

Health and Wellbeing Board11 March 2015Report by Helen Bottomley, Project Support at NHS PartnershipCommissioning Unit and Victoria Pilkington, Deputy Director ofPartnership Commissioning at the NHS Partnership CommissioningUnit

Winterbourne Review Update

Summary

- This report is an update report following the previous report to the City of York Health and Wellbeing Board on 8 October 2014. Since the last report the Partnership Commissioning Unit (PCU) have created a new register called Transferring Care Agenda. The PCU now only record patients who fall into the following categories:-
 - Out of Area in Residential
 - Out of Area in Supported Living
 - From next month the PCU will also include any hospital inpatients. Although inpatients are not currently on the register they are still regularly reviewed. This is the reason for a reduction in some of the figures in this report from previous October 2014 report (as this included individuals in their own home/care home etc.).

The Partnership Commissioning Unit and City of York Council have worked closely together to ensure each individual service user has a personalised needs assessment and package of care. The positive actions are set out below but a further update will be provided in 3 months' time.

• All hospital patients continue to be reviewed

• Personal care plans are in place for all patients who have been in hospital for more than 3 months. Those patients who have been in hospital for less than 3 months are still within the assessment period.

- •All patients are reviewed every 6 months
- City of York Council Strategic Plan is completed.

• Social Work reviews have been undertaken on all eligible people.

Background

2. In 2011 a Panorama programme exposed evidence of abuse of some individuals with learning disabilities, who were living in Winterbourne View. Winterbourne View was an Assessment and Treatment Unit, privately run by Castlebeck Plc. An enquiry was held and in December 2012 the Department of Health published The Winterbourne Concordat 'Programme of Action'. The action plan sets out key milestones to transform services for people with learning disabilities or autism and mental health conditions or behaviours described as challenging. Each organisation has a commitment to take forward the agenda within clear time frames to address the NHS Commissioning Board's stated objective.

'To ensure that Clinical Commissioning Groups work with Local Authorities to ensure that vulnerable people, particularly those with learning disabilities and autism, receive safe, appropriate, high quality care. The presumption should always be that services are local and that people remain in their communities; we expect to see a substantial reduction in reliance on inpatient care for these groups of people.'

The delivery of the Winterbourne Concordat is co-ordinated through the Transforming Care Group. The group meets every 6 weeks and all meetings for 2015 have been arranged. Operational Groups from Partnership Commissioning Unit and the City of York Council report into the Transforming Care Group to provide assurance that reviews are undertaken within the timescales.

Main/Key Issues to be Considered

3. The Health and Wellbeing Board is to be kept fully briefed on the work being undertaken as part of the Transforming Care Group.

Consultation

- 4. The following consultations have taken place:
 - Service User Consultation 29th September 2014
 - Clinical Professionals Consultation 23rd October 2014

Second Clinical Professionals Consultation – 4th December 2014

From these consultation workshops a draft Pathway has been developed. This will feed into the commissioning plan and market position. A Learning Disability Provider workshop will take place on 25th February. This will give Providers the opportunity to influence the Pathway. The purpose of the Provider workshop will be to understand what support third sector organisations need to ensure that hospital admissions or out of area placements are reduced for people with a learning disability across North Yorkshire and York.

Options

5. There are currently no options for the Board to consider as the report is to keep the Health and Wellbeing Board briefed on progress.

Analysis

6. See point 5 above.

Strategic/Operational Plans

- 7. Key Actions
 - i. Health and Care Commissioners will review all current hospital placements and support everyone inappropriately placed in hospital to move to community facilities.

The PCU currently have 31 individuals with live funding streams with a diagnosis of Learning Disability or Autism either in residential or supported living on our revised register. 29 are CHC, 2 are Vulnerable People. 8 of the 29 people are fully funded. These 8 people have had a review in the last 12 months. Of the 2 Vulnerable People individuals both have been reviewed recently. All 31 are currently residing outside of the North Yorkshire and York boundary and their Clinical Commissioning Group locality. Both CHC and Vulnerable People are working with the Local Authority to identify appropriate community packages of care. *ii.* Ensure that all Clinical Commissioning Groups develop registers of all people with learning disabilities or autism who have mental health conditions or behaviour that challenges in NHS-funded care as soon as possible and certainly no later than 1 April 2013;

See comments under Summary page 1 regarding the Register.

iii. Every area will put in place a locally agreed joint plan for high quality care and support services for people of all ages with challenging behaviour that accords with the model of good care. These plans should ensure that a new generation of inpatients does not take the place of people currently in hospital.

The City of York Council have developed their strategy. However, CYC are keen to work with the Partnership Commissioning Unit and North Yorkshire County Council (NYCC) in supporting their joint strategy. The PCU and CYC have shared registers which highlights any resettlement needs for people out of area. The PCU and CYC will work together to establish appropriate services in response to their needs. Future planning will ensure community provision is able to meet a varied range of social and health care needs reducing previous dependency on hospital inpatient care. The PCU and the two Local Authorities are developing a project plan to include key milestones.

- iv. The Clinical Commissioning Groups are also assessed against 6 key objectives of which the following have been achieved:-
- % of patients not placed on a register.
 - 100% of the inpatients are on the Winterbourne and the Transforming Care registers.
 - 100% of the individuals on either residential care or supported living are on the Winterbourne register.
- % of patients without a care coordinator. *100% have a care coordinator*.
- % of patients who have not been formally reviewed for more than 26 weeks.
 - o 100% inpatients have been reviewed within 26 weeks.

For the non –inpatient population:

- 0% 21 joint funded individuals have been reviewed within the last 26 weeks.
- 62.5% 3 of the 8 fully funded CHC individuals have had a review or Pen Picture. 5 individuals are due a review.
- % of patients who have had a care plan review and are without a planned transfer date.
 - 100% of patients have had a care plan review and have a planned transfer date.
- % of patients without a planned transfer date.
 - 0% All patients have been reviewed and their discharge plans on pathway are reviewed weekly.
- % of patients in a non-secure hospital setting for more than 2 years.
 - 23% of patients have been in hospital for more than 2 years. All patients are assessed at reviews to whether they remain appropriately placed or whether there is a less restrictive option either within hospital step-down pathways or to the community. Some patients have other restrictions to their pathways imposed on them from the Ministry of Justice (MoJ). An annual report is submitted for these patients.
- v. City of York Council has produced and circulated its local strategic plan. A decision has also been taken to align the plan with the strategic review of local accommodation options for people with disabilities. The resulting strategic plan will enable the Council to build on success in the development of accommodation and support options locally and meet the requirements of customers who will need services over the next five years. It is envisaged that the strategic plan will enable around 80 individuals to access new accommodation and support options. Partnerships and options appraisals have already been developed which should hopefully enable some of the people identified through Winterbourne reviews to return to local settings within the next 9 months. The strategic plan also addresses other key issues associated with the concordat and review including workforce development, Advocacy Services, Quality, partnerships with Health Services and GP's.

A positive meeting has been held with Helen Sumner, a National Advisor from the Winterbourne View Improvement Programme who was very supportive of the approach taken by the Council and an "Open" meeting of the Winterbourne Implementation Group was held recently which was attended by a number of local selfadvocates.

- vi. Winterbourne reviews have been undertaken by Social Work on 51 individuals who presently fall under the concordat. Of these 15 have been identified as been able to return and live in an appropriate local setting, 5 people have been identified as requiring additional review input including in some instances DOLS assessments, 1 person has unfortunately died and it has been agreed that the remaining individuals are in an existing placement which meets their needs, will enable people to maintain their local connections and where the Council does not have any concerns regarding the quality of the services people are in receipt of. It is noted that 7 people have also returned to live in more appropriate local settings over the past year as the reviews have progressed.
- vii. City of York Council Social Work and the Partnership Commissioning Unit have worked together to identify and review the 5 people who have been identified by Health having been in hospital accommodation and have contributed to discharge plans and arrangements that have been submitted by Health.

Implications

- 8. At this stage of the process there are not any significant implications but see further comments below.
 - **Financial** There may be financial implications as the work progresses and this will be monitored as part of the project plan and kept under review by the Transforming Care Group.
 - Human Resources (HR) There may be HR implications as the work progresses and this will be monitored as part of the project plan and kept under review by the Transforming Care Group
 - Equalities An Equality Impact Assessment is to be carried out in relation to the requirements of the Winterbourne Concordat.

- Legal At present there are no legal implications that can be foreseen.
- **Crime and Disorder –** At present there are no Crime and Disorder implications that can be foreseen.
- Information Technology (IT) At present there are no IT implications that can be foreseen.
- **Property** There may be property implications as the work progresses and this will be monitored as part of the project plan and kept under review by the Transforming Care Group
- Other There are no other implications.

Risk Management

9. There is a risk that the requirements under the Winterbourne Concordat are not met. However, there are robust performance metrics in place and this is being project managed by NHS England on a weekly basis.

Recommendations

- 10. The Health and Wellbeing Board are asked to consider
 - i. Note the Report

Reason: Due to the national importance of the Winterbourne Concordat the contents of this report should be noted by the Health and Wellbeing Board.

ii.Members of the Health and Wellbeing Board to continue to continue to promote integrated multi-agency working on the Winterbourne Agenda.

Reason: The national importance of the Winterbourne Concordat

iii. The Health and Wellbeing Board is to be updated in 3 months' time.

Reason: To keep the Board informed of the progress under this agenda.

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Specialist Implications Officer(s) - Not applicable

Wards Affected: Not applicable

For further information please contact the author of the report

Annexes: None