Transforming Care for people with learning disabilities

Getting things right in Leicestershire
A joint commissioning plan

2014-2016
Introduction

“Everyone, with no exception, deserves a place to call home. Person by person, area by area, the number of people with learning disabilities and autism in secure hospitals or assessment and treatment settings will permanently reduce. At the same time local community-based support and early intervention will improve to the point it will become extremely rare for a person to be excluded from the right to live their life outside of a hospital setting”

Winterbourne View Joint Improvement programme vision

Following the exposure of abuse at the independently run hospital Winterbourne View by the BBC in May 2011, a review of the treatment and support for people with learning disabilities and autism was carried out. The subsequent report, Transforming Care: A national response to Winterbourne View Hospital, outlined the actions by a range of organisations to be taken to ensure that such abuse cannot happen again.

Transforming Care emphasised the need for local authority and health commissioners to work together to “transform care and support for people with learning disabilities or autism who also have mental health conditions or behaviours viewed as challenging”

There is a clear appetite across Leicestershire to use the Winterbourne View plan to affect “Transformational Change” in the local approach for services for people with learning disabilities, including those who may challenge services or who may need to access Mental Health support, including admissions to low, medium or high secure units.

This plan has been developed with colleagues from across Health and Social Care. Working with people with learning disabilities and their families and supporters will integral to its delivery.
Legal and Policy Frameworks

Following an expose and subsequent reports on the abuse of people with learning disabilities living in an independently run hospital – Winterbourne View. The Government set up a Joint Improvement Board to oversee a range of actions which were set out in the Joint Winterbourne View Concordat: Transforming Care (2012).

There is a local commitment by Health and Social Care to use “Transforming Care” as an opportunity to effect transformational change in the delivery of services for people with learning disabilities, particularly those who challenge services.

The recently published Core Commissioning Tool, Ensuring Quality Services, emphasizes the need for education, health and social care to work together to deliver a whole life approach to support. The 14 Core principles are:

1. Positive Behavioural Support
2. A whole systems life course approach
3. Prevention and early intervention
4. Family carer and stakeholder partnerships
5. Function based holistic assessment
6. Behaviour that challenges is reduced by better meeting needs and increasing quality of life
7. Support for communication
8. Physical health support
9. Mental health support
10. Support for additional needs
11. Specialist local services
12. Safeguarding and advocacy
13. Workforce
14. Monitoring quality

Each of the principles are incorporated into Leicestershire’s plan.

The delivery of the plan will be in the context of the emerging changes in legislation – the Children and Families Act 2011 introduces the duty for Education, health and social care to work together to produce a single plan for each young person who has a statement of educational need with planning being extended to age 25. Children and Young People’s commissioners are actively engaged in Leicestershire’s approach to Winterbourne View.

The Care and Support Bill 2013 places a duty on local authorities to take steps which are aimed at preventing, delaying or reducing adult’s needs for care and support. In the context of Winterbourne, prevention and early intervention is key. The focus is on reducing admissions of people with learning disabilities and autism to mental health units and where admissions cannot be avoided, there is a clear discharge plan which will reduce the risk of future admissions.

The Better Care fund plan for Leicestershire describes the activity which will happen to support prevention and early intervention across all users of Health and Social care, it also illustrates the commissioning model in response to Winterbourne for Leicestershire.
1. What Care and Support will look like

The vision for Leicestershire is to ensure high quality person centred services will be available for children, young people and adults with a learning disability or autism who may also have mental health issues and/or behaviour that challenges services.

The quality of services will be determined by those who use them - experts by experience and their families will work side by side with Council officers to ensure that services are contractually compliant and deliver a high quality of care and support.

Poor quality services will not be tolerated in the absence of an alternative. Services will be offered support to improve which is proportionate to the scale and scope of the organisations and the local provision. Where excellence is evidenced this will be celebrated and shared across the County to encourage continuous development of practice.

We will work cooperatively with our partners across Health and Social Care and in the wider community. We will work towards an integration of services that means families get the support they need in a timely way. There will be clear pathways to access the right services at the right time.

The workforce across Health and Social Care will have the confidence and support to work well with people with learning disabilities and their families. There will be effective leadership which will challenge poor practice in all its forms, encourage reflective practice and demonstrate value and respect for everyone who provides support.

2. The Values we will use to Transform Care

The needs and aspirations of people with learning disabilities and their families will be at the heart of what we do. We will use information about services and individuals sensitively but in a spirit of openness and transparency.
We will work in a person centred, holistic way using innovative and creative approaches to support which are cost effective. The emphasis will be on early intervention and prevention. Stakeholders will be expected to work cooperatively and integrate where appropriate in the design and delivery of services.

3. Current Climate

3.1 The numbers
Across the wider learning disability population there are 1150 people with learning disabilities known to social care. 88 people are placed in residential accommodation outside of Leicestershire. 38 are placed with 32 providers with a range of specialisms. 45 are in Leicester City and 5 are in Rutland. There are local arrangements in place between Leicester, Leicestershire and Rutland to support the monitoring and review of placements including Information Sharing arrangements to support Safeguarding.

Since the publication of the Winterbourne View concordat, Leicestershire has had between 3 and 5 people accessing a local Assessment and Treatment provision at any one time. There have been regular reviews and there are discharge plans in place for that minority who are currently in patients.

There are 6 people currently in Out of County placements commissioned by NHS England all of whom are in low or medium provision. For those there are identified discharge timescales which reflect clinical need.

3.2 Existing Local Provision
The Leicestershire Partnership Trust (LPT) provide a local Assessment and Treatment Unit through Commissioning arrangements with 3 Local CCG’s. The Agnes unit is a 20 bedded inpatient services for adults with learning disabilities. The unit provides an inpatient service for individuals whose mental health, behaviour and risk cannot be supported in the community.

Built in 2008 the unit is made up of five individual pods each with four en-suite bedrooms, two bathrooms, lounge, dining room, kitchen and office.

There are 8 beds for patients who need longer term support. They may be either on the forensic care pathway or have returned to Leicestershire following an out of county placement. The aim of the longer stay beds is to rehabilitate and support patients to be able to live safely in the community.

There are 12 beds are for patients who need shorter term admission for assessment and treatment. Admission may be planned or in an emergency following a crisis situation.

The Agnes Unit provision is complimented by an Outreach team which is part of the specialist learning disability service. The Outreach service works with people who have a learning disability who require support due to the presentation of severe challenging behaviour and who, because of the risks associated with those behaviours, pose a risk to themselves and/or those around them.

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1 Taken from data provided to the Health and Social Care Information centre (HSCIC) 2013
The team undertakes a comprehensive assessment which informs the development of behaviour intervention guidelines jointly with the person, a multi-disciplinary team, carers and services. Direct support can also be provided to facilitate implementation of the guidelines developed by the Outreach team.

Social Care commissions providers via framework arrangements to ensure there are a range of flexible approaches available to support individuals. In addition to the framework there is also a Shared Lives provision which is being used to meet a range of needs including long term accommodation, short breaks and day series and Short Breaks accommodation which also provides support at times of crisis.

3.3 Pooled Budget
A Pooled Budget under Section 75 of the NHS Act 2006 is in operation for the commissioning of services for people with learning disabilities. The contributing partners are Leicestershire County Council (50%) West Leicestershire CCG (27%) and East Leicestershire and Rutland CCG (23%)

The value of the pooled budget for 2013/14 was £19.2 million. The forecast until 2017 is as follows:

- 2014/15 £21.7m
- 2015/16 £24.4m
- 2016/17 £26.9m

As of April 1st 2014 there were 254 people having services commissioned through the Pooled Budget. The cost of individual packages ranging £354 per week to in excess of £3000 a week. The services being commissioned through the Pooled Budget include accommodation, short breaks, day services, home care and transport. There are also some people who are in receipt of a cash payment under a personalised budget.

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2 As of 1st April 2014
4. Strategic Objectives

To support the delivery of Transforming Care key strategic requirements have been identified:

- There will be a clear governance and oversight structure which will act as a critical friend and provides support to the ongoing delivery of the strategy
- There will be clear operational links to the Council wide Integration agenda.
- An Integrated policy for the support of people with behaviours which may challenge services in health and social care will be developed
- There will identified pathways which support the transition from services for Children and Young people to Adult services

There are clear interdependencies between the objectives. Where there are existing structures which will support delivery of an objective, plans for those structures are being revised to reflect the needs arising from the Transforming Care action plan. For example, the Leicestershire Safeguarding Governance Board, as a sub group of the Leicestershire Adult Safeguarding Board are taking responsibility for the Keeping People Safe objective.

The strategic objectives are:

- Understanding Our People
- Quality and Compliance
- Effective Commissioning
- Keeping People Safe
- The Right Workforce

The objectives support the delivery of the model of care and support which will be delivered through the Better Care Fund.
Understanding Our People

Effective Commissioning

Keeping People Safe

The Right Workforce

Specialist Services
- Assessment and Treatment Services
- Crisis Response - across Health and Social Care

Targeted Services and Case Management
- Crisis Outreach

Early Intervention and secondary prevention
- Short Breaks
- Carers Networks
- Local Area Coordination

Universal Services for the Whole population

Prevention

Integration

Figure 2
I. Understanding our people:
Accurate, reliable person centred information will be available across health and social care which supports the effective commissioning of services for children, young people and adults with learning disabilities - who may also have mental health needs and behaviours that challenge.

To achieve this we will:
- Develop clear data collection processes that support commissioning and service reviews across Children and Young peoples and Adults services in Health and Social Care
- A detailed review of provision is available of in patients, to include nature and level of service, prior to admission, to provide a benchmark for future service developments
- People with learning disabilities and families are empowered to participate in decision making at a personal and strategic level. Their voices are valued and actively listened too. Co production is the "Golden thread" of plans and delivery
- A detailed, person centred audit of all out of county placements is undertaken to identify gaps in local provision

II. Effective Commissioning
A totally pooled budget supports the development of flexible, responsive local provision - including 24 hour crisis support. The market is supported to deliver innovative, person centred, cost effective services.

To achieve this we will:
- Build on the current Pooled Budget arrangement to commission all services for people with a learning disability across health and social care for CYPS and Adults services
- Increase the range of accommodation options available
- Produce clear pathways and joined up services which support the transition from CYPS to adult services
- Develop an integrated 24/7 Crisis response pathway across Health and Social Care

III. Quality Assurance and Compliance
Poor and non compliant services will not be tolerated in the absence of an alternative, we work in partnership with people with learning disabilities and their families to develop person centred quality checking tools.

To do this we will
- Develop Quality assurance processes across health and social care services that are inclusive of people with learning disabilities and their families

“Care plans “step up” care when needed to support through period of crisis or increased need and “step down” care when the person stabilises or needs decrease”

“We think a good quality service should keep people safe, do what people want it to do, be value for money, work in a person centred way and support people to have choice and control over their life”
A quality Assurance Framework is adopted by all stakeholders
Develop a contract compliance process for contracts with CYP services
Service providers share best practice and are supported to explore innovative models of provision

IV. Keeping People Safe
People with learning disabilities and their families are safe from abuse - through commission or omission. There are robust, responsive systems in place which support information sharing (with due regard to data protection and information sharing protocols) in relation to concerns across health and social care. Learning from alerts and outcomes of investigations are used to inform monitoring and delivery of services.

- Confidence that people are safe in all placements
- Safe places are appropriately used and people with learning disabilities feel more confident to access the community
- People with learning disabilities and family carers are able to recognise abusive practice and feel empowered to report it

V. The right workforce
There is a workforce across all sectors which supports people with learning disabilities and their families in a person centred way. Creative recruitment and development practices are used to create a values based workforce with families and people with learning disabilities being integral to its delivery.

- A learning and development programme is in place which promotes effective leadership and a values based approach to the delivery of services
- Family carers and people who provide informal care (family friends, community members etc) feel supported in their role
- People with learning disabilities and family carers have an active role in the recruitment of the workforce across learning disability services in Health and Social Care
- Staff across health and social care have a range of formal and informal support mechanisms which enable problem solving, innovation and sharing of best practice

“What happened at Winterbourne was disgusting, how can people treat us like that”

Self Advocate
7. Delivery

The Transforming Care action plan will be delivered with stakeholders across Health and Social care including but not limited to:

- People with learning disabilities
- Family carers
- Leicestershire County Council
  - Adults and Communities
  - Children and young People
- West Leicestershire CCG
- East Leicestershire and Rutland CCG
- NHS England
- Leicestershire Partnership Trust
- Private and Voluntary sector providers

The action plan will be delivered through a series of task and finish groups. Each group will be Co-Chaired by a representative from LCC and from a CCG.

To enable partnership working with people with learning disabilities and family carers a virtual network will be developed. The network will be comprised of people who are interested in the work related to Winterbourne and people will be invited to participate in activities such as sitting on the task and finish groups, supporting the delivery of training and undertaking quality checks of services.

The membership of each group will include a person with a learning disability, a family carer, representation from the private and voluntary sector as well as appropriate roles from LCC and the various NHS agencies.

The action plan will be governed by a Winterbourne View board which will report to the Learning Disability Programme Board. The Winterbourne View Board will monitor progress and identify risks and issues for escalation to the LD Programme Board.

It is expected that the delivery of the plan will be done within existing resources. Where additional resources are identified a proposal will be made to the learning disability programme board.
7.1 Action plan

### Understanding Our People
Accurate, reliable person centred information will be available across health and social care which supports the effective commissioning of services for children, young people and adults with learning disabilities - who may also have mental health needs and behaviours that challenge

<table>
<thead>
<tr>
<th>Outcomes</th>
<th>Activity</th>
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| There is are clear data collection processes in place that supports commissioning and service reviews across Children and Young peoples and Adults services in Health and Social Care | • Update the CCG LD register in current circulation  
• Review all data collections methods across health and social care relevant to learning disability: what is collected, how is it collected. The target is a register or information collection point which captures commissioning information for all people with a learning disability across Childrens and Adults services  
• Develop opportunities for relevant data collections across CYPS - working with Public Health  
• Information Sharing Agreement is in place across LLR for information about individuals with LD  
• Details of children and young people with learning disabilities are flagged in the Disabled Childrens register |
| A detailed review of provision is available of in patients, to include nature and level of service, prior to admission, to provide a benchmark for future service developments | • Carry out an audit of all inpatients to understand the path leading people to inpatient admission and what support and intervention may have prevented this |
| People with learning disabilities and families are empowered to participate in decision making at a personal and strategic level. Their voices are valued and actively listened too. Co production is the | • Develop a Commissioning Advisory group made up of people with learning disabilities and family carers who will support the commissioning of services for people with learning disabilities  
• Review of 1:1 advocacy provision (in all its forms) for people with learning disabilities and their families - to include number of referrals, type of issues, resolution |
<table>
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<tr>
<th>&quot;Golden thread&quot; of plans and delivery</th>
<th>outcomes, level of need of people being referred</th>
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<td></td>
<td>• Review of efficacy of engagement strategy and delivery for people with learning disabilities and their families</td>
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<td>A detailed, person centred audit of all out of county placements is undertaken to identify gaps in local provision</td>
<td>• All out of county residential and nursing care placements are identified and benchmarked for package costs, location, provider and age range.</td>
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<td>• Deep dive undertaken of Out of County Health and Social Care placements to understand the factors leading to the placement to inform future commissioning need</td>
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<td>• Individuals are identified, in conjunction with the review team to have a reviews undertaken using a person centred methodology</td>
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**Effective Commissioning**

A totally pooled budget supports the development of flexible, responsive local provision - including 24 hour crisis support. The market is supported to deliver innovative, person centred, cost effective services

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<td>Build on the current Pooled Budget arrangement to commission all services for people with a learning disability across health and social care for CYPS and Adults service</td>
<td>• Finalise completion of the 2013 - 2015 Section 75 agreement</td>
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<td>• Scope risks, benefits and implications of adding 100% social care (Adults) to Pooled budget</td>
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<tr>
<td></td>
<td>• Scope risks, benefits and implications of adding 100% social care (Children and Young People) to Pooled budget</td>
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<td></td>
<td>• Scope the impact of Section 117 on Delayed transfers of Care (DToc)</td>
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<td>Increase in the range of accommodation options available</td>
<td>• Review uptake of existing models</td>
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<td>• Develop clear Market position statement on accommodation needs</td>
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<td></td>
<td>• Use information gathered from Out of County deep dive review to inform accommodation gaps</td>
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<td></td>
<td>• Gather information from CYPS to identify future accommodation needs</td>
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| There are clear pathways and joined up services which support the transition from CYPS to adult services | • Links are made with the Transitions management group  
• CYPS commissioners are actively involved in the development of adults services across LD |
|---|---|
| A 24/7 Crisis responses pathway is designed and implemented. The pathway incorporates a range of services and support mechanisms | • A clear, needs led Market statement is available to all providers  
• Map of access to services across Health and Social Care as a result of a Crisis - including Short Breaks  
• Information on the use of the Outreach response service is collected and patterns of use identified  
• Integrated policy for the support of people with behaviours which may challenge services is in operation across health and social care |

### Quality Assurance and Compliance

Poor and non compliant services will not be tolerated in the absence of an alternative, we will work in partnership with people with learning disabilities and their families to develop person centred quality checking tools.

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| Quality assurance processes across health and social care services are inclusive of people with learning disabilities and their families | • Development of a User Quality checkers project  
• Partners sign up to the Driving Up quality code  
• Quality checkers group undertaking contract monitoring visits alongside LCC contract compliance officers  
• Providers of services for people with a learning disability are checked at least annually  
• Audit of compliance levels, including Safeguarding alerts, referrals and outcomes of LD provision - in Health and Social Care across Leicestershire |
| Develop a contract compliance process for contracts with CYP services | • A framework for compliance is developed using learning from compliance in adults services  
• Consultation with providers  
• Compliance timetable is produced |
| Service providers share best practice and are supported to explore innovative models of provision | • All providers are asked to give examples of good practice. Case studies are then developed from those examples and shared across the county  
• Recognition of providers achieving Dignity in |
### Keeping People Safe

People with learning disabilities and their families are safe from abuse - through commission or omission. There are robust, responsive systems in place which support information sharing (with due regard to data protection and information sharing protocols) in relation to concerns across health and social care. Learning from alerts and outcomes of investigations are used to inform monitoring and delivery of services.

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| Confidence that people are safe in all placements | • Interagency process developed which will enable an immediate review of any placements where concerns have been highlighted by CQC or other Government inspection agencies - including OFSTED  
• Audit of the process of notifications of Out of County Safeguarding alerts.  
• System in place which supports safeguarding of people in Leicestershire with providers for which there is no local authority contract  
• Holders of personal budgets have information about how and why contracts are monitored and information on providers is made available where appropriate  
• Information is collected on trends and patterns of safeguarding concerns and outcomes - by provider, service area and nature of concerns. Information is reviewed quarterly and a risk assessment completed  
• Use learning from Making Safeguarding Personal project |
| Safe places are appropriately used and people with learning disabilities feel more confident to access the community | • The Safe Places scheme is promoted to everyone with a learning disability, families and providers |
| People with learning disabilities and family carers are able to recognise abusive practice and feel empowered to report it | • Quality checkers will receive training and support to identify and report concerns in relation to abusive practice  
• Information about Safeguarding is available for people with learning disabilities and families |
The Right Workforce
There is a workforce across all sectors which supports people with learning disabilities and their families in a person centred way. Creative recruitment and development practices are used to create a values based workforce with families and people with learning disabilities being integral to its delivery

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| A learning and development programme is in place which promotes effective leadership and a values based approach to the delivery of service | • Review of the outcomes of all related LD training courses  
• Training needs audit across Learning Disability services  
• Adopted of the use of the Leadership Qualities Framework (National Skills for Care)  
• People with learning disabilities and family carers support the development and delivery of training to staff in learning disability services |
| Family carers and people who provide informal care (family friends, community members etc) feel supported in their role | • Informal and family carers have access to effective training in a variety of formats which support them in their caring role. |
| People with learning disabilities and family carers have an active role in the recruitment of the workforce across learning disability services in Health and Social Care | • Approach HR to explore the challenges and find effective solutions  
• Develop and person centred recruitment training - seek accreditation through Adult learning?  
• Promote the positive impact of involvement of users and families to recruiting managers |
| Staff across health and social care have a range of formal and informal support mechanisms which enable problem solving, innovation and sharing of best practice | • Learning Disability Practice Champions Network developed across Health and Social Care and is supported at a senior level  
• Practice managers promote reflective practice through supervision |