

Thursday 11th July 2013	ITEM: 11
Thurrock Health and Well-Being Board	
TRANSFORMING CARE A NATIONAL RESPONSE TO WINTERBOURNE VIEW HOSPITAL THURROCK IMPLEMENTATION PROGRESS REPORT	
Report of: Catherine Wilson Service Manager Commissioning and Service Development Jane Foster-Taylor Executive Nurse	
Accountable Director: Roger Harris Director Adults Health and Commissioning	
This report is Public	
Purpose of Report: The purpose of this report is to ask the Health and Well Being Board approve the attached Winterbourne Stocktake requested by the National Winterbourne Programme Board	

EXECUTIVE SUMMARY

The attached Winterbourne Stocktake has been requested by the National Winterbourne Programme Board to provide a consistent national view of progress with the recommendations of the Department of Health Report: Transforming Care: A National Response to Winterbourne View Hospital, (2012). The Programme Board has asked that each Health and Well Being Board and CCG is aware of and agrees the contents of the stocktake document.

The stocktake for Thurrock is a very positive one; it clearly confirms the robust joint working relationships between Thurrock Council and Thurrock CCG around Winterbourne and the partnership approach across South Essex. It shows that Thurrock is on target with the implementation of the Winterbourne recommendations concerning the reviews and care planning for the people who are the responsibility of Thurrock.

The key areas that the Health and Well Being Board should be aware of are those concerning funding. The engagement with the East of England SCG to achieve effective joint commissioning has proved problematic, only one meeting with the CSU has taken place and the reviews of the 5 Thurrock service users only provide the outcome; whether the person should remain in a long stay unit, rather than providing the information as to how and why that

decision was reached. Thurrock Council and the other partners are concerned at the difficulty of having an ongoing, fruitful partnership with the SCG.

A major concern for Thurrock Council and Thurrock CCG is the current position that SCG funding will not follow the person. This does not meet commitments made in the Transforming Care document regarding local authorities not being disadvantaged by people's transfer of care. The current arrangement can only increase budget pressures on Local Authorities. The failure to transfer funding also disconnects the decommissioning of current SCG placements from the need for reinvestment in local services to replace them. This potentially will cause real tensions in the partnership and, of course, put significant obstacles in the way of offering different placements and lives for people in SCG funded placements. There is a lack of confidence therefore that the SCG funded service users will be resettled within the timeframes because it has not been agreed that funding will go with the person when they move. There is only one Thurrock person currently funded by the SCG.

Currently there are no arrangements in place to share financial risk. Joint funding arrangements are being actively considered and discussed and proposals and options for joint funding across South Essex and between Local Authorities and CCG's are being developed.

There is however significant positive achievement reported in the stocktake. For those people who are in-patients in Thurrock CCG commissioned services (i.e. not SCG funded), the potential costs have been identified where resettlement plans have been developed. The progress of the resettlement plans will be monitored closely.

A budget strategy is starting to be outlined to enable the transfer of funding for community based services to be achieved. This will require some significant work across the Local Authority and CCG partners to achieve the decommissioning and recommissioning of services that is required.

Thurrock Council and Thurrock CCG are confident that the 2 Thurrock people funded by CCG commissioners who have been in-patients for over a year will be discharged by 1 June 2014. Monitoring of other in-patients is ensuring that discharge is within 6 months for a further 6 people.

1. RECOMMENDATIONS:

1.1 That the Health and Well Being Board approve the Winterbourne stocktake.

2. INTRODUCTION AND BACKGROUND:

- 2.1 The previous reports to the Health and Well Being Board submitted on xxxxx and xxxx give the detailed back ground information with regarding to the work that is required to implement the recommendation of the national report.

The attached stocktake covers 11 key areas:

1. Models of Partnership
2. Understanding the money
3. Case management for individuals
4. Current review programme
5. Safeguarding
6. Commissioning arrangements
7. Developing local teams and services
8. Prevention and crisis response capacity - Local/shared capacity to manage emergencies
9. Understanding the population who need/receive services
10. Children and Adults transition planning
11. Current and future market requirements and capacity

It can be noted that the stocktake addresses each area very positively with progress being made or plans in place to move the area forward. The information highlights meaningful joint working between the CCG and Thurrock Council.

3. ISSUES, OPTIONS AND ANALYSIS OF OPTIONS:

- 3.1 N/A

4. REASONS FOR RECOMMENDATION:

- 4.1 This is part of a national audit and the information provided is important so national progress can be monitored to ensure the delivery of the Winterbourne agenda.

5. CONSULTATION (including Overview and Scrutiny, if applicable)

- 5.1 N/A

6. IMPACT ON CORPORATE POLICIES, PRIORITIES, PERFORMANCE AND COMMUNITY IMPACT

It is a national requirement to deliver the Winterbourne agenda and the overarching principle of Winterbourne that people must receive the right care in the right place and only go to hospital if it is genuinely the most appropriate option underpin social care and health delivery in Thurrock .

7. IMPLICATIONS

7.1 Financial

Implications verified by: **Mike Jones**
 Telephone and email: **01375 652772**
mxjones@thurrock.gov.uk

Currently there are no arrangements in place to share financial risk. Joint funding arrangements are being actively considered and discussed and proposals and options for joint funding across South Essex and between Local Authorities and CCG's are being developed

7.2 Legal

Implications verified by: **Lucinda Bell**
 Telephone and email: **07971 316599**
Lucinda.bell@bdtlegal.org.uk

The Board is asked to approve the stock take. The Board will be aware of its duty to encourage integrated working. This includes:

a duty to encourage those arranging for the provision of health or social care services in their area to work in an integrated manner; and

a duty in particular to provide advice, assistance, and so on, to encourage the making of arrangements under section 75 of the NHA 2006.

([Section 195\(1\) and \(2\)](#), Health and Social Care Act 2012.)

7.3 Diversity and Equality

Implications verified by: **Roger Harris**
 Telephone and email: **01375 652011**
rharris@thurrock.gov.uk

The approach to the delivery of the recommendations of the Winterbourne View Report, here in Thurrock, ensures that holistic person centred reviews and care plans are being undertaken, ensuring that all aspects of the diversity agenda are delivered. The wider Winterbourne work will also be delivered ensuring that learning disabled people continue to be supported with dignity and respect recognising their diversity needs.

7.4 Other implications (where significant) – i.e. Section 17, Risk Assessment, Health Impact Assessment, Sustainability, IT, Environmental

None

BACKGROUND PAPERS USED IN PREPARING THIS REPORT (include their location and identify whether any are exempt or protected by copyright):

- Department of Health Report Transforming Care: A National Response to Winterbourne View Hospital, (2012).

APPENDICES TO THIS REPORT:

- Thurrock Winterbourne Stocktake

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