

Central Bedfordshire Health and Wellbeing Board

**Contains Confidential
or Exempt Information** Yes

Title of Report Central Bedfordshire Winterbourne View Programme –
Work Area Update

Meeting Date: 2 October 2014

Responsible Officer(s) Julie Ogley – Director Social Care, Health & Housing

Presented by: Elizabeth Saunders – Assistant Director Strategic
Commissioning

Action Required:

1. Note the Update Information Provided.
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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. |
| 2. | Information for this report has also been provided by Bedfordshire Clinical Commissioning Group (BCCG), Mental Health and Wellbeing Strategy and System Redesign Service. |

Background

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| 3. | The Department of Health (DoH) carried out an in-depth review following the Panorama programme that was broadcasted in May 2011 detailing the scandal and level of abuse that people residing at Winterbourne View were subjected to. Winterbourne View was a hospital for people with learning disabilities, autism and / or behaviour that challenged. |
| 4. | Staff at Winterbourne View had committed criminal acts and six were imprisoned as a result. However the Serious Case Review showed a wider catalogue of failings at all levels. |

5.	<p>These wider issues within the care system are:</p> <ul style="list-style-type: none"> • there are too many people with learning disabilities and autism staying too long in hospital settings or residential care homes. Some people may require hospital care but hospitals are not where people should be living; • there was a failure to assess the quality of care or outcomes being delivered for the very high cost of places at Winterbourne View and other hospitals; and • people are being placed out of their local area and miles away from their family and friends. This puts people at a higher risk of abuse and local provision should be sourced to enable people to live within their local community.
6.	<p>The DoH published the ‘Transforming care: A national response to Winterbourne View Hospital – Final Report’ and ‘Winterbourne View Review – Concordat: Programme of action’ in December 2012. These documents focus on the improvements that are required to be developed and implemented by the Clinical Commissioning Groups and Local Authorities.</p>
7.	<p>The concordat and improvement plans focus on the following themes:</p> <ul style="list-style-type: none"> • the right care in the right place; • strengthening accountability and corporate responsibility for the quality of care; • tightening the regulation and inspection of providers; • improving quality and safety; and • monitoring and reporting on progress.

Detailed Recommendation

8.	<p>Bedfordshire Clinical Commissioning Group leads on the joint work regarding Winterbourne View in partnership with Central Bedfordshire Council (CBC) and Bedford Borough Council’s (BBC). A Pan Bedfordshire Steering Group is held monthly and the members of this group lead on developing and implementing the Joint Improvement Plan. Nikki Kynoch Head of Service for Learning Disability and Mental Health Services and Paul Groom Head of Contracts, are the lead officers representing CBC.</p>
9.	<p>This plan incorporates the key milestones that are set nationally by the DoH, which both the Clinical Commissioning Groups and Local Authorities are expected to deliver against. The Programme of Action sets out to transform services so that people no longer live within inappropriate settings but are cared for in line with best practice, based on their individual needs and that their wishes and those of their families are listened to and are at the heart of planning and delivering their care.</p>

10.	A separate Central Bedfordshire Locality Steering Group has also been established, to ensure there is sufficient focus on translating the Bedfordshire wide actions into specific measures for CBC.
11.	<p>Bedfordshire Clinical Commissioning Group is required to hold a local Winterbourne View Register. The Register is broken into 4 Phases, where individuals who meet the Winterbourne View criteria have reviews of their needs and any hospital detained status completed against set target dates –</p> <ol style="list-style-type: none"> 1. Phase 1 – Patients placed in hospital settings (June 2014) 2. Phase 2 – Residents placed in out of area residential or educational settings 3. Phase 3 – Transitions / individuals aged 14 years and over 4. Phase 4 – Ordinary Residence (OR) both in and out of county.
12.	In September 2014 specific target dates for completing the reviews are going to be proposed for Phase 2 to 4.

Central Bedfordshire – Phase 1 update (3 x individuals)

13.	The most recent key milestone was the 1 June 2014, where there was a requirement that everyone listed within Phase 1 of the Local Winterbourne View Register who had been assessed as being inappropriately placed, must have plans for their transition to a community-based setting by the deadline.
14.	BCCG together with CBC has successfully moved four individuals from inappropriate hospital placements into community based settings in 2013/14. There are currently a further three gentleman from Central Bedfordshire who are residing within a hospital setting in Peterborough who have been assessed as being inappropriately placed and need to be stepped down to a community based placement within Central Bedfordshire. These gentlemen have very complex autistic related needs and behaviour that challenges services and therefore require a specific qualified provider to manage their needs, care and support in the community.
15.	There is currently a lack of local support provision that is specialist enough to support these gentlemen in the community and through this transition of change.
16.	Following the joint reviews that were carried out by BCCG and CBC, which involved the individuals', and their families', it was determined that a procurement process may be necessary to procure local specialist services that would be able to offer bespoke and specialist individual packages of care for the three gentlemen referred to above.

17.	An accelerated procurement process through BCCG was initially being pursued however due to capacity issues within the Health system Procurement Support Service, Attain, a waiver to the procurement Process was agreed by the BCCG and approved identified provider market testing instigated.
18.	A provider has been selected from this market testing list based on their ability to support people with similar needs and challenges within a community setting.
19.	The provider has carried out assessments with each of the three gentlemen and these were received on the 11 July 2014, which showed they were able to meet the identified needs and a transition plan is currently being developed; with a timescale to have the service operational by December 2014.
20.	The schedule of reviews for the individuals, who meet the criteria for Phase 2, has already been drawn up.
21.	As part of this work it is important to keep a track on any out of area inpatient admissions from Central Bedfordshire. The BCCG are collecting this information and will report on this at the September Pan Bedfordshire Steering Group and this information will be reported on at the Health and Wellbeing Board on the 2 October 2014. (This report is to follow.)
Review of Winterbourne View – Local Government Association/Joint Investment Programme Stock Take	
22.	A Winterbourne Stock Take progress report was required of all Local Authorities and the CBC report was submitted on the 5 July 2013. Ian Anderson from ADASS reviewed the key area highlighted in the Stock Take in May 2014 focusing on the effectiveness of the health and social care systems approach to delivering the key objectives of the Bedfordshire Improvement Plan. This Review particularly highlighted the strong partnership working across CBC and BCCG in delivering a challenging agenda.
23.	The in-depth Initial Review Report from Ian Anderson is shown as an Appendix to this report (Appendix 1).
Quality of Current Service Provision	
24.	There is a gap in local specialist provision for people with learning disabilities and autism who present with behaviour that challenges services. Predicated on the complexities that individuals present with, specialist quality providers are required to support people through individualised bespoke packages of care whilst managing and maintaining an individual's needs.

25.	Currently, people who present with complex needs are generally placed out of area by BCCG due to the lack of local specialist provision.
26.	There is therefore a need to establish specialist local provision and this is being taken forward by a BCCG led light touch Assured Quality Provider, (AQP) procurement process that will assure commissioners that the providers identified by this method will have the appropriate specialisms to support those who present with the most complex needs and deliver a high quality and safe service through a person centred approach.
27.	The Health System procurement service Attain, have suggested that the most appropriate approach for an AQP would be to issue a PIN (Prior Indicative Notice) to outline the commissioning intentions. The PIN will provide an insight as to how many providers may be interested in engaging in the process and Attain would then facilitate sessions for providers to come and meet with Commissioners in relation to understanding the commissioning intentions and the criteria of the procurement to enable stimulation of the market
28.	In addition CBC has participated in a review of the ADASS East of England Contract Service Specification for Residential and Supported Living Services for people with a learning disability, to check that the specification meets the requirements identified through the Winterbourne View work. The specification has now been revised, to pull out the need for medical health checks to be carried out on a regular basis so as to identify any physical illnesses, much earlier and also requires providers to have in place a range of supports for people who may display challenging behaviour other than solely relying on medication. This revised Specification is being put in place with all Central Bedfordshire contracted learning disability providers on the 1 September 2014.

Improving and Integrating Services

29.	The review and re-design of the Specialist Learning Disability Services within Bedfordshire which is currently forming part of the Mental Health & Learning Disability Procurement Process has taken into consideration the Winterbourne View Review work stream around integration of services and particularly the role of the Intensive Support Team (IST). This team is designed to provide community based support to enable people with behaviours which can challenge to be maintained in their local community and avoid inpatient admission. It is essential that the IST maintains and further develops its specialism to support people in crisis within their own homes and reduce the number of people being admitted to hospitals and the service specification as part of the Mental Health Procurement Process has been revised to build the capacity of the team to deliver this vital function.
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Work with Children's Services

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| 30. | Through the CBC Steering Group which Children Service Colleagues are members of, the Winterbourne View requirements and outcomes are being linked into all the work streams which report into the Support and Aspirations Programme Board. This Board will report on progress being made through to the Health and Wellbeing Board. |
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Conclusion and Next Steps

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| 31. | The Pan Bedfordshire Joint improvement Plan is due for its next refresh at the Steering Group Meeting in September, and the key actions for this will be reported on at the Health and Wellbeing Board on the 2 October 2014. |
| 32. | It is recommended that a further progress report is also provided to the Healthier Communities and Older People Partnership Board before the December deadline for meeting the needs of the three gentlemen being transitioned from their current inpatient unit, so that specific progress on this work can be given. |

Issues

Strategy Implications

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| 33. | This report is aligned to the overarching aim of the Health & Wellbeing Board to improve health outcomes and experience of health and care services for people in Central Bedfordshire. |
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Governance & Delivery

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| 34. | This report provides an update on the progress and key work streams which are being undertaken by health and social care partners in Central. |
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Management Responsibility

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| 35. | For Central Bedfordshire Council: Julie Ogley, Director Social Care, Health & Housing will be accountable for delivery and Elizabeth Saunders; Assistant Director Strategic Commissioning will be responsible for day to day delivery. For BCCG: Gail Newmarch, Interim Director of Strategy and Redesign will be accountable for delivery and Michelle Bradley, Head of Mental Health Services will be responsible for day to day delivery. |
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Public Sector Equality Duty (PSED)	
36.	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 No

Risk Analysis

Briefly analyse the major risks associated with the proposal and explain how these risks will be managed. This information may be presented in the following table.

Identified Risk	Likelihood	Impact	Actions to Manage Risk
Nil			

Source Documents	Location (including url where possible)
Appendix A – Joint Improvement Plan Stock Take Review Report	Appendix 1 - Overview & Scrutiny - Central Beds Final Report.docx

Presented by Julie Ogley