TRANSFORMING CARE FOR PEOPLE WITH LEARNING DISABILITIES AND/OR AUTISM

Report of the Chief Officer of Sunderland Clinical Commissioning Group

1 Purpose of the Report

To provide assurance to the Board of progress in Sunderland regarding the national transforming care programme for people with learning disabilities and/or autism. The report introduces the collaborative 'fast track' programme developed across the NHS and Local Authorities in the North East of England.

2 Background

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

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 and/or autism, 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.

- 2.2 There was a whole range of actions across Government proposed by a subsequent national report entitled "Transforming Care: A national response to Winterbourne View Hospital" (Dec 2012)" including actions for NHS England, Clinical Commissioning Groups, Councils and commissioners who buy health and social care.
- 2.3 It is important that the Sunderland Learning Disabilities Partnership Board, which is the local voice of people with learning disabilities and/or autism and families, is fully engaged and there have been regular reports to that Board over the past few years, in addition to other interested bodies e.g. the Safeguarding Boards.
- 2.4 Soon after the national report, a Sunderland Project Board was established comprised of people with learning disabilities and/or autism, carers and officers of the Council and the CCG to monitor implementation of requirements arising from the national report. Also, there is an officer care review and planning team which has worked to achieve required reviews of people in hospital and now is concentrating on maintaining a good knowledge and database of information on people in hospital and people who may be at risk of admission to hospital

- 2.5 NHS North of England operates a clinical network for learning disabilities which exists to improve the health and well-being of people with learning disabilities and/or autism in the North East & Cumbria (NE&C) and help eliminate avoidable, premature deaths, injury and illness. It is attended by officers from the City Council and from the CCG. To date, NHS England has been monitoring progress of the programme through that group.
- 2.6 Pooled budgets and integrated commissioning between CCGs and Local Authorities for learning disabilities services is seen by Government as the way forward and the Board will be aware that Sunderland is well placed in that regard.

3 Fast Track

- 3.1 Government has not been satisfied with the pace of change in implementing Transforming Care, particularly around reducing the number of hospital beds in specialist hospitals along with reducing the number of admissions to those beds. It was stated that some local commissioners were not aware of the usage of the beds and were not planning well for discharge when individuals were coming near to the end of their hospital treatment for their mental health and behaviours that challenge. Sunderland is not in that position.
- 3.2 As a result of those concerns, NHS England recently identified six "fast track" areas to put some impetus into the system by creating a pool of £10M for the fast track areas to bid for. That initiative will be rolled out across the country in the coming months.

The six fast track areas are:

NE&C

Greater Manchester

Lancashire

Arden, Herefordshire and Worcestershire

Nottinghamshire

Hertfordshire

They have been selected because they have high numbers of people in inpatient settings, bringing together a large number of commissioners – each with different challenges – so that NHS England can test a number of approaches and effect the biggest change.

This initiative is well named as "fast" as discussions and plans had to be brought together very quickly and over the holiday period.

3.3 In NE&C, the CCGs quickly established a Transformation Board chaired by David Hambleton, Chief Officer for South Tyneside CCG, comprised of the constituent CCGs and representatives of ADASS. People with learning disabilities and/or autism and families also are represented on the Board as are the main hospital providers.

So far, the Board has collated initial transformation plans from the eleven CCG areas and submitted a collective regional plan, bidding for £2.7M.

Subsequent feedback from NHS England required additional information which was supplied and has resulted in an allocation to NE&C amounting to

£1.432M. The Board has discussed how to manage that lower allocation and is confident that it can do so. CCG Directors of Finance are closely involved.

3.4 The Sunderland transformation plan is attached as Appendix I and the regional plan, including an easy read version, can be accessed at

http://www.necsu.nhs.uk/necfasttrack

Because Sunderland already has really good community services we said we needed some capital monies so that we could purchase and/or adapt properties so that people could move out of hospital quicker or not need to go into hospital (£250K). Also, we sought funding to support a local autism organisation (£150K) and additional training (£3K) for some community staff. (Capital Bids have now been excluded from the Transformation Fund allocated)

- 3.5 Sunderland learning disabilities health services are held up as national best practice leading to NHS England commending to others the services and the way in which the CCG and Sunderland City Council work closely together through partnership working, pooled budgets and integration plans.
- 3.6 The whole required basis for these fast track plans is that community support services should be enhanced and consequently hospital bed numbers and admissions to those beds must both be reduced by 50% over the next five years although recently that requirement has itself been reduced to three years. This is a very challenging target that will need to be closely monitored to ensure that people with learning disabilities and/or autism and their families continue to receive appropriate services, according to their assessed need and their mental health status.
- 3.7 Some years ago, the then Sunderland Primary Care Trust invested more resources into community learning disabilities health services and the number of hospital beds were reduced by seven. The services are configured to support people in the Sunderland community and avoid hospital admission and are deployed through three pathways of care Positive Behaviour Support Health and Wellbeing Mental Health and Wellbeing. The services work closely with the City Council People Directorate, with mental health services and with the criminal justice system to ensure there is timely and appropriate support to individuals and their families.
- 3.8 There is good knowledge of individual need and databases exist that identify possible crisis situations that may arise. Also, anyone who is admitted to the specialist hospital will have a discharge plan which includes identifying community support services and accommodation that will be needed before discharge occurs. Through the adult social care solutions team, there is excellent knowledge of individual need and positive relationships with Sunderland housing providers.
- 3.9 At any one time there are around ten Sunderland people in specialist hospital beds, funded by the CCG. Additionally, there are around twelve Sunderland

people with learning disabilities and/or autism in medium and low secure hospitals which also will be subject to that 50% decrease. Funding of those individuals is by NHSE, not the CCG, but there is close working relationships with the case managers to ensure a good awareness of the individuals and where they are in their treatment and discharge planning.

4 Recommendations

The Board is recommended to:

- Note the content of this report and the Fast Track plans
- Expect future reports as appropriate