

**19<sup>th</sup> APRIL 2018**

**Ward(s)** All

**Portfolios:** Councillor I. Roberson - Health  
Councillor. D Coughlan – Social Care

**Transforming Care for adults with Learning Disabilities and/or Autism  
across the Black Country**

**Recommendations:**

**That, subject to any comments Members may wish to make, the report  
be noted.**

**Report**

1 Following the 'Winterbourne View' abuse scandal exposed by the Panorama programme in 2012, a national programme of improvements was instigated culminating in 2015 with NHS England publishing a national plan, 'Building the Right Support', to drive system wide change.

2 In April 2016 the Black Country CCG's and Local Authorities formed a partnership to Transform Care for people with learning disabilities and/or autism. A board was established to ensure the success of the programme which ends March 2019. This report provides an update on the progress to date and the issues for Walsall.

3 The key aim of the programme is to reduce the number of people with learning disabilities in hospital by March 2019. The trajectories set for the Black Country and Walsall were based upon people in hospital beds in 2016. In Walsall the target for adults in hospital beds for March 2019 is 10 and there are currently 13 adults within Inpatient beds, with Walsall expected to meet its target. For Children and Young People there are currently 8 people from the Black Country in Hospital beds of which 6 are from Walsall, and this has led to escalation and action plans to be agreed with NHSE. In Walsall the target for Children's inpatient beds is 2 and by March 2019 is 3. Two of these are looked after children and there are plans to step down these individuals to local provision by end of May 2018.

4 Alongside reducing the use of Hospital Beds, a new community model is being developed that focuses on the right support at the right time, in the right

place in order to maintain people's rights, respect and dignity. The intention is to reduce the number of inpatient assessment and treatment services from three to one based in Sandwell to cover the whole of the black Country.(See Fig 1 and Fig 2)

5 The inpatient service will be complimented by an Intensive Support Service and a Forensic service covering the whole of the Black Country.

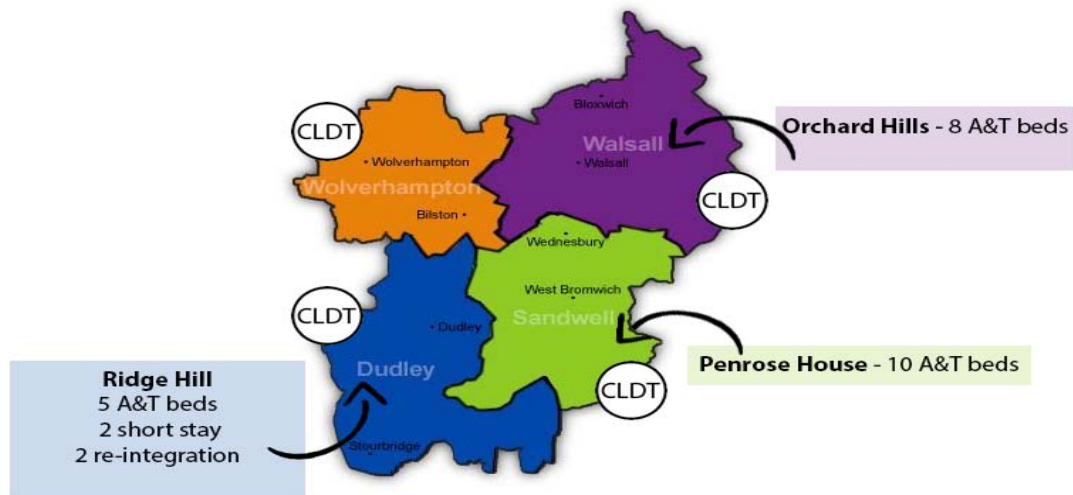


Fig 1. Existing services.



Fig 2. Services after implementing Transforming Care.

6 A community learning disability team (CLDT) will remain in each of the areas consisting of Community nurses, Psychiatrists, specialists and therapists working in partnership with social workers, GP's, Commissioners, families and individuals with learning disabilities. These services are part of a four tier clinical model. ( See Fig 3)

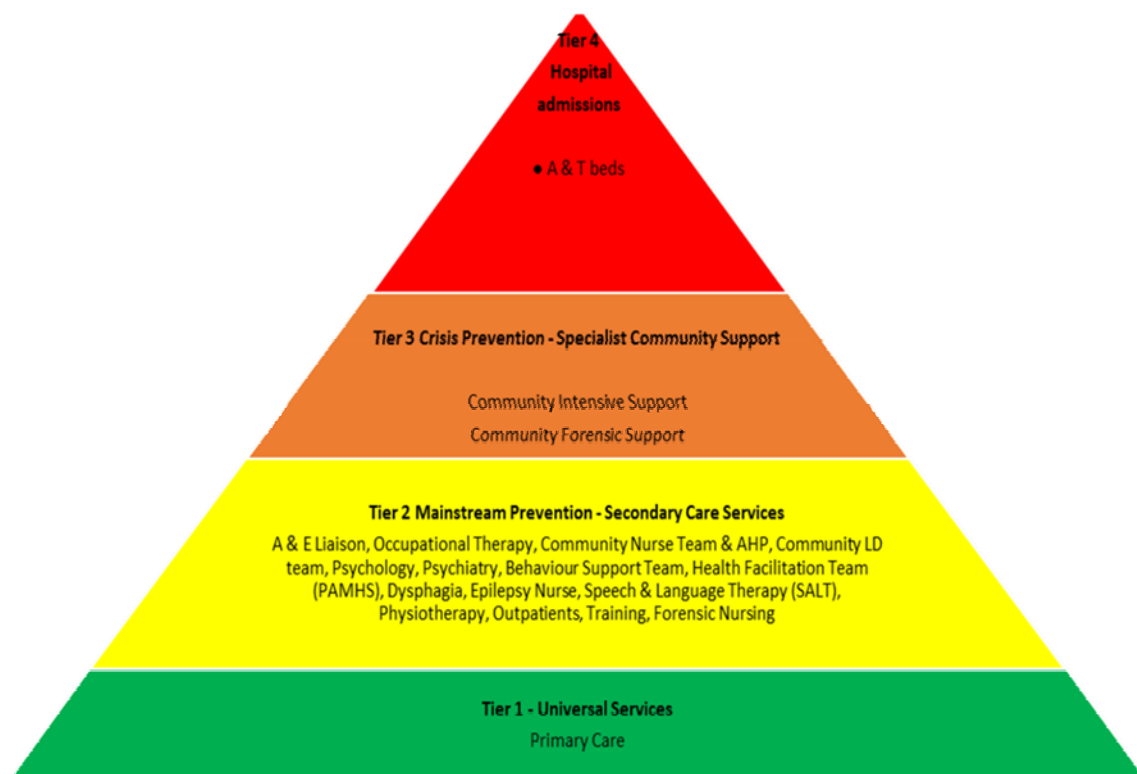


Fig 3. The Clinical Model

7 The governance through the Board is supported through seven operational sub groups with CCG lead officers from across the Black Country;

7.1 Engagement – The development of an engagement plan to consult with stakeholders across the Black Country .These plans are to be shared with Health and Well Being Boards (HWB) and are near completion. The CCG has requested a slot on the June 2018 HWB to present its plans.

7.2 Quality – The development of quality standards and assurance within services that are commissioned to meet the needs of those individuals

stepping down from inpatient Beds and those services that are commissioned to prevent individuals going into those beds. This work is ongoing and will be completed in 2018 to inform specifications for the Community Model and specialist providers taking individuals from inpatient beds.

7.3 Housing – The development of a Housing Plan to meet Housing Needs as an alternative to inpatient beds and for those Stepping down from beds. This work is ongoing. Walsall has a range of available housing and our main challenge will be working with the CCG to ensure we have good quality specialist providers.

7.4 Beds – the action plans to meet the Black Country trajectories to reduce current in patient bed numbers through appropriate clinical pathways. This is ongoing. The current position is set out in paragraph 3 of this report.

7.5 Community Model – The development of specifications with the Black Country Partnership Foundation Trust to deliver the clinical model set out in Fig 2 and Fig 3. This is ongoing and will be shared during engagement and consultation and implemented fully by March 2019.

7.6 Autism – A new group looking in particular at individuals on the autistic spectrum that do not have an LD but are in or access inpatient beds. This is on-going.

7.7 Finance – This group has representatives across the four local authorities and develops Financial Impact Statements based upon the bed trajectories and the Funding Transfer Arrangement (FTA) which is the National Health service Executive (NHSE) agreement on how the monies for the cost of care packages will pass through NHS Specialist Commissioning to CCG's and then onto local authorities. In the spirit of partnership the local authorities have developed a memorandum of understanding (MOU) which although not contractually binding is based upon the principle of monies passing through the system to prevent a cost shunt to local authorities.

## 8 Local authority issues

8.1 Finance Issues – The NHSE reviews the process and policy for the FTA and there are concerns that any changes could impact upon both the amount of funding transferred and the flow of funds through the process. Sarah Norman, Chief Executive for Dudley Council who chairs the Transforming Care Board has written to Ray James, National Director for Learning Disabilities, NHS England to seek clarification and assurance. We are awaiting a response.

<b>Revenue Impact on commissioners (post transfers) - Walsall £000's</b>					
	Baseline 2016/17	2017/18 spend	2018/19 spend	2019/20 spend	Revised Baseline 2019/20
CCG	3964	555	378	596	4560

Specialised Commissioning	1988	40	44	149	1839
Local Authority	NIL	82	437	472	472
Total Overall Impact	5952	597	859	919	6871

Fig 4. Walsall Financial Impact

8.2 Trajectories – The reduction in bed numbers was set in 2016 based on numbers in beds at that time and is not necessarily driven by what is right and safe for individuals. A request has been made on behalf of the Black Country to request that the trajectory is amended to reflect all the clinical reviews that evidence that individuals are receiving appropriate clinical treatment and cannot be accelerated safely from a bed to the community.

8.3 Local Authority Provision – Funding has been made available to fund one social work post in each area to support the Transforming Care work. In Walsall this has funded a social worker to manage forensic cases. Walsall has a Learning Disability social work team and is in the process of forming a Mental Health Social work team for adults that will include Autism without LD (High Functioning Autism). The teams will continue to work in partnership with the Community Mental Health and Community Learning Disability Teams in Walsall and link into the new Black Country Forensic and Intensive Support Teams.

8.4 Clinical Community Model – The Orchard Hills / Daisy Bank site has been the base for delivery of services in Walsall for well over 30 years. The LA supports the CLDT being based locally and while acknowledging the need to reduce In Patient beds the loss of a bed based service in Walsall and transfer to Sandwell will require sensitive engagement with local residents. Before the CCG ended joint commissioning arrangements in 2017 a number of valued and innovative services were developed in Walsall. Acute Liaison nurses with the Manor Hospital to improve access and quality for people with an LD accessing acute and secondary health care, a specialist LD Dementia Nurse, A Transition Nurse working with young people transitioning into adult care, A named LD Nurse for every GP surgery and Health Facilitation and Promotion to improve health care for Walsall citizens with an LD. The LA has requested that these services are not lost in diverted budgets / resources to the new Community Model.


8.5 Joint Funding / Partnership – Walsall LA is working with the CCG to develop joint funding agreements in addition to any FTA agreements for individuals still in hospital to ensure fair and appropriate shared funding for complex care packages in the community with eligible health and social care needs. The LA also welcomes the opening up of commissioning of services across a range of providers and not just with the Health trust to reduce costs

and enable a range of providers to access the market as existed with the joint commissioning arrangements.

8.6 Children's referral pattern – It appears that Walsall CAMHS referrals to inpatient beds is proportionately higher than the rest of the Black Country.

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