

Southend Health & Wellbeing Board

Agenda
Item No.

(Joint) Report of Simon Leftley, Director for People

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to

Health & Wellbeing Board

on

15th June 2016

Report prepared by: Glyn Jones, Learning Disabilities
Commissioning Manager, Integrated Commissioning Team,
Southend-on-Sea.

For information only		For discussion		Approval required	X
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Transforming Care

Part 1 (Public Agenda Item) / Part 2

1. Purpose of Report

- 1.1. To update the Health and Wellbeing Board on Transforming Care

2. Recommendations

- 2.1. To note and approve the Transforming Care Partnership (Previously Pan Essex) Action Plan and the continuing work of partners.

3. Background & Context

- 3.1. Transforming Care is a national programme to improve people's lives in the wake of the events at Winterbourne View where people with learning disabilities and autism were badly treated and bullied. This was shown in a BBC Panorama episode. Many of these people demonstrated challenging behavior. These events took place in 2011. Winterbourne view was an independent hospital in Gloucestershire and many people were placed there, far from their own home and community.
- 3.2. A national programme with the objective of helping people stay within their own communities and not be sent to hospitals inappropriately then began. However

things did not improve and people were still being placed in such institutions. This is largely because systems were complicated and partners found it difficult to work together. This has led to a renewed effort in a National Programme called Transforming Care.

- 3.3. As part of this renewed programme, NHS England has facilitated the setting up of 46 local area partnerships. One of these partnership areas comprises: Southend-on-Sea; Essex; and Thurrock. This is the Pan Essex Transforming Care Partnership Board.
- 3.4. The Pan Essex Transforming Care Partnership Board includes Southend-on-Sea Borough Council; Thurrock Borough Council, and the 7 CCGs across Pan Essex, including Southend CCG. Simon Leftley is the Chair of this Partnership Board and Melanie Craig is the deputy. The Partnership Board will have a line of sight of local activities and will seek to influence improved services and community response for people with Learning Disabilities and Autism.
- 3.5. A programme team and consultation structure has been set up under that Board which comprises commissioners, professionals and people with Learning Disabilities and autism from those geographical areas. The approach to the development of services is one of co-production.
- 3.6. The Partnership Board is charged with developing a 3 year plan which: Seeks to prevent behavior that challenges; helps people to stay in their local communities; and reduces the need for often inappropriate inpatient beds. It also has a programme to discharge people from secure hospitals where their needs can be better met more locally and in the community. (There is planned reduction of Inpatient Beds across Pan Essex from 73 to 46).
- 3.7. The plan should show a vision and set of actions to achieve these goals. Much improvement is to take place in local communities/areas with better commissioning and provision, and where it makes sense to do so partners should work together across Pan Essex to commission specialist services. Commissioning is fragmented with commissioning for secure accommodation also being undertaken at the regional tier being undertaken by NHS England.
- 3.8. The Pan Essex Partnership Board submitted a draft plan in April 2016. This was the only plan in the East of England to achieve a green rag rating. This showed that the partners in the Pan Essex area had a clear vision and were on track. A draft version of the Pan Essex plan has come to a previous Health and Wellbeing Board. The plan in the Annex is an updated version of this plan for its July submission to point the direction for the next 3 years.
- 3.9. The key points of the plan and where commissioning is being undertaken are:
 - The commissioning of enhanced local provision from local providers with better and more responsive crisis support that helps people to stay local and not demonstrate behavior that challenges. This includes more appropriate use of some inpatient services such as Assessment and Treatment Units.
 - Improved integration in local areas of health and social care services. Services to be more seamless.

- The commissioning of a service for people who have offended or are at risk of offending. A pilot service is being commissioned to provide a service across Pan Essex.
 - The commissioning of appropriate accommodation to meet people's needs
- 3.10. The Transforming Care Board is also seeking to influence Mental Health Commissioning and Provision on a Pan Essex and local basis to better meet the needs of people at risk of behavior that challenges. This about making sure that care is provided in a way that best suits individuals and for some people with Learning Disability and Autism this may well be in mainstream mental health services.
- 3.11. The scope of Transforming Care includes all people with Learning Disabilities and Autism and particularly those at risk of demonstrating behavior that challenges. Because this is about 'risk' and often in the community, the numbers are difficult to estimate. However, for Southend-on-Sea residents:
- There are less than 5 people who are being reviewed to find the most appropriate setting for them as part of 'Care and Treatment Reviews' (Discharge from hospital).
 - There are no people requiring Forensic/Offending services that require Ministry of Justice Supervision in the Community.
 - There are a few children in Tier 4 children and young people's secure facilities outside of Southend-on-Sea.

Across Health and Social Care within Southend-on-Sea we need a better understanding of individuals and a clear understanding of their needs for them to live as close to home as possible. This is about improving commissioning both within Southend-on-Sea and wider though joined up knowledge about people and services.

- 3.13 The next steps for the Pan Essex Programme Team include the:
- The development of specific pathways in designing the model
 - The procurement of services
 - The development of collaborative activity in relation to a number of areas, including training/workforce development and housing; improved discharge process both locally and pan Essex.
 - Discussions around the pooling of budgets and areas for further collaboration including where efficiencies can be made.
 - Better aligning approaches for Children and Young People which reduced later behavior that challenges. This includes the improved co-ordination of Transitions, as children and young people become adults.
 - Development of specific autism streams of work.

4. Health & Wellbeing Board Priorities / Added Value

How does this item contribute to delivering the;

Nine HWB Strategy Ambitions (listed on final page)

Transforming Care contributes to some of the Strategy Ambition. In particular it contributes to 3, 5, 6 and 9.

- 3: Improving mental wellbeing
 - 5: Living independently
 - 6: Active and healthy ageing
 - 9: Maximising opportunity
- Three HWB “Broad Impact Goals” which add value;
- a) Increased physical activity (prevention) *No direct impact.*
 - b) Increased aspiration & opportunity (addressing inequality). *Helping people to stay in their communities and playing a part in that community.*
 - c) Increased personal responsibility/participation (sustainability). *Enhancing opportunities for personal responsibility in the community balanced with effective support.*

5. Reasons for Recommendations

5.1. To approve the plan and the work of partners..

6. Financial / Resource Implications

6.1 Financial implications are being worked through in the context of a Finance work stream. Bids have been made as part of our submission/plan, including for Forensic/Offender service mentioned above. It is unlikely that all bids will be successful which will mean seeking efficiencies in service provision. More detailed work is being done on this by the Transforming Care Partnership Board in worksteams.

6.2 Across the whole Pan Essex system £101 million is spent per annum. Early analysis of cost pressures indicates that the short term cost pressure across Pan Essex is £9.2 million (Capital and Revenue) and for which bids have been made. Going forward beyond 18 months, there is an ongoing cost pressure of £3.5 Million per annum. (Reflecting the higher cost of packages in the community). This can be set against potential income from dowries (money following the patient from NHS England commissioned services), but which will not meet the full cost pressures.

7. Legal Implications

7.1. At present there are no specific legal implications.

8. Equality & Diversity

8.1. The developments promote equality and diversity. The intentions around Transforming Care are to develop appropriate person centred services and there are no discernible impacts on protected characteristics.

9. Appendices

9.1. The Pan Essex Transforming Care Plan is attached.

HWB Strategy Priorities

Broad Impact Goals – adding value

- a) Increased Physical Activity (prevention)
- b) Increased Aspiration and Opportunity (addressing inequality)
- c) Increased Personal Responsibility and Participation (sustainability)

<p>Ambition 1. A positive start in life</p> <ol style="list-style-type: none"> a) Reduce need for children to be in care b) Narrow the education achievement gap c) Improve education provision for 16-19s d) Better support more young carers e) Promote children’s mental wellbeing f) Reduce under-18 conception rates g) Support families with significant social challenges 	<p>Ambition 2. Promoting healthy lifestyles</p> <ol style="list-style-type: none"> a) Reduce the use of tobacco b) Encourage use of green spaces and seafront c) Promote healthy weight d) Prevention and support for substance & alcohol misuse 	<p>Ambition 3. Improving mental wellbeing</p> <ol style="list-style-type: none"> a) A holistic approach to mental and physical wellbeing b) Provide the right support and care at an early stage c) Reduce stigma of mental illness d) Work to prevent suicide and self-harm e) Support parents postnatal
<p>Ambition 4. A safer population</p> <ol style="list-style-type: none"> a) Safeguard children and vulnerable adults against neglect and abuse b) Support the Domestic Abuse Strategy Group in their work c) Work to prevent unintentional injuries among under 15s 	<p>Ambition 5. Living independently</p> <ol style="list-style-type: none"> a) Promote personalised budgets b) Enable supported community living c) People feel informed and empowered in their own care d) Reablement where possible e) People feel supported to live independently for longer 	<p>Ambition 6. Active and healthy ageing</p> <ol style="list-style-type: none"> a) Join up health & social care services b) Reduce isolation of older people c) Physical & mental wellbeing d) Support those with long term conditions e) Empower people to be more in control of their care
<p>Ambition 7. Protecting health</p> <ol style="list-style-type: none"> a) Increase access to health screening b) Increase offer of immunisations c) Infection control to remain a priority for all care providers d) Severe weather plans in place e) Improve food hygiene in the Borough 	<p>Ambition 8. Housing</p> <ol style="list-style-type: none"> a) Work together to; <ul style="list-style-type: none"> o Tackle homelessness o Deliver health, care & housing in a more joined up way b) Adequate affordable housing c) Adequate specialist housing d) Understand condition and distribution of private sector housing stock, to better focus resources 	<p>Ambition 9. Maximising opportunity</p> <ol style="list-style-type: none"> a) Have a joined up view of Southend’s health and care needs b) Work together to commission services more effectively c) Tackle health inequality (including improved access to services) d) Promote opportunities to thrive; Education, Employment