

## NORTH LINCOLNSHIRE COUNCIL

### HEALTH AND WELLBEING BOARD

Winterbourne View – Transforming Care and Winterbourne Concordat

#### 1. OBJECT AND KEY POINTS IN THIS REPORT

- 1.1 This report is to update the Health and Wellbeing Board about the short and long term actions required to implement recommendations from the Department of Health following the review of the abuses at Winterbourne View hospital.
- 1.2 Two reports *Transforming Care* and *The Winterbourne View Concordat* recommend a fundamental change to the way care is commissioned and provided for people who have learning disabilities and autism.

#### 2. BACKGROUND INFORMATION

- 2.1 In May 2011 the BBC Panorama programme *Undercover Care: The Abuse Exposed* showed unmanaged Winterbourne View Hospital staff mistreating and assaulting adults with learning disabilities and autism.

Following the programme South Gloucestershire's Adult Safeguarding Board commissioned a Serious Case Review.

- 2.2 **Transforming Care** is the Department of Health response to criminal abuse at Winterbourne View hospital revealed by the BBC Panorama programme in May 2011. It builds on the evidence and issues set out in the DH interim report published in June 2012.

The Government's Mandate to the NHS Commissioning Board says:

"The NHS Commissioning Board's **objective** is to ensure that Clinical Commissioning Groups (CCGs) 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 final report sets out some 63 actions both local and national with a firm timetable for delivery.

From the overall action plan it is possible to extract those actions that will have local implications on a range of different local partner agencies.

They fall into a number of themed work areas:

- Safeguarding
- Local audit(s)
- Contracting
- Patient register and database
- Patient review
- Service transformation
- Provider issues
- Joint planning and commissioning

The overall direction of travel can easily get lost in the detail of the work plan but the following issues remain at the forefront:

- This is not just about out of area placements
- This is not just about the independent sector
- There will be less reliance on inpatient services in the future
- Decisions will be joint between health and social care
- Budgets will be pooled
- Plans will be individual
- Community solutions will be the norm

2.3 The **Winterbourne View Concordat** is a programme of action issued by the Department of Health with the support of fifty different organisations.

Phase one position statement has been completed and returned to the Strategic Health Authority at the end of February by the CCG. This focused on identifying the numbers of patients in inpatient beds and ensuring that they have been reviewed. All targets have been met. 10 patients were identified.

Phase two position statement was submitted by North Lincolnshire CCG to NHS England North Yorkshire and Humber Area Team at the end of May. The return focused on the registers and reviews carried out in phase one to ensure each identified client has a comprehensive personal care plan based on their and their families' needs and agreed outcomes. The plan will contain a discharge plan with a realistic estimated discharge date before or after June 2014, a named local clinician, an individual health action plan and access to appropriate independent advocacy to support move on.

Phase Three of the Concordat requires patients to be returned to local areas, the commissioning of independent advocacy, the production of a formal plan and the development of quality, safety and openness standards.

- 2.4 The **North Lincolnshire Complex Care Review** provides evidence to support the development of local services. It forms the basis for effective commissioning providing a pathway for those based out of area whilst ensuring the delivery of quality, cost effective services for those individuals in area, their families and carers. The review sits within the QIPP agenda.

Following an initial meeting with North Lincolnshire Council on 1<sup>st</sup> February 2013 a project group has been formed to take forward the complex care review in light of Winterbourne View Concordat.

The role of the group will be to take forward the recommendations of both Winterbourne and the Complex Care review. The project group will revisit the Complex Care action plan and also establish responsibilities for governance and reporting arrangements. Inclusion North will work with the project group and have been asked to facilitate a local stakeholder event on 5th June. Following this event, the action plan will be revisited and updated in the light of the above.

### 3. **OPTIONS FOR CONSIDERATION**

#### 3.1 **Principles of the Winterbourne View Concordat**

3.1.1 The Winterbourne View Concordat is a series of actions carried out in three phases to identify, review and place, where appropriate, clients previously placed out of area back into a community placement.

#### 3.2 **Taking forward the Principles and Actions of the Concordat**

3.2.2 Work undertaken as part of the Complex Care Review includes the identification and review of all clients placed out of area.

Phase one and phase two Winterbourne position statements have been completed and returned to NHS England.

Phase three identifies placements in area, where appropriate, for clients placed out of area with a deadline of June 2014.

#### 3.3 **Letter from Minister of State for Care and Support, DoH, May 2013, *Delivery of Winterbourne View Concordat and review commitments***

A letter sent in May to Chairs of Health and Wellbeing Boards, Chief Executives of Local Authorities and CCGs affirms statutory duty in delivering the actions of the Winterbourne View Concordat. It seeks a commitment to collaborative working including a joint strategic plan to commission local health, housing and care support services to meet the needs of children, young people and adults with challenging behaviour. This could be considered as part of the local Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy (JHWS).

#### **4. ANALYSIS OF OPTIONS**

##### **4.1 Principles of the Winterbourne View Concordat**

4.1.1 That the Health and Wellbeing Board adopt the principles of the Winterbourne View Concordat and record as part of the minutes of their meeting.

##### **4.2 Taking forward the Principles and Actions of the Concordat**

4.2.1 That the Health and Wellbeing Board receive regular updates on Phase three of the Winterbourne View Concordat.

##### **4.3 Letter from Minister of State for Care and Support, DoH, *Delivery of Winterbourne View Concordat and review commitments***

4.3.1 That the Health and Wellbeing Board note the contents of the letter from Letter from Minister of State for Care and Support (attached), DoH, and confirm its commitment to collaborative working and ask the Integrated Commissioning Partnership to take forward the development of the joint strategic plan and receive future reports relating to its recommendations.

#### **5. RESOURCE IMPLICATIONS (FINANCIAL, STAFFING, PROPERTY, IT)**

5.1 There will be a requirement for the CCG to secure case management from either the Commissioning Support Unit (CSU) or Safeguarding Adults post within the CCG in order to meet the phase 3 timescales

5.2 There are implications in terms of market management when returning

#### **6. OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

6.1 Whilst an integrated impact assessment has not been undertaken but this area of work focuses on a traditionally excluded and disadvantaged group.

#### **7. OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED**

7.1 The Complex Care review identified in 2.4 above is being undertaken in conjunction with the patients, their families and carers and professionals, a stakeholder event is planned with the support of Inclusion North to facilitate and challenge the local response.

7.2 Regular reports on progress are being considered by a range of groups:

- i. Integrated Commissioning Partnership
- ii. Safeguarding Adults Board
- iii. Learning Disability Partnership
- iv. CCG Governing Body and Quality Group

## 8. RECOMMENDATIONS

- 8.1 That the contents of the report be noted.
- 8.2 That the Health and Wellbeing Board sign up to the principles of the Winterbourne Concordat
- 8.3 That the Health and Wellbeing Board receive regular updates on Phase three of the Winterbourne View Concordat.
- 8.3 That the Health and Wellbeing Board confirm their commitment to collaborative working in response the Letter from Minister of State for Care and Support, DoH, letter and ask the Integrated Commissioning Partnership to take forward the development of the strategic plan

CHIEF OFFICER, CCG

Health Place, Wrawby Road, Brigg, DN20 8GS

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Date: 29<sup>th</sup> May 2013

### **Background Papers used in the preparation of this report:**

Transforming care: A national response to Winterbourne View Hospital: Department of Health Review Final Report December 2012

Winterbourne View Review: Concordat: A Programme of Action: December 2012

Complex Care Project: September 2012

From Norman Lamb MP  
Minister of State for Care and Support



To: Chairs, Health and Wellbeing Boards  
Cc: Council Leaders and Chief Executives  
Chairs and Chief Operating Officers, GGCs

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*Dear Colleague,*

### **Delivery of the Winterbourne View Concordat and review commitments**

I am writing to you at the start of your taking on your statutory functions to stress the pivotal local leadership role that Health and Wellbeing Boards can play in delivering the commitments made in the Winterbourne View Concordat<sup>1</sup> which represents a commitment by over 50 organisations across the sector – including the Local Government Association, NHS England, the NHS Confederation, Royal Colleges and third sector organisations – to reform how care is provided to people with learning disabilities or autism who also have mental health conditions or behaviours viewed as challenging. There is widespread agreement across the sector that the care of this group of vulnerable people requires fundamental change.

The abuse of people at Winterbourne View hospital was horrifying. For too long and in too many cases this group of people received poor quality and inappropriate care. We know there are examples of good practice. But we also know that too many people are ending up in hospital unnecessarily and they are staying there for too long.

NHS England, NHS Clinical Commissioners, the Local Government Association, the Association of Directors of Adult Social Services and the Association of Directors of Children's Services each committed to working collaboratively with CCGs and Local Authorities to achieve a number of objectives by 1 June 2014, including that from April 2013, health and care commissioners will set out:

*“a joint strategic plan to commission the range of local health, housing and care support services to meet the needs of children, young people and adults with challenging behaviour in their area.*

<sup>1</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/127312/Concordat.pdf.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/127312/Concordat.pdf.pdf)

*This could be undertaken through the health and wellbeing board and could be considered as part of the local Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy (JHWS) process;*

- The strong presumption will be in favour of supporting this with pooled budget arrangements with local commissioners offering justification where this is not done.*
- We will promote and facilitate joint and collaborative commissioning by local authorities and CCGs to support these objectives.*

Health and wellbeing boards have an opportunity through their role in agreeing the CCG and Local Authority Joint Plans to challenge the level of ambition in the plan and ensure that the right clinical and managerial leadership and infrastructure is in place to deliver the co-produced plan.

Health and wellbeing boards will, no doubt, also want to take an active interest in how far the other commitments in the Concordat, particularly those relating to care reviews having been completed by June 2013, have been achieved, as well as satisfying themselves that commissioners are working across the health and social care system to provide care and support which does not require people to live in inappropriate institutional settings.

It will only be through creative local joint commissioning and pooled budgets working with people who use services, their families, advocacy organisations and carers and other stakeholders (including providers) that we will deliver more joined-up services from the NHS and local councils in the future and see real change for this very vulnerable group.

Health and wellbeing boards are well placed to agree when a pooled budget will be established (if not already) and how it will promote the delivery of integrated care – care that is coordinated and personalised around the needs of individuals; which is closer to home and which will lead to a dramatic reduction in the number of inpatient placements and the closure of some large in-patient settings.

The Department of Health has supported the establishment of an NHS England and Local Government Association-led Winterbourne View Joint Improvement Board. This Board will be working closely with a range of partners to develop and implement a sector-led improvement programme working with local health and social care communities to deliver real and lasting change in the support and

care for people with learning disabilities or autism who also have mental health conditions or behaviours viewed as challenging. It will shortly be in touch with you separately to take stock of progress in your area so that any appropriate level of support can be arranged.

Due to the very public nature of these failures in care, I am sure that you will want to ensure that your health and wellbeing board is able to provide transparent public information and assurance on progress locally.

Further information about the work of the improvement programme, including a recently issued framework for conducting reviews of care locally, is available on the LGA website. If you have any innovative practice to share, or views on how the programme can be designed and developed to ensure rapid progress and real and lasting change, please contact the programme chair via [Chris.Bull@local.gov.uk](mailto:Chris.Bull@local.gov.uk)

Yours sincerely,



NORMAN LAMB

We hope to publish progress around the country in meeting the commitments made in the Concordat in the Summer.

Thanks so much for your work on this incredibly important issue!