be delivered on a shared basis, along with joint monitoring of the care packages. In relation to these individual packages, BCCG and CBC leads have been developing a local protocol for the provision of s117 aftercare and a register of the individuals entitled to this, is now in place.</p>
4.10	<p>Monitoring Quality of Service Delivery and Care</p> <p>The quality of care funded by BCCG through CHC is monitored by the lead nurses and contract manager. There are clear guidelines in place for escalating concerns in the delivery of care to the Quality Team which has identified leads for mental health and learning disabilities, safeguarding, infection control and tissue viability. There is a named lead for those people subject to s117 aftercare, regular reviews are undertaken and links with the quality team are the same. In addition, there are regular commissioner, quality and contract lead meetings to discuss quality and performance. The CCG are engaged in Central Bedfordshire's framework for monitoring care homes within their locality, including attendance at information sharing meetings with the CQC. Issues regarding providers are discussed at the Patient Safety and Quality Committee and reports are escalated to the Executive Team when required.</p>
4.11	<p>The quality of care for those providers funded by Central Bedfordshire Council, is designed to ensure all social care residential, nursing, and domiciliary care providers who are regulated by CQC have in place a contract with The Council and are then monitored against the service specification to ensure good quality outcomes for the people and their families using the services.</p>
4.12	<p>The monitoring tool used is the ADASS East of England Contract Quality Workbook and comprises of a set of standards aligned to the CQC Essential Standards of care, but these are structured to better look into how the service is involving its service users in all aspects of the planning and delivery of care; focusing on meaningful outcomes for individuals. For learning disability providers, this also includes how risk and behaviour management support is provided on a person centred and proactive basis. In addition, for Domiciliary Care Agencies on the CBC Framework, electronic monitoring via CM2000 is in place which performance monitors, duration, missed/late calls and consistency of carer. However this process is also informed by input provided by individual care management reviews, information from CHC or tissue viability nursing reviews, safeguarding alerts and from complaints and compliments supplied by the Customer Service Team.</p>

4.13	As part of the Joint Strategic Plan, a proposal will be considered which looks at the options for aligning or integrating the health and social care contract monitoring function of the BCCG and CBC, to promote consistency of approach.
4.14	The use of antipsychotic and antidepressant medication is monitored by pharmacists. Progress on this specific project has started and there is a project at present reviewing prescribing in care homes for people with mental health needs and this is managed through the Mental Health Change Board. The scope of this work is still being developed locally to include people with a learning disability and/or autism and will report into the Winterbourne Steering Group.
4.15	<p>Additional Work streams:</p> <p>Safeguarding</p> <p>Safeguarding is at the core of the findings of the Winterbourne DOH report and the recommendations which have been set out in the Care and Support Bill, will be implemented fully by the Bedfordshire Safeguarding Board. Specially in relation to Deprivation of Liberty a programme of direct face to face information sharing sessions by the CBC Safeguarding Team with providers, will ensure that managing authorities responsible for the care of people with a learning disability understand their responsibilities in identifying potential deprivation of liberty safeguards, and apply for authorisations accordingly.</p>
4.16	<p>Winterbourne View Stock Take</p> <p>The Winterbourne View Joint Improvement Programme also asked local areas to complete a stock take of progress against the commitments made nationally that should lead to all individuals receiving personalised care and support in appropriate community settings no later than 1 June 2014.</p>
4.17	The Stock take was completed and submitted on the 5 th July 2013.
4.18	<p>The purpose of the stock take was to enable local areas to assess their progress and for that to be shared nationally. The stock take also is intended to enable local areas to identify what help and assistance they require from the Joint Improvement Programme and to help identify where resources can best be targeted. At the meeting with the BCCG and the Specialist Commissioning Group on the 30th August 2103, it will be discussed if locally support form the Joint Improvement Programme could be requested to assist with the development of the Business Case looking at the financial options appraisal around establishing a pooled budget.</p> <p>Appendix 2. Provides a copy of the Stock Take submission .</p>

4.19	<p>Children’s and Adult Services Commissioning</p> <p>Work has also begun through the Support and Aspirations Board looking at the transitions process for children with disabilities moving into adult services to ensure that there is joined up planning to meet the projected demand and needs of children in transition. Initial 5 year profile of transitions demand has been produced, which shows social care need, however this needs to also capture children’s needs when they are health funded.</p>
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5.	Recommendations:	
	1.	HCOP Board to receive regular progress reports on the alternative care and accommodation support packages being arranged for the 8 individuals moving from inpatient hospital settings
	2.	HCOP Board to receive regular reports on the joint strategic plan from Bedfordshire Clinical Commissioning Group which cover the development of pooled budget arrangements
	3.	HCOP Board to receive regular reports on the development of the service specification and implementation of the Bedfordshire wide specialist community support service for people who’s behaviours may challenge; including the procurement timescale
	4.	HCOP Board to receive a progress report on work with Children’s Services around the transition process

Issues	
Strategy Implications	
6.	<p>Improving mental health and wellbeing is one of the priorities within the Health and Wellbeing Strategy</p> <p>There is clear alignment with the BBCG strategic commissioning plan and the areas of focus, care right now, care for my condition into the future & care when its not that simple (Mental Health & Learning disability programme</p>
Governance & Delivery	
7.	<p>There are three key groups involved in the delivery of this priority, the Learning Disability Delivery Board as part of HCOP which is jointly chaired by CBC and the BCCG for Central Bedfordshire. The Fulfilling Lives-Autism Partnership, also as part of HCOP, jointly chaired between CBC and two Co-Chairs, who are adults who have a form of autism. The Mental Health and Learning Change Programme Board (formerly QIPP Board) chaired by the BCCG lead GP, which also has CBC membership.</p>

Management Responsibility	
8.	Responsibility for the delivery of the outcomes rests with the Director Of Adults Social Care, Health and Housing and Dr Diane Gray, Director of Strategy and Redesign. This responsibility may be delegated for day to day operational delivery.
Public Sector Equality Duty (PSED)	
9.	The PSED requires public bodies to consider all individuals when carrying out their day to day work – in shaping policy, in delivering services and in relation to their own employees. It requires public bodies to have due regard to the need to eliminate discrimination, harassment and victimisation, advance equality of opportunity, and foster good relations between in respect of nine protected characteristics; age disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
	Are there any risks issues relating Public Sector Equality Duty Yes/No
No	Yes <i>Please describe in risk analysis</i>

Presented by Elizabeth Saunders & Michelle Bradley

Appendix 1. Table of Winterbourne View Actions Completed/Outstanding.
Appendix 2. Provides a copy of the Stock Take submission