

## APPENDIX 4 - Derbyshire / Derby City Winterbourne View Action Plan – (Start date Feb 2013)

### RAG Status definitions used

STATUS	DEFINITION	ACTION
RED	The project/task/action requires remedial action to achieve objectives. The timeline/cost objectives are at risk	Raise to the JCB and complete an exception report to explain or gain approval for budget, time or scope changes
AMBER	The project /task action has commenced and action is being taken to resolve/ achieve outcome and is being carefully monitored The timeline/cost/objective may be at risk.	Raise awareness to the JCB. The project /task owner will decide of an exception report is necessary
GREEN	The project/task/action is on target to succeed	None.

Theme 1: Ensuring that NHS Hardwick CCG addresses the recommendations in the DH Winterbourne View Concordat.		
ACTION	OWNER	RAG rating
<p>1. For the Quality Committees of all four Derbyshire CCGs to receive an overarching action plan report in February summarising the DH Winterbourne View Review Final Report: <i>Transforming Care a National response to Winterbourne View</i> and the Winterbourne View action plan. The Winterbourne View action plan will be overseen by the Quality Committees and reported to Governing Bodies.</p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>All plans have now been developed and Strategic and Operational Transforming Care Steering groups are operational</li> <li>Project structure and detailed plans have been reviewed and are being implemented through the development of dedicated Workstreams</li> <li>Full reporting and Governance structures are now in place updated each month.</li> </ul>	DG	
<p>2. The LD JCB will receive reports on progress and will oversee the implementation of DH Winterbourne View action plan.</p>	DG	
<p>3. Governing Body of CCGs to ensure that systems and governance processes are in place to provide assurance against the action plan to ensure that they deliver high quality and appropriate care. Note- DH will explore with the National Skills Academy and the NHS Leadership Academy options to develop proposals on Board leadership development by March 2013</p>	AG	

**Theme 2: Review all current hospital placements and support everyone inappropriately placed in hospital to move to community based support as quickly as possible and no later than 1 June 2014.** (Although doing this can take time, the DH expects it to be carried out with pace and a sense of urgency – whilst always putting the interest of the individual first)

ACTION	OWNER	RAG rating
<p>1. To review care and agree personal care plans for all individuals whose care is funded by the NHS.</p> <p><b>Update 11<sup>th</sup> Dec 2013.</b></p> <ul style="list-style-type: none"> <li>• All individuals in receipt of joint reviews – case workers using a variety of person centred tools to assess and determine detailed support requirements, appropriate transition planning and moves or to evidence that individual are appropriately placed.</li> <li>• There is a workstream dedicated to the focus of quality assurance and monitoring where responsibility for operational drive and management of the identified cohort sits.</li> </ul>	DG	
<p>2. By 1 June 2013, health and social care commissioners, working with service providers, people who use services and families will review the care of all people in learning disability or autism inpatient hospital beds and agree a personal care plan for each individual based around their and their families' needs and agreed outcomes.</p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>• <b>Completed</b></li> </ul>	DG/JV/KE	
<p>3. Reviewing care of people with a LD who are funded by the NHS (CHC or inpatient treatment) will involve joint reviews with both LA's and identification of who will be the first point of contact for each individual. A joint project group will be set up to oversee the work programme required and report to the JCB.</p> <p><b>Update 11<sup>st</sup> Dec 2013.</b></p> <ul style="list-style-type: none"> <li>• Joint project group is set up and has a specified workstream dealing with the following actions:               <ol style="list-style-type: none"> <li>1. ensure that each individual has a fully worked up and agreed joint health and social care plan for return to local community area if appropriate including detail of how families and carers will be supported through changes</li> <li>2. ensure each plan for each individual has a named responsible first point of contact for all health and social care planning using agreed standardised documentation developed through workstream 2</li> <li>3. For case worker to develop a system of standardised reporting mechanism regarding use of restraint, medication and DoLs application across Derbyshire</li> <li>4. explore the use of personal budgets and personal health budgets during a review of funding</li> </ol> </li> </ul>	DG/JV/KE	

<p>arrangements across this client group</p> <p>5. create revised care pathway for Forensic, secure independent hospitals and locked rehab for people with a LD including funding arrangements through the TC steering group</p>		
<p>4. To commission appropriate accommodation and support for all individuals inappropriately placed in hospitals so that they receive personalised care and support in the appropriate community settings no later than 1 June 2014.</p> <p><b>Update 11<sup>st</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>• Strategy review of current accommodation availability and purpose has been completed in County; we are looking to work on the same development in Derby City.</li> <li>• We are working currently on a model that fits both City and County in terms of a community support package for contingency /crisis and on-goingsupport and intervention</li> </ul>	DG/JV/KE	
<p>1. To jointly review with the LA's advocacy services available to people with a LD.</p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>• Small sum of money has been identified to provide a review of current advocacy services in City and County with the intention of feeding this information into the workstream 1 profile in order to ascertain :- <ul style="list-style-type: none"> <li>a. The profile of the service provision i.e. where and who provides</li> <li>b. Make comparison to best practice advocacy</li> <li>c. Propose appropriate way to either improve what we have to meet the needs of best practice for the Derbyshire area</li> </ul> </li> </ul>	DG/KE/JV	
<p>2. To provide individuals with the offer of a Personal Budget or a PHB.</p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <p>There are plans in place and being implemented through the work of the Transforming Care Operational group that explores the use of Personal Budgets or personal health budgets during a review of funding arrangements across this client group</p>	DG/SC/JV /KE	

<b>Theme 3: Developing improved information systems</b>		
<b>ACTION</b>	<b>OWNER</b>	<b>RAG rating</b>
<ul style="list-style-type: none"> <li>• Hardwick CCG to have in place a database/ register that identifies all people with a learning disability funded by the NHS and in particular noting those with challenging behaviour, by 31<sup>st</sup> March 2013</li> </ul> <p><b>Update 11<sup>th</sup> Dec 2013</b></p>	GH/SC	

<ul style="list-style-type: none"> <li>Hardwick CCG currently has in place a database/register named Einstein that collates relevant patient details for those people who require placements in independent hospital beds in and out of area.- this will be reviewed for 'fit for purpose' of current Einstein database to provide management of this cohort of LD clients and prepare reports <ul style="list-style-type: none"> <li>following 'fit for purpose review' if required- create appropriate database or further develop the capacity of Einstein</li> </ul> </li> <li>Hardwick CCG developed a register of those people who NHD funded care through CHC, S117 and joint funded using the DH and then the enhanced East Midlands LD audit – this register is now maintained and updated by the GEMCSU CHC team.</li> </ul>		
<p>1. The LD database/register collection to be progressively improved and over time to incorporate the LD Data set requirements requested by the 2012 return to the SHA. The database/register will clearly set out which CCG and LA is responsible for individual reviews and case management responsibility.</p> <p><i>NOTE – Commissioners to make preparations for completion of an expected DH audit of current services funded fully or jointly by the NHS for people with challenging behaviour to include a snapshot of provision, numbers of out of area placements and lengths of stay. This audit is expected by March 2013</i></p> <p><i>It is expected that the audit will be repeated one year on to enable the learning disability programme board to assess progress. The DH will develop a new learning disability minimum data set to be collected through the Information Centre from 2014/15.</i></p> <ul style="list-style-type: none"> <li>As above - but note DH audit has not yet been requested</li> <li>CHC are currently updating the NHS funded register to review against the East Midlands survey completed in April 2013.</li> </ul>	JL/SC	
<p>2. Commissioners to agree with CHC team/GEMCSU how the LD Database/register will be regularly maintained and who will be responsible for this.</p> <p>Please see notes above</p>	JL/SC	

<b>Theme 4: Locally agreed plans to ensure high quality care and support services which accord with the model of good care, set out in Annex A of the DH Transforming Care report , by April 2014</b>		
ACTION	OWNER	RAG rating
<p>1. By April 2014 - to have agreed a joint strategic plan/pathways with both LA's to commission the range of local health, housing and support services to ensure high quality care and support for all children, young people and adults with a learning disability or autism and mental health conditions or behaviour described as</p>	DG/KE/JV	

<p>challenging.</p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>- Commissioning leads identified to collate findings from Workstream 1 (pathway development of good practice) and from deep dive case audit to develop joint plan for discussion at JCB in Feb 2014 – adult care boards and HWB by April 14.</li> </ul>		
<p>2. Commissioners to develop a revised model of specialist health care for people with a LD based on the new LD national specification and design local pathways and challenge poor practice in partnership with both LA's, people with a LD, families and other key stakeholders.</p> <p><i>NOTE - The NHSCB will also work with ADASS to develop by April 2013 practical resources for commissioners of services for people with learning disabilities, including: • model service specifications; • new NHS contract schedules for specialist learning disability services; • models for rewarding best practice through the NHS Commissioning for Quality and Innovation (CQUIN) framework; and • a joint health and social care self-assessment framework to support local agencies to measure and benchmark progress</i></p> <p><i>Note - By Summer 2015 NICE will publish quality standards and clinical guidelines on challenging behaviour and learning disability.</i></p> <p><i>By Summer 2016 NICE will publish quality standards and clinical guidelines on mental health and learning disability</i></p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>• following work completed by Workstreams specifically looking at the care pathway, accommodation, how the current identified cohort came to be placed, there will be a report prepared identifying what 'gold standard' looks like in Derbyshire County and City for specialist health care services. This will inform the transformational work taking place across the 2 NHS LD specialist providers and in commissioning for service redesign.</li> </ul>	DG/JL	
<p>3. Work in partnership with both LA's to establish provider frameworks that enable contracts with a range of suitably qualified local providers who have the right skills and the right ethos to provide care and support to people with complex individuals needs.</p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>• Following the identification of person centred solutions for housing and support there will be further work done to establish the right housing and support in the local areas by working with LA's to move towards the identified solutions. This is taking place through revised work of workstream 2</li> </ul>	DG/JV/KE	
<p>4. Contract monitoring approaches to be agreed and to compliment the developing role of quality checkers</p>	DG/JV/KE	

<p><b>Update 11<sup>th</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>Required contract process and approaches to personal budgets and self directed supports now addressed in workstream 2</li> <li>We are currently engaged with an exciting project supported by the NDTi on development of Quality Checkers through the Health and Social Care networks locally including Healthwatch and CQC</li> </ul>		
<p>5. LD Adult commissioners to work together with CYP commissioners to plan carefully and commission services for the care of young people as they approach adulthood to avoid crises; and commission flexible, community-based local supports.</p> <p><b>Update 11<sup>th</sup> Dec 2013</b>  Within the remit of a workstream dealing with the development of the pathway, (and in outcomes from the LD joint SAF) there is a specific action to review the current transition protocol and arrangements between CYP and Adult services and if necessary re-design to provide a protocol for implementation that address the issues across city and county and between services.</p>	JL/DJ/TW	
<p>6. Health and social care commissioners to investigate and explore the possibility of pooled budgets. The strong presumption will be in favour of pooled budget arrangements with local commissioners offering justification where this is not done. The NHSCB, ADASS and ADCS will promote and facilitate joint commissioning arrangements</p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <p>This issues is being discussed and address through:</p> <ul style="list-style-type: none"> <li>Joint CommissioningBoard discussion with regard to the lead commissioning</li> </ul>	DG/JV/KE	

<b>Theme 5: Quality monitoring, Assurance and Safeguarding</b>		
<b>ACTION</b>	<b>OWNER</b>	<b>RAG rating</b>
<p>1. For the local SOVA boards to have an agenda item to raise awareness of the DH Transforming Care action and for the SOVA Boards to determine what assurance of learning should be provided by board partners.</p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>Reports have been taken to local SOVA boards</li> <li>There is a specific workstream set up through the Transforming Care Steering Group that is dedicated to the review of current systems of quality monitoring and assurance as well as safeguarding and governance.</li> </ul>	BN/JC	

<p>This workstream will also have a remit to ensure that all work in other Workstreams account for the need to drive awareness and learning throughout their work.</p> <ul style="list-style-type: none"> <li>In particular there is a workstream dedicated to the development of provider relationships and workforce planning which will include training and development packages and awareness days etc.</li> </ul>		
<p>2. All individuals with a LD funded by Derbyshire CCGs in an independent hospital out of area will be provided with enhanced quality monitoring to reflect the nature of the distance from local quality monitoring and assurance processes. Each person will have an increase in the number of reviews per annum.</p> <p><b>In place</b></p>	JL/GH	
<p>3. To review the responsibility for implementation of the national out of area protocol</p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>This is being dealt with through the work of the Transforming Care Operational Group – as part of a workstream looking at the current pathway and pathway re-design.</li> <li>The implementation of the national OOA protocol is high on the task list of this workstream to ensure rapid implementation.</li> </ul>	DG/JC/SC	
<p>4. To confirm with all providers of NHS and Independent hospitals that they have effective monitoring arrangements in place for the use of physical restraint. Contracts team to maintain a record of what approaches to control and restraint are in use across all hospital providers and what training is in place.</p> <p><i>NOTE – To clarify if T – Supine is a method of Physical Intervention (PI) utilised.</i></p> <p><b>Update 11th Dec 2013</b> There is a specific task within the regional procurement of a new AQP for the Locked and unlocked rehab tender.</p>	DG	
<p>5. LD case manager to monitor use of PI and at review to record the use of any seclusion, PI and any DOLs applications for each individual.</p> <p><b>Update 11<sup>th</sup> Dec 2013</b></p> <ul style="list-style-type: none"> <li>For the identified patients who are in OOA placements in locked rehab, we have two dedicated workers from health and social care background who are working with a current number of 18 clients and each has had a joint assessment and is subject to ongoing care monitoring and development of care packages to return them locally in a supported way. In the course of this work the use of seclusion, PI and DoLs will be part of the review.</li> </ul>	GH	
<p>6. LD case manager will review and monitor the use of as required PRN medication as part of routine person centred review.</p> <ul style="list-style-type: none"> <li>As above</li> </ul>	GH	

7. Providers to be requested to provide evidence that pharmacy led medication reviews take place and to share with commissioners any outcomes and recommendations. • As above	GH	
8. To collate evidence in contract monitoring that the implementation of the MCA in relation to decision-making, capacity and restrictions is checked/audited and any improvement plans implemented. • As above	DG	
9. All providers to demonstrate evidence of whistleblowing policies and to provide assurance of practices and procedures in place. • As above	DG	
10. Ensure quarterly complaints reports presented to Quality Committees identify any emerging themes/trends in relation to the care of people with a LD and are subsequently reported to the CCG Governing Body	JC	
11. Ensure within the contract that complaints procedures used by providers of services to people with a LD are in accessible/ easy read formats.	DG/JL	

<b>Theme 6; Improving the Capability and Leadership of the workforce</b>		
<b>ACTION</b>	<b>OWNER</b>	<b>RAG rating</b>
1. To establish workforce and development plans in place to meet the required culture of approaches and expertise to deliver local support to people with a LD with complex needs. <b>Update 11<sup>th</sup> Dec 2013</b> There is a specific workstream to be set up through the Transforming Care project that is dedicated to the development of provider relationships and workforce planning which will include training and workforce development	JC/DG/JV/KE	
2. To audit the training requirements of providers procured through all framework agreements specifications are upheld.	DG/KE/JV	



Key to Owners – DG – Dave Gardner, AG – Andy Gregory, JC – Jim Connolly; JL – Jackie Lawley, GH – Georgina Horobin; SC – Sharon Cooper; KE – Kirsty Everson; JV – Julie Vollar;; DJ – Deborah Jenkinson, BN – Bill Nicol , TW – Trevor Wright