

HEALTH AND WELLBEING BOARD

11 FEBRUARY 2014

Title:	Progress on Winterbourne View Concordat		
Report of the Corporate Director of Adult & Community Services			
Open	For Decision		
Wards Affected: ALL	Key Decision: NO		
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Sponsor: Anne Bristow, Corporate Director of Adult & Community Services			
Summary: In December 2012 the government published its final report into the events at Winterbourne View Hospital and set out a programme of action to transform services so that vulnerable people no longer live inappropriately in hospitals and are cared for in line with best practice. Following the report all relevant statutory and non-statutory (50 in total) agencies / organisations designed and signed up to a 'concordat' which outlines key actions and their commitments in response to Winterbourne which will have an impact on Barking and Dagenham. This report provides an update on the Borough's progress against the actions required since the July update to the Board.			
Recommendation(s) The Health and Wellbeing Board is recommended to: a) Note the progress that the Borough has made in achieving the actions set out in the Winterbourne View Concordat since it last briefing. b) Note the Winterbourne View 'stocktake' document which has been produced for the Winterbourne View Joint Improvement Programme. c) Note the identified risks and mitigation plans.			
Reason(s) To ensure an appropriate and 'whole systems' approach is taken to addressing the findings of the Winterbourne View Concordat by the Health and Wellbeing Board			

1. Background and Introduction

- 1.1 This report provides an update on progress within the authority against the programme of actions set out in the Winterbourne View Concordat.

2. Progress

- 2.1 Since the last report to the Health and Wellbeing Board, the borough has continued to deliver against the milestones set out in the Concordat.

Local Register

- 2.2 The local register of all Health funded Barking and Dagenham Patients placed in inpatient services was handed over to the Clinical Commissioning Group on 01 April 2013 and is continually updated by the Community Learning Disability Team and reported to the CCG to ensure that the borough understands where individuals are placed, that they are receiving quality care and support proactive and effective discharge planning.

Numbers in Assessment & Treatment Units

- 2.3 The borough currently has seven people residing within a hospital/Assessment and Treatment Unit.
- 2.4 There has been one new admission within the last six months (two cases had previously been reported however one case was later identified as falling under Havering's responsibility).
- 2.5 The borough has recently accepted responsibility for a service user; this case was transferred by another local authority following a dispute relating to Section 117 responsibilities.
- 2.6 Of the other five, two service users have significant forensic histories; one service user is in a locked rehab unit and was recently made subject to Section 3 of the Mental Health Act following deterioration in behaviours. Following this, Section.117 after care responsibility will sit with another Local Authority with whom we are in discussions.
- 2.7 Of the remainder, one service user has been an informal patient in a local Assessment and Treatment Unit and is expected to be discharged within the next 4 weeks and the final service user is a patient in an out of borough Assessment and Treatment unit with significant challenging behaviours and subject to Section 3. The family of this latter individual is extremely resistant to a move, particularly if it means returning to the London area. The next CPA review is to be held in February and plans for the future will be discussed. The family has sought legal representation.

Discharge Planning

- 2.8 Comprehensive discharge plans have been put in place for the patients in the Assessment and Treatment Units for those deemed suitable for move on to local, less restrictive settings by 01 June 2014.

Joint Local Health and Social Care Self Assessment Framework

- 2.9 The borough completed its Joint Health and Social Care Self Assessment which was presented to the H&WBB in November 2013. This is in the process of being validated by Public Health England.
- 2.10 The borough will then put an action plan in place to improve the identified areas for improvement which will be delivered through the Learning Disability Partnership Board. The information from this is also being used to inform our Joint Strategic Plan on Challenging Behaviour.

Winterbourne View Stocktake

- 2.11 In 2013, the Council and the CCG undertook a 'Stocktake' of its progress against the Winterbourne View Concordat as part of a national exercise to establish progress and areas requiring assistance. This was reported to the Winterbourne View Joint Improvement Programme which is led by NHS England and ADASS and was established to help local areas fundamentally transform health and care services. A further 'stock take' was responded to in December 2013. There remains an issue of identification of NHS numbers of people in ATUs which is being worked on nationally. The report of the Stock take has now been made available.

- 2.12 In brief, the Stocktake found:

- All localities engaging and working on the Concordat commitments;
- Progress and leadership across the partners;
- H&WBBs being sighted on the Winterbourne priorities;
- Skilled and committed staff at commissioner, care management, community and provider levels and in leadership roles supporting change;
- Some service user and family carer engagement but this is not consistent;
- Safeguarding practices being followed consistently;
- Integrated/joint working evident in assessment, commissioning and service development although this is not evident everywhere;
- The engagement of newly formed CCGs is bringing fresh impetus and priority in some localities;
- Innovation and strategic planning in some localities to reduce reliance on distant, long term Assessment and Treatment placements;

- Over 340 examples of good policy/practice which are undergoing further analysis

But, the Stocktake highlights the following for development locally:

- An urgent need to resolve issues of definition raised in 'Transforming Care' and the Concordat and, in particular, a need to clarify and define the key individuals who need to be considered as part of the change programme both now and in the future;
- The development of whole life planning;
- The need rapidly to improve engagement, understanding and joint working across the various commissioning functions (specialist, forensic and health and social care);
- The need for localities to work together both within and across geographical boundaries to achieve longer term sustainable solutions;
- The need for a resolution to continuing difficulties in relation to Ordinary Residence;
- The need for consistent application at local level of Continuing Health Care criteria.
- There is a need for investment in behaviour support and community based accommodation options to enable safe and local support services;
- Integration, and use of, financial resources with medium and long term financial strategies;
- Collaborative work with providers at a national, regional and local level to develop alternatives to current provision;
- Expedition in work to improve quality and consistency of care through robust commissioning
- An increase in the development of, and investment in, service user, family carer and advocacy activity;
- An increase in the understanding and application of personalisation for all individuals, notwithstanding the complexity of their situation;
- Work to ensure the wider understanding and application of the Mental Capacity Act (MCA)
- A need for support to H&WBBs in their strategic role.

3. Ongoing Work

- 3.1 As part of the Winterbourne View Programme, the Council and the CCG are undertaking the following pieces of work by the required milestones set out in the Concordat:

Pooled Budget Arrangements and Lead Commissioning Responsibilities

- 3.2 The Council and the CCG are in the process of discussing pooled budgets and lead commissioner responsibilities. In view of the tight timescale required for this piece of work to be completed; the Council and the CCG are taking the approach that budgets will not be pooled at this stage for the commissioning function but that the budgets will be ring fenced and managed by the local authority. The integrated provision will be pooled. It is anticipated that pooling of budgets will occur on review. A high level project group is meeting monthly to ensure that there is agreement in place by the 1st April 2014 milestone and work has begun to agree formal arrangements between the Council and North east London Foundation Trust to consolidate the current integrated provision of the Community Learning Disability health and social care services.

Joint Challenging Behaviour Commissioning Plan

- 3.3 Adult commissioning has been working in collaboration with Children's Services on the Joint Strategic Plan to respond to the Winterbourne View Concordat. This is essentially a Commissioning Strategy for responding to the needs of children and adults with Challenging Behaviour (as per the agreed definition). Given the nature of the definition of challenging behaviour – and the inherent challenge that this poses - it is not a definition in itself readily identifiable through existing data collection systems. Children's Services have researched data to enable the authority to make some reasonable estimates as to likely numbers of children who are coming through and will be presenting with a need for services over the next five to six years. The plan has been drafted but will be undergoing revision over the next few weeks to make it more accessible; it is envisaged that the data collated by Children's Services will be included and the draft will be amended to incorporate the implications of the data.

4 Mandatory Implications

4.1 Joint Strategic Needs Assessment

The Joint Strategic Needs Assessment (JSNA) has a strong overall analysis of needs of people with a learning disability as well as a detailed safeguarding element within it. There is general agreement that cross-sector working in the borough with involvement from the NHS, employment, housing and other bodies, in addition to the Council's children's services and adult and community services is good.

4.2 Health and Wellbeing Strategy

The Health and Wellbeing Board mapped the outcome frameworks for the NHS, public health, and adult social care with the children and young people's plan. The strategy is based on eight strategic themes that cover the breadth of the frameworks in which learning disability is picked up as a key issue. These are Care and Support,

Protection and Safeguarding, Improvement and Integration of Services, and Prevention. Actions, outcomes and outcome measures for people with learning disabilities are mapped across the life course against the four priority areas.

4.3 Integration

Responsibility for ensuring the delivery of the things set out the concordat rests with both the NHS and the Local Authority and there is commitment on both sides to enable this to happen. The local action plan will be fully integrated and will include actions for both health and social care.

4.4 Financial

(Implications completed by Roger Hampson, Group Manager Finance)

There are no quantifiable costs attached to the programme of action identified in response to the Winterbourne View Concordat or the stock take. The delivery of the both programmes, including any subsequent additions, must be accommodated within the current resources of the accountable bodies identified within the plan.

4.5 Legal

(Implications completed by Lucinda Bell, Solicitor Social Care and Education)

The Health and Wellbeing Board is under a duty¹ to encourage integrated working. This includes:

- a duty to encourage those arranging for the provision of health or social care services in their area to work in an integrated manner; and
- a duty in particular to provide advice, assistance, and so on, to encourage the making of arrangements under section 75 of the NHTA 2006.

5 Risk Management

5.1 The following potential risks and mitigations have been identified:

Identified Potential Risk	Mitigation / Action
S75 / Pooled budget arrangements	Discussions are underway between the Local Authority and CCG Monitoring and progress will be reported to the LD sub-group and the H&WBB.
Move of people back to the local community by 01 June 2014 deadline	Comprehensive plans are already in place by the CLDT to support the patients identified to less restrictive settings The LD sub group will continue to monitor progress and report up to the H&WBB

6. Non-mandatory Implications

- 6.1 **Crime and disorder:** Some of the individuals in our AT&Us may present a risk of offending so risk management will need to be considered as part of the review process
- 6.2 **Safeguarding:** Barking and Dagenham will be bringing back to borough vulnerable service users who may have spent significant periods in patient services;
- 6.3 **Property/assets:** Barking and Dagenham will need to ensure suitable accommodation is in place as a form of prevention and for people who are coming back from out of borough.
- 6.4 **Service User and Carer impact:** Barking and Dagenham will have to work in close partnership with the carers and five service users in Assessment and Treatment Units (AT&U's) as part of the review process, in particular those who have been identified as suitable to return back to borough.
- 6.5 **Staffing issues:** Barking and Dagenham will need to ensure, in preparation for bringing individuals back into borough and as part of our local strategic plan, it has both a skilled and competent workforce in place to support and care for people with learning disabilities and who have behaviour which challenges.

7 Background Papers Used in the Preparation of the Report:

- Winterbourne View Joint Improvement Programme Stock take of Progress Report (September 2013)