

SUNDERLAND HEALTH AND WELLBEING BOARD

26 July 2013

**REPORT ON ISSUES ARISING FROM THE DEPARTMENT OF HEALTH
WINTERBOURNE VIEW HOSPITAL REPORT (DEC 2012)**

Report of the Executive Director of Health, Housing & Adult Services

1 Background

- 1.1 Castlebeck Care, which operated Winterbourne View in Bristol, has been a long standing provider of Independent Hospitals and Nursing Homes and has services in the North East as well as the Midlands, the South West and Scotland.
- 1.2 In the past few years, there has been a much clearer focus and investment on sustaining people where they live, either in their own house, with family or in local establishments - with more intensive support from community learning disability services. This maintains the community, friends and family links that are so important to people. Planned and regular interventions when required can maintain someone with disabilities for much longer periods in their own community. The costs for local support can vary significantly, dependent upon individual need.
- 1.3 Whilst these measures can delay or prevent admission to a specialist hospital, nevertheless there are some individuals who have such a severe level of mental illness that they need a specialist hospital environment that makes it safe for themselves and others and they are usually detained under the Mental Health Act to receive psychiatric and other clinical assessment and treatment.

Panorama TV Programmes 31st May 2011 and 29th October 2012

- 1.4 On these dates, the BBC broadcast programmes which showed undercover filming over a period of weeks at a Castlebeck facility - Winterbourne View Hospital, Bristol. There was horrific evidence of maltreatment, bullying and, in some commentators opinion, torture of a cohort of people with learning disabilities, men and women, who were in a locked ward environment. This resulted in several members of Castlebeck staff being arrested by the Police, subsequently charged and sentenced.
- 1.5 There were no Sunderland people in Winterbourne View. Currently, the Clinical Commissioning Group (CCG) funds one Sunderland person in a Castlebeck hospital facility in Hexham and one individual funded by Durham CCG, with whom Sunderland maintains social work involvement.

2 Requirements arising from the DH Winterbourne View Final Report - “Transforming care: A national response to Winterbourne View Hospital” (Dec 2012):

2.1 There is a whole range of actions across Government proposed by the Report including actions for NHS England, Clinical Commissioning Groups, Councils and commissioners who buy health and social care.

2.2 There were reviews of individuals that had to be carried out by 1st June 2013. If people do not need to be in hospital (the phrase used is “inappropriately placed”) commissioners have to support them to move to community based support no later than 1 June 2014 - before if possible. This is across all age groups. The definition is *Children, young people and adults with learning disabilities and autism who also have MH conditions or behaviours described as challenging.*

2.3 The DH Report strongly favours pooled budgets and joint commissioning via the JSNA and Health and Wellbeing Board. Sunderland is well placed in this regard.

2.4 It is important that the Sunderland Learning Disabilities Partnership Board, which is the local voice of people with learning disabilities and families, is fully engaged so there have been regular reports to that Board over the past year, in addition to other interested bodies e.g. the Safeguarding Boards.

2.5 There were a total of eleven Sunderland individuals in hospital at the end of March 2013 who needed to be reviewed in this context.

- 1 person was in a Castlebeck facility
(that person is nearly ready to be discharged)
- 6 people were in NTW Northgate hospital
(1 person has been discharged and another 2 will be discharged soon)
- 1 person was in NTW Rose Lodge Hebburn
(that person has been discharged)
- 3 people were in Roseberry Park, Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) Hospital
(1 person is to be discharged soon)

2.6 By 1 June 2013

By this date, each person with a learning disability or autism and challenging behaviour in a specialist hospital (Northgate/Rose Lodge/Castlebeck or elsewhere) had to have their placement and support/care reviewed and a support/care plan produced.

The support/care plan was compiled by working with the person and their family to make sure it is what they want and need. The individuals already had plans and this initiative focused on the appropriateness of current arrangements and the prognosis for future care and support.

The required deadline of 1st June 2013 was met by Sunderland CCG and the City Council working closely together. That was formally reported to NHS England.

2.7 By 1 June 2014

If the support/care plan evidenced that the person does not need to stay in hospital i.e. they are “inappropriately placed” then they need to be helped to move back into the community by that date.

There were no Sunderland people in that position. Although it can be seen in 2.5 above that two people have been discharged and another four people are nearing discharge, those changes would have occurred in any place as operational arrangements in Sunderland are such that anyone in hospital is usually well known to services, to the community learning disabilities nursing team and the social work learning disabilities team.

2.8 The other patients are still in need of specialist treatment but plans continue to be made for their eventual discharge - when clinical evidence and opinion concurs it is appropriate to do so.

3 Actions

- 3.1 A Project Board has been established, time limited for 18 months, to take forward the reviews in the shorter term and other requirements in the longer term. That would include the development of a joint commissioning strategy for learning disabilities services in Sunderland. The project Board is comprised of people with learning disabilities, carers and officers of the Council and the CCG. Also, there is an officer care review and planning team which has worked well to achieve the reviews and now is concentrating on gathering together aggregated information and “lessons learned”.
- 3.2 All of the eleven individuals were visited and Sunderland People First self-advocacy group wrote a letter to the patients about to leave hospital suggesting that they make contact with the group in order to make friends and for it to be a support group.
- 3.3 Where families are still in contact, they were involved and consulted for their views. The Sunderland Carers Centre wrote a very helpful letter which was issued to those families, inviting them to make contact with the Centre if they felt they wanted more support.
- 3.4 Appropriate advocates are allocated for the patients – either an Independent Mental Health Advocate (IMHA) and/or an Independent Mental Capacity Advocate (IMCA). Further work has been carried out to ensure that appropriate advocacy continues to be afforded to individuals. Also, where someone has declined advocacy they will be offered regularly the opportunity to change their minds.

- 3.5 NHS North of England operates a clinical network for learning disabilities which exists to improve the health and well-being of people with learning disability in the north east and eliminate avoidable, premature deaths, injury and illness. It is attended by Lynden Langman or Jim Usher from the City Council Gloria Middleton and Ian Holliday/Alan Cormack from the CCG. NHS England has been monitoring progress of the programme through that group.
- 3.6 The Minister of State for Care and Support wrote in May 2013 to the Chairs of the Health and Wellbeing Boards drawing their attention to the Winterbourne View review issues, suggesting that they have the opportunity to challenge the ambitions of local plans to ensure that the right level of clinical and managerial leadership and infrastructure is in place. Also to ensure that commissioners are working across health and social care systems to provide care and support which does not require people to live in inappropriate institutional settings.
- 3.7 The national Joint Improvement Board, led by NHS England and the Local Government Association, has asked for a “stock take” to be undertaken through a lengthy questionnaire which had to be signed off by the chair of the H&WB Board, the Chief Executive of the City Council the Chief Officer of the CCG and returned by the 5th July. The completed stock take document is attached at Appendix A. Details of the supporting documentation, including good practice case studies mentioned in the stock take can be provided by emailing alan.cormack@sotw.nhs.uk or phillipa.corner@sunderland.gov.uk

4 Recommendations

The Board is recommended to note that:

- i the deadline of 1st June was met in order to review in-patients in specialist learning disabilities hospitals
- ii there were no individuals “inappropriately placed” in hospital
- iii the required stock take was completed and returned
- iv further progress reports will be made to the Adults Partnership Board and escalated to the HWBB if required.