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**Meeting:** SCHH Overview & Scrutiny Committee  
**Date:** 9 September 2013  
**Subject:** Winterbourne View Progress Report  
**Report of:** Cllr Carole Hegley , Executive Member for Social Care Health & Housing  
**Summary:** 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.

**Advising Officer:** Julie Ogley, Director of Social Care Health & Housing  
**Contact Officer:** Elizabeth Saunders, Assistant Director, Commissioning  
**Public/Exempt:** Public  
**Wards Affected:** All  
**Function of:** Bedfordshire Clinical Commissioning Group and Central Bedfordshire Council

## **CORPORATE IMPLICATIONS**

### **Council Priorities:**

1. This report supports the following Council Priority the report which is:
  - Promote health and wellbeing and protecting the vulnerable.

### **Financial:**

2. A Section 75 arrangement is part of the National Health Service Act 2006 and provides an enabling framework between Health and Local Authorities, which allows for the pooling of social care and health funding and/or allows for social care funding to be delegated to an NHS body to deliver a social care function

This option appraisal will identify which budgets within the BCCG and the Social Care, Health and Housing Directorate could potentially be pooled to support with the commissioning of packages of care for individuals with complex learning disability and /or autistic needs who also have severe challenging behaviour.

Proposed that support in the development of the financial options appraisal being undertaken by the BCCG is provided by the corporate financial service team which supports the SCHH Directorate

There is also the potential for additional support to be provided through the Joint Improvement Programme.

### **Legal:**

3. Under the new arrangements for health introduced in the Health and Social Care Act 2012 there is a general expectation that local authorities and health service bodies will look for opportunities to integrate services to advance the health and well-being of the people in their area. The Health and Wellbeing Board is under a statutory duty to encourage the local authority and the BCCG to work in an integrated manner. This report explains the steps that are being taken to secure a more integrated approach towards the provision of services for people with learning disabilities. In due course, once a business case has been approved the arrangements are likely to be formalised in an agreement made with the BCCG under Section 75 of the NHS Act 2006 which will provide the legal framework for the operation of a pooled budget.

**Risk Management:**

4. The activities outlined in this report will be overseen through the Health and Wellbeing Board and also through the Learning Disability Partnership Board as part of the HCOP governance arrangements. The Learning Disability Partnership Board will monitor risks, issues and progress against agreed plans. The BCCG will also monitor progress through the Learning Disability and Mental Health Change Management Board (former QIPP Programme Board for LD and MH) and is taking a project management approach to draw up a risk log.

**Staffing (including Trades Unions):**

5. Not Applicable.

**Equalities/Human Rights:**

6. Public authorities have a statutory duty to advance equality of opportunity, eliminate unlawful discrimination, harassment and victimisation and foster good relations in respect of nine protected characteristics; age disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
7. The approach being taken in meeting the requirements set out in the Winterbourne View DOH investigation and report is designed to support more locally based, inclusive support services, for people with a learning disability and autism, to more positively manage risk elements in their lives which are due to communication issues which result in challenging behaviour.
8. A formal Equality Impact Assessment (EIA) has not been carried out for the Winterbourne View work streams so the proposal is that CBC offer to support BCCG in undertaking the EIA and embedding learning from this into the actions being taken forward.

The EIA will also include consideration of human rights implications.

**Public Health**

9. The approach being taken will give opportunities for people to have their care and support delivered closer to home and not in a more restrictive inpatient hospital setting, as well as looking to develop higher levels of independence. Though the actions being outlined in this report focus on support in relation to challenging behaviour needs, the development of an enhanced local support service will also mean that more preventive work can be undertaken with individuals to improve not only their mental but physical health as well. This will also assist with addressing inequalities in meeting the health needs of people with learning disabilities, so that through for example; better access to behaviour management self help techniques and screening programmes, their health outcomes are brought more in line with the general population.

**Community Safety:**

10. Not Applicable.

**Sustainability:**

11. Not Applicable.

**Procurement:**

12. Not applicable. Any procurement will be lead by BCCG for the development of the Community based specialist support service. However CBC Corporate Procurement will support with the evaluation panel process.

**RECOMMENDATION(S):**

**The Committee is asked to:-**

1. **To note progress on the alternative care and accommodation support packages being arranged for the 8 individuals moving from inpatient hospital settings**
2. **To note progress on the joint strategic plan from Bedfordshire Clinical Commissioning Group which cover the development of pooled budget arrangements**
3. **To note progress 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. **To note progress report on work with Children's Services around the transition process**

**Introduction and Background Information**

13. 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.
14. 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.

15. 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.
16. 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.
17. To address the issues set out in the DOH Report a Bedfordshire wide Winterbourne View response coordination group was set up on the 4<sup>th</sup> February 2013. This comprises of representatives from the BCCG and Central Bedfordshire and Bedford Borough Councils.
18. 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.
19. 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.

The following areas are the main focus for activity for June 2013 to June 2014:

**20. 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 1<sup>st</sup> June 2014.

**21. Development of Joint Strategic Plan and Service Developments**

Every CCG area will have a locally agreed joint plan for improving services for people whose behaviours challenge.

**22. 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.

**23. Additional Work streams:**

**Safeguarding**

**Winterbourne View Stock Take**

**Children's and Adult Services Commissioning**

**Appendix A. Table of the Winterbourne View Actions**

**Appendix B. Winterbourne View Stock Take Submission**

**Detailed Recommendations**

24. **In Patient Hospital Review Process**

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.

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.

25. Of the reviews carried out:

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 30<sup>th</sup> 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 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.

26. 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.

27. **Development of Joint Strategic Plan and Service Developments**

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.

28. 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.

29. 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.

30. 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:

- (a) Avoid inpatient admission
- (b) Support through a care and treatment plan individuals in the community
- (c) Avoid having to make out of county placements-particularly to private hospitals

The timescales for the procurement of this service are currently being agreed between BCCG, CBC and BBC.

31. 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 Continuing Health Care (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.

32. **Monitoring Quality of Service Delivery and Care**

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 who have 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.

33. 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 elements of the contract to ensure good quality outcomes for the people and their families using the services.

34. 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 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.

35. 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.
36. 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.

37. **Additional Work streams:**

**Safeguarding**

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. Specifically 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.

38. **Winterbourne View Stock Take**

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. The stock take was completed and submitted on the 5<sup>th</sup> July 2013.

39. 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 30<sup>th</sup> August 2103, it will be discussed if local support from 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.

Appendix B provides a copy of the stock take submission.

40. **Children's and Adult Services Commissioning**

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 who are health funded.

**Conclusion and Next Steps**

41. To note progress on the alternative care and accommodation support packages being arranged for the 8 individuals moving from inpatient hospital settings.

42. To note progress on the joint strategic plan from Bedfordshire Clinical Commissioning Group which cover the development of pooled budget arrangements.
43. To note progress 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.
44. To note progress on work with Children's Services around the transition process.

**Appendices:**

Appendix A – Table of Winterbourne View Actions Completed/Outstanding.

Appendix B – Winterbourne View Stock Take.