

**Title:** Adult Learning Disability Services Improvement Plan(incl. Winterbourne View Action Plan)  
**Wards Affected:** All  
**To:** Health and Wellbeing Board **On:** 17 July 2013  
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## **1. Purpose**

- 1.1 To provide the Health and Wellbeing Board with an update in respect of the implementation of the Winterbourne Action Plan on behalf of commissioners in South Devon and Torbay CCG the Torbay local authority, and first cut work programme for improving and redesign of learning disability services with providers.

## **2. Recommendation**

- 2.1 The Health and Wellbeing Board is asked to formally note the report and recommendations for on-going monitoring and review.
- 2.2 For the Board to review and challenge the action plan in the light of the national concordat (attached appendix 2)

(The concordat expects the HWBB to challenge the level of ambition within the joint plan, ensure that the right infrastructure is in place, and comment on how much has been achieved, and assess if pooled budgets would support pace of progress)

## **3. Supporting Information**

- 3.1 Winterbourne View Action Plan (appendix 1)

## **4. Relationship to Joint Strategic Needs Assessment**

- 4.1 An annual self assessment of learning disability services (statutory requirement) will need to be completed and will use the JSNA as a basis but will require a more comprehensive analysis of data and predictive prevalence where none is available.

## **5. Relationship to Joint Health and Wellbeing Strategy**

- 5.1 Priority 13 in the existing strategy-Support Independent Living

## **6. Implications for future iterations of the Joint Strategic Needs Assessment and/or Joint Health and Wellbeing Strategy**

- 6.1 Service redesign with a more focused priorities targeting the needs of those people with learning disability.

## **7. WINTERBOURNE VIEW ACTION PLAN**

- 7.1 Following the publication of the Winterbourne View hospital Serious Care Review, the Department of Health published a vision for change, entitled 'Concordat: Programme of Action'(attached). The document, signed by many agencies in Health and Social Care, committed to a programme of change to transform health and care services and to improve the quality of care offered to children, young people and adults with learning disabilities or autism, who have mental health conditions or behaviour that challenges, to ensure better outcomes for them. The document, in essence, commits to a rapid reduction in hospital placements for this group of people by 1 June 2014. It also states that hospitals are not homes and people should never be placed in a hospital setting long term but only for the amount of time it will take to achieve care outcomes for the individual placed.
- 7.2 Locally, the Winterbourne View task and finish group met on the 12th April 2013 following the publication of the Concordat. The group discussed the existing WV action plan which was based on interpretation of the Serious Case Review as first published, and before the CCG was authorised. It was agreed that the old action plan would be refreshed to ensure that there was a real focus on the major issues outlined in the Concordat that needed to be addressed to ensure that the CCG and its partners were able to ensure good quality of care for placed people.
- 7.3 The scope of the action plan focuses on inpatient service for Adults with Learning Disabilities. Those currently placed in inpatient hospitals as well as ensuring robust commissioning arrangements through contracts and operating principles are in place.
- 7.4 Most recently the Winterbourne view stocktake template has been released with requirement of both Local authorities and CCGs to complete by July 5<sup>th</sup>. This will provide a useful reference point in time in order to develop a joint improvement plan agreed across the local organisations.

## **8. POSITION AS AT JUNE 2013**

- 8.1 All Torbay clients currently placed in in-patient facilities have been reviewed and their personalised care plans reviewed.

Each individual's care has a first point of contact identified within the CCG (Siobhan Grady) and each has a named Care Coordinator.

Work is underway with DPT and TSDHCT as community providers to progress support packages in appropriate community settings as appropriate no later than 1 June 2014 in compliance of the Concordat.

## 9. ADULT LEARNING DISABILITY PROVIDER SERVICES

### 9.1 Devon Partnership Trust

Both South Devon and Torbay CCG and NEW Devon CCG have agreed on a redesign of adult Learning disability services that will underpin the two key areas of delivery,

Improving access to universal healthcare services

Managing people with complex needs, including behaviour that challenges within local services.

### 9.2 Torbay & Southern Devon Health and Care NHS Trust

A service review is near completion of community adult learning disability services. Recommendations for a redesign of teams is likely to be made which will integrate adult learning disability staff (OT and Nurse) in to the current locality (zone) teams across Torbay and centralise a shared approach, with the South Devon specialist adult learning disability team, comprising of (psychologist; specialist nurse psychiatry, SALT and Physiotherapy). The proposed pathway will start in zones and the zones will be staffed accordingly, retaining an element of strategic support to bring together the community LD service.)

Gaps in provision are also identified specifically in relation to physiotherapy where there is only 0.5wte servicing the whole of the Bay. As part of implementation it is expected that redirection of resources and priorities will enable the current establishment physiotherapy staffing to increase.

There is no current specialist LD OT and this needs to be reviewed to align with the DPT proposal

### 9.3 Private Provider – Huntercombe

Watcombe Hall (Torquay) and James House (Chudleigh) are operated by the Huntercombe group.

Following a safeguarding whole home investigation commissioners (Cornwall, Devon and Torbay) along with DPT and TSDHCT have worked with Huntercombe group to identify areas for improvement, provided agreed action plans and monitoring process to ensure of quality and safety for patients placed in their care. A number of themes can be summarised as follows:

- Quality of Risk assessment and care planning where provider reliance on agency and temporary staff
- Appropriate placement planning and 'move on' discharge planning with agreed outcomes.
- Review and monitoring of changes in placement provision by commissioners
- Individualised contracts to meet level of need understood by both commissioner and provider to ensure best outcomes for patient.

- Meeting the physical healthcare needs (primary and secondary) of the patients placed in private hospital.

#### 9.4 Private Providers – Modus Care

Westbrooke Grange in Barton near Torquay, Devon is a small hospital set within residential area. The property is registered with the CQC for up to 5 patients and provides five individual suites within the hospital unit. Services are offered to people with an Autistic Spectrum Disorder (ASD) who have associated mental health needs, some of whom require treatment or assessment under the Mental Health Act (1983).

Tobias House in Torquay provides care for up to 7 adults who have a diagnosis of Autism and/or associated condition and a Learning Disability. Accommodation consists of 2 individual self contained living areas and 5 single bedrooms and a choice of lounge and dining rooms.

Warwick House in Paignton provides a residential service for up to 6 adults who have a diagnosis of Autism/Aspergers

#### 9.5 Private Providers – Cygnet Health Care

Provides a range of specialist and personalised support services for people with mental health problems as well as those with autism, including Asperger's Syndrome, associated learning disabilities and complex needs, including support for people's families within supported living and outreach service

### 10. FINANCIAL IMPACT

- 10.1 Secure placements are currently commissioned and funded through NHS England as part of the specialist community function. The transfer back to local CCGs will have an impact on the costs of delivery and overall CCG budgetary position. NEW Devon hold a greater budget with a large number of patients placed in inpatient facilities and are discussing with NHS England the issue of financial risk to resolve the difficulties that may be presented.

### 11. APPOINTMENTS

- 11.1 The Commissioning team now has a lead for Joint Commissioning and someone in place to commission care for people with LD and for Children (including those with complex needs). Following a successful recruitment process including people with a learning disability on the interview panel, Dr Ellie Rowe was appointed to a new post of GP Clinical Lead for Learning Disabilities. This post will provide one session of support per week. Commissioning for social care remains within the provider and there are ongoing discussions about the best long term arrangements for joint strategic and micro- commissioning.

### 12. COMMISSIONING

- 12.1 Contracts with SDHFT, TSDHCT and SWAST contain a suite of Operating Principle's which include 'Care and Compassion', and Francis Review, and the community provider contract includes a specific OP in respect of 'Placed People.'

- 12.2 Work is on-going within the CHC team to improve quality monitoring of placements into Care Homes and other providers for IPPs. A bid is going ahead to put more resource in place to undertake quality monitoring.
- 12.3 All provides are now required to secure agreement from the CCG for any placement they wish to make outside the CCG area.

### **13. ONGOING MONITORING**

- 13.1 NHS England has set up Quality Surveillance Groups and the Area Team in the South West Peninsula has set up a local QSG, which is now functioning to share information and intelligence about providers of care, including private hospitals and residential care homes. This is designed to improve early warning of poor quality of care. The CCG is represented at the QSG by Gill Gant, Director of Quality Governance and the Accountable Officer, Dr Sam Barrell.
- 13.2 SDT CCG regularly meets with NEW Devon CCG as part of the Service Re design project and various work streams.
- 13.3 The original ~Winterbourne View 'Task and Finish Group' has agreed to morph into a local forum bringing together CCG and LA commissioners, plus providers as micro commissioners to ensure the dialogue regarding safeguarding vulnerable individuals who are placed either locally or out of area continues. The group has agreed that it is right to regard hospitals for adults with LD or autism as HIGH RISK Service and as such requiring a more intensive level of monitoring.

### **14. WHAT NEXT?**

- 14.1 The CCG through its commissioning directorate and arrangements for commissioning with TSDHCT and DPT must achieve the following:
- ensure that the right local services are available, regardless of who commissions them, for young people and adults with learning disabilities or autism who also have mental health conditions or behaviour that challenges;
  - all people with challenging behaviour in inpatient assessment and treatment services are appropriately placed and safe, and if not make alternative arrangements for them as soon as possible.
  - review funding arrangements for these people and develop local action plans to deliver the best support to meet individuals' needs;
  - review existing contracts to ensure they include an appropriate specification, clear individual outcomes and sufficient resource to meet the needs of the individual and appropriate information requirements to enable the commissioner to monitor the quality of care being provided;

Private provider contracts for individuals have a system of review and will include visits to observe care.

- improve the general healthcare and physical health of people with learning disabilities – for example, all individuals in these services have a comprehensive health check within 6 months and a health action plan;
- involve young people and adults with challenging behaviour and their families, carers and advocates in planning and commissioning services and seek and act on feedback about individual experience;
- ensure that planning starts early with commissioners of children's services to achieve good local support and services for children and better transition planning for children with disabilities moving from children's to adult services;

## **15. RISKS TO DELIVERY**

### **15.1 Compliance**

Whilst the aim of the Winterbourne View Project is to establish everyone in appropriate community accommodation by 1<sup>st</sup> June 2014, this does not automatically mean that all clients will return to the South Devon and Torbay area. Some people may wish to stay in their current location and some people may be under legal restrictions, such as Home Office order, that would prohibit their move to the community.

The development of local provider skills to support repatriation needs to take place to ensure that placements do not fail in the community. Supporting many of the people the CCG is seeking to place, requires effective skill set to maintain good quality care. NEW Devon CCG and Kernow CCG is currently exploring a means to develop a provider training and support consortium which the South Devon and Torbay CCG would be keen to join.

### **15.2 Finance**

Discussions are underway with NHS England to raise the issue of financial risk to Clinical Commissioning Groups and resolve the difficulties this may present in respect of changes in support and commissioning.

Effective prevention of escalation of need requires lower level investments in to care and this is likely to be required through Social Services. Current local authority financial pressures may impact upon this required investment.

### **15.3 Accommodation**

It will take time to establish new providers and there is an urgent need to support the market. The CCG wants to work with the local authority on a market statement and procurement.

Additional housing needs to be identified and this must be tailored to an individual's needs; having the correct environment to support a person is critical to the success of the placements.

Working with Torbay council and Devon county council is essential to deliver this expectation.

The development of local provider skills to support people moving back to home areas needs to take place to ensure that placements do not fail in the community. Supporting the people that the CCG is seeking to place, requires an effective skill set to maintain good quality care. The CCG is currently exploring a means to develop a provider training and support consortium with Kernow CCG, and potentially Torbay South Devon CCG.