

SHEFFIELD HEALTH AND WELLBEING BOARD PAPER

Report of: Tim Furness, Director of Business Planning and Partnerships,
NHS Sheffield Clinical Commissioning Group

Date: 24 September 2015

Subject: Progress in Transforming Care for People with Learning
Disabilities

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Summary:

In May 2011, a BBC Panorama programme exposed staff abuse of patients with learning disabilities at Winterbourne View, a private mental health hospital. The government responded with a commitment to transform services for people with learning disabilities or autism who had challenging behaviour or a mental health condition.

In December 2012 The Department of Health published “Transforming Care: A National Response” and the accompanying “DH Winterbourne View – Concordat: Programme of Action” (the concordat). The concordat set out 63 Transforming Care commitments with the central commitment being by 1st June 2014, anyone with a learning disability and challenging behaviour whose care would be appropriately delivered in the community should be moved out of hospital.

The Government did not meet its central goal of moving people with learning disabilities and challenging behaviour out of hospital by 1 June 2014, because it underestimated the complexity and level of challenge in meeting the commitments in its action plan.

The Government commissioned Sir Stephen Bubb to consider how a mandatory national framework – The Transforming Care Programme – could be implemented nationally and delivered locally, to achieve the growth of community provision to move people out of inappropriate institutional care.

This report provides an update of the progress to date in Sheffield on the implementation of Transforming Care for people with a learning disability.

Recommendations:

The Health and Wellbeing Board is asked to keep an oversight of the work in the city on Transforming Care relating to adult and children's service delivery and commissioning.

Reasons for Recommendations:

This is a national mandatory programme of work. Therefore oversight of the Board is to:

- Ensure senior officer awareness of the Transforming Care agenda
- Ensure that progress continues against the action plan for the city
- To ensure transformational change in line with the programme aspirations of care provided in the least restrictive environment and closest to home.

Background Papers:

- Winterbourne View – Time for Change (2014)
 - Transforming Care for People with Learning Disabilities
 - Sheffield's Learning Disability Commissioning Strategy
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PROGRESS IN TRANSFORMING CARE FOR PEOPLE WITH LEARNING DISABILITIES

1.0 SUMMARY

- 1.1 Winterbourne View Concordat is now incorporated into the national “Transforming Care” agenda.
- 1.2 Whilst the initial programme requirements of the original Concordat are completed in relation to the return of the identified cohort of people for local repatriation and data collection for this time period, there will be a requirement for continued city wide collaboration to safeguard this population.
- 1.3 This will be achieved by ensuring that the right services are available at “the right time in the right place,” as defined by Sir Stephen Bubb, in his report “Transforming Care, the national update for the Winterbourne Concordat.
- 1.4 The programme requires continued collaborative commissioning and provision of services across Children and Adults Directorates, given the newer obligations outlined in Transforming Care. New groups are being constituted within the city to progress this work, with identified leads across the NHS Sheffield Clinical Commissioning Group (CCG) and Sheffield City Council (SCC.)
- 1.5 SCC LD Commissioning Strategy reflects the requirements of “Transforming Care” and detailed implementation plans are being developed. This includes progressing improved access to general needs housing, building business cases for new build one bedroom apartments, and deregistration of a number of registered residential care homes to supported living arrangements.
- 1.6 The Better Care Fund and Integrated Commissioning agenda, particularly the Ongoing Support work stream and the emerging Whole of Life Learning Disability Strategy provides an opportunity for greater coordination and collaboration to meeting the needs of the learning disabled population across the lifespan, and helping to deliver the transformation expected by Sir Stephen Bubb.
- 1.7 The work will require extended joint working with NHS England and other regional Clinical Commissioning Groups and Local Authority commissioners, relating to the implications of the responsible commissioner guidance.
- 1.8 Transforming Care requires continued high level leadership by Executive Directors, and scrutiny of the Safeguarding Boards to ensure our focus remains on meeting the needs of this vulnerable group of people.
- 1.9 There is more work to be done to ensure that joint processes across Health and Social Care commissioning and provision work effectively to safeguard against people being cared for in inappropriate settings which do not meet their needs. This includes streamlining processes for preventing mental health and learning disability hospital admissions, supporting more timely hospital discharges, and ensuring reviews are done in a timely and effective manner, to safeguard people with complex needs.

1.10 We need to maintain a vigilance and joint recognition that learning disability assessment and treatment in inpatient hospital settings are not homes, and we need to reduce both admission rates and lengths of stay when people do need a period of admission.

2.0 WHAT DOES THIS MEAN FOR SHEFFIELD PEOPLE?

2.1 In December 2012 The Department of Health published “Transforming Care: A National Response” and the accompanying “DH Winterbourne View – Concordat: Programme of Action” (the concordat). The concordat set out 63 Transforming Care commitments with the central commitment being by 1st June 2014, that anyone with a learning disability and challenging behaviour whose care would be appropriately delivered in the community should be moved out of hospital.

2.2 As of July 2013 Sheffield had a total of 18 adults funded in out of city placements:

- Of those 18 placements 12 people were placed by NHS England Specialist Commissioners;
- The remaining 6 people, who were the responsibility of Sheffield commissioners were identified as having the potential to be repatriated to Sheffield;
- All 6 of those individuals returned, with 5 of the 6 being returned within the target timescale;
- It took until March 2015 for the final person to return, due to the complexity of their support needs.

3.0 WHAT WE ARE DOING

3.1 “Transforming Care for People with Learning Disabilities – Next Steps” (January 2015), written in response to Sir Stephen Bubb’s report “Winterbourne View – Time for Change” (2014) sets out the actions to progress transformation.

Below are the main priorities and what we are doing for the people of Sheffield.

3.2 Empowering people and their families by giving them the means to challenge their admission or continued placement in inpatient care through an admission gateway process and Care and Treatment Reviews, to reduce the number of admissions and speed up discharges.

A Care and Treatment Review brings in two advisors, one clinical and one expert by experience plus a representative of the responsible CCG with the aim to act as a “critical friend” by supporting the individual and their family to have a voice and to support the team working with them to identify the blocks which are preventing a discharge.

In Sheffield we are rolling out a programme of Care and Treatment Reviews to become “business as usual” with people currently placed out of city and in city within the Intensive Support Service inpatient beds being identified for this process.

One person out of city has been identified as being ready for transfer in to a more appropriate setting. The Community Enhancing Recovery Team is working with NHSE Specialist Commissioners to develop a transfer pathway for this individual.

We are progressing the recruitment of a social worker to work an identified team of clinicians to enable Care and Treatment Reviews to function more effectively.

Care and Treatment Reviews will also be expected to take place prior to any admission to hospital to ascertain whether there is an alternative to an inpatient stay. When there is an emergency admission a review will take place within two weeks.

3.3 Getting the right care in the right place by working with local authorities and other providers to ensure that high quality community-based alternatives to hospital are available, meaning more people can get the support they need close to home.

Sheffield City Council has a new Learning Disability Commissioning Strategy which has been developed in line with local and national policies, with a focus on providing high quality care that promotes independence, social inclusion, choice, and provides best value. The strategy reflects the requirements arising from the Winterbourne investigation to provide stronger local community based services based on co-production, community building, a capability based approach, integrated services and personalisation.

Following the approval of the commissioning strategy, the City Council and partners have since agreed to develop a strategy based on whole life, asset based approach to ensure social and economic inclusion within the city for people with learning disabilities.

We have a joint (CCG and SCC) working group developing plans for accommodation in the city to ensure that people have good access into mainstream housing options. In addition, we are working in partnership to develop business cases for a number of new build one bedroom flats to ensure that the range of choice for people will meet demand, now and in the future. NHS SCCG successfully bid for regional capital to support the SCC accommodation strategy, and have recently applied for further regional capital funding from NHS England, the outcome of which is currently expected.

NHS Sheffield CCG and Sheffield City Council are working in partnership to review short breaks and respite provision in both Adult Services and Children and Young People's services. This aims to reduce carer/family stress and breakdown, which in turn can lead to out of city placements.

3.4 Driving up the quality of care by tightening the regulation and inspection of providers, including closing poor quality settings and preventing inappropriate new settings from opening.

Sheffield City Council have already put in place quality assurance arrangements for those people living in private rented accommodation which will be put in place across the full range of accommodation supply to ensure that people are living in appropriate and good quality accommodation.

The City Council established a Framework Agreement preferred list of providers in autumn 2014 which sets out standards and quality requirements for all supported living services. SCC are also planning to establish a Framework Agreement for meaningful day time activities promoting innovation, diversity and quality which will be available for Council arranged services and for people who are in receipt of direct payments.

The CCG and SCC work closely together to ensure that the monitoring and quality assurance of all provision is both robust and effective. We are currently reviewing these arrangements with a view to ensuring that people who use services and their family carers are fully engaged and that their views and experiences are key to our feedback to providers. We have also increased resources available to work with providers to improve quality.

All CQC reports are scrutinised by the monitoring team and follow up action instigated when required.

3.5 Strengthening accountability for improving outcomes by reforming contracts, including giving commissioners the ability to fine providers who fail to meet care standards or an individual's personal objectives.

SCC are currently reviewing contract management arrangements and a workshop was held in August with all our providers to promote this approach.

3.6 Increasing workforce capability by working with patient and carer groups to address gaps in skills, best practice and staff awareness of learning disabilities and mental health problems.

We are exploring options in how we can engage service users and carers in developing best practice. The Learning Disability Partnership Board is developing a Service Improvement sub-group of service users and carers.

A Supported Living Forum has been developed to raise awareness and drive up good practice.

3.7 Improving the amount of data and information collected and shared by public agencies to ensure that a person's outcomes and destinations are monitored, and that local public services can be held to account for their progress.

Sheffield CCG is working with Local Authority and Sheffield Health and Social Care Trust to develop a register of people who are 'at risk of admission' and will closely maintain and monitor this with all agencies through a subgroup of the Transforming Care Steering Group.

Sheffield CCG submits data to the Assuring Transformation "Clinical Audit Platform" which is the new reporting mechanism. This is being managed by the national Health and Social Care Information Centre, and has been introduced to collect data on all adults with a learning disability or with an autistic spectrum condition who are in a

mental health hospital bed or learning disability hospital bed whether in city or out of city.

In addition to this the CCG has to report fortnightly to NHS England on patients who were in hospital and out of city as of 1st April 2014 to enable them to track discharges and delayed discharges.

4.0 GOVERNANCE STRUCTURE

4.1 Nationally this work will be spearheaded by the Transforming Care Delivery Board which is made up of senior representatives from each organisation responsible for delivery.

4.2 In response to “Assuring Transformation – A Time for change – The next steps”, the former “Winterbourne Steering Group”, with leadership from Kevin Clifford, Chief Nurse, NHS Sheffield Clinical Commissioning Group, and Phil Holmes Director of Adult Services, has recently reformed as the Transforming Care Steering Group, and membership is being reviewed.

4.3 This group is refining the “Transforming Care Action Plan”, to give a renewed focus to the development of a joint citywide strategy relating to the care of people with complex needs arising out of learning disability with autism, behaviour that challenges services to support and mental health conditions.

5.0 RECOMMENDATIONS

The Health and Wellbeing Board is asked to keep an oversight of the work in the city on Transforming Care relating to adult and children’s service delivery and commissioning.

6.0 REASONS FOR THE RECOMMENDATIONS

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