

ADULT SERVICES COMMITTEE AGENDA



Monday 17 August 2015

at 10.00 am

in Committee Room B, Civic Centre, Hartlepool

MEMBERS: ADULT SERVICES COMMITTEE

Councillors Atkinson, Beck, Belcher, Loynes, Richardson, Tempest and Thomas

1. APOLOGIES FOR ABSENCE

2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS

3. MINUTES

- 3.1 To receive the Minutes and Decision Record in respect of the meeting held on 6 July 2015 (*for information as previously circulated*).

4. BUDGET AND POLICY FRAMEWORK ITEMS

No items

5. KEY DECISIONS

No items

6. OTHER ITEMS REQUIRING DECISION

No items



7. ITEMS FOR INFORMATION

- 7.1 Centre for Independent Living Development – *Director of Child and Adult Services*
- 7.2 Hartlepool Local Executive Group – 2014/15 Performance Report – *Director of Child and Adult Services*
- 7.3 Learning Disability Update – Tees Integrated Commissioning Group (TIC) – *Director of Child and Adult Services*

8. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT

FOR INFORMATION: -

Date of next meeting – Monday 14 September 2015 at 10.00 am in Committee Room B, Civic Centre



ADULT SERVICES COMMITTEE

17 AUGUST 2015



Report of: Director of Child & Adult Services

Subject: CENTRE FOR INDEPENDENT LIVING
DEVELOPMENT

1. TYPE OF DECISION/APPLICABLE CATEGORY

1.1 No decision required; for information.

2. PURPOSE OF REPORT

2.1 To provide the Adult Services Committee with an update regarding the development of a new Centre for Independent Living.

3. BACKGROUND

3.1 A report to Adult Services Committee on 17 June 2013 and subsequent reports to Finance and Policy Committee on 28 June 2013 and 19 September 2013 provided detail on the plans to develop a new Centre for Independent Living.

3.2 The new building will replace the existing day service buildings at Havelock Street and Warren Road, and improve service provision and outcomes for adults with learning and / or physical disabilities. The new building will provide support to approximately 120 people, many with multiple and complex disabilities and will include:

- Hydrotherapy and Rebound Therapy
- Autism accredited sensory support and relaxation suite
- Art studio
- Condition Management Programmes for long term conditions
- Training Kitchen (independent living suite)
- Bistro and catering facilities
- Wheelchair accessible sensory garden
- Accommodation for a team of 43 health and social care staff, including social workers, community nurses and allied health professionals.

- 3.3 The project is an exciting development for the Council and will bring together a range of services that support adults with disabilities on a single site. The new building will enable services to better support the aspirations of people who access the Centre for Independent Living. There will be a focus on supporting people to be as independent as they are able to be, promoting health and wellbeing and supporting people with disabilities to access training, employment and other opportunities to play an active part in the local community. The new Centre for Independent Living will also have a range of facilities that can be accessed by the local community and it is intended that these will be accessible on evenings and weekends.

4. PROJECT UPDATE

- 4.1 Following a tender process, the contract to project manage and construct the new Centre for Independent Living has been awarded to Hartlepool Borough Council's in-house Building Design and Construction Section with elements of the build sub contracted to other local contractors.
- 4.2 Work on site commenced in July 2015. The new building will be completed in August 2016 and operational in September 2016.
- 4.3 A Project Management Board has been established to oversee the development. The Board meets monthly and is chaired by the Director of Regeneration and Neighbourhoods, with the Director of Child & Adults attending as the client.
- 4.4 The Project Management Board is supported by a Project Delivery Group which brings together range of key officers to manage the operational delivery of the build within timescale and budget.
- 4.5 It has been identified that it is important to ensure that people who use the current services and their families / carers, local residents, business and the community in general understand both the nature of the development and the phases of construction. To facilitate this, a series of engagement events with key stakeholders will continue throughout the construction stage. This will enable any concerns to be addressed quickly and ensure that interested parties are kept informed of progress.

5. RECOMMENDATIONS

- 5.1 That the Adult Services Committee notes progress with the development of the new Centre for Independent Living.

6. REASONS FOR RECOMMENDATIONS

- 6.1 Development of the new Centre for Independent Living will improve service provision and outcomes for adults with learning and / or physical disabilities and the Adult Services Committee requested progress updates as the project moved forward.

7. BACKGROUND PAPERS

- 7.1 Report to Adult Services Committee 17 June 2013
- 7.2 Report to Finance and Policy Committee 28 June 2103
- 7.3 Report to Planning Committee on 25 September 2013
- 7.4 Report to Finance and Policy Committee 19 September 2013

8. CONTACT OFFICER

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ADULT SERVICES COMMITTEE

17 August 2015



Report of: Director of Child and Adult Services

Subject: HARTLEPOOL LOCAL EXECUTIVE GROUP –
2014/15 PERFORMANCE REPORT

1. TYPE OF DECISION/APPLICABLE CATEGORY

No decision required, for information.

2. PURPOSE OF REPORT

2.1 The purpose of this report is to present the Hartlepool Local Executive Group (LEG) year end performance report for 2014/15 and to share a summary of the progress made with the implementation of the Tees-wide Safeguarding Adults Board (TSAB) strategic aims and objectives for the same period.

3. BACKGROUND

3.1 The current guidance that underpins adult protection arrangements is called No Secrets and within this guidance it is recognised that protecting vulnerable adults from the various forms of abuse (physical, sexual, psychological or financial) or material neglect, discrimination and institutional harm is 'Everybody's Business'.

3.2 The lead agency for the co-ordination of the arrangements regarding protecting vulnerable adults from abuse is the Local Authority and, where necessary, this includes coordinating the actions of other key local agencies including the NHS, the police, housing providers and the voluntary sector.

3.3 From April 2015 there are significant changes enshrined in the Care Act 2014 which will affect the protection of vulnerable adults and, like other Local Authorities, Hartlepool is assessing readiness for the implementation of the Care Act.

3.4 One of the key changes is that there will be a statutory requirement to have a Safeguarding Adults Board and in preparation for this it has already been agreed that this statutory function will be achieved by delegating this

accountability to the TSAB which involves representatives from Stockton, Middlesbrough, Redcar & Cleveland and Hartlepool Councils, as well as strategic partners, notably from the police and NHS organisations.

- 3.5 To support the work of the TSAB, Hartlepool, like the other Local Authorities, has established a Local Executive Group (LEG), which has responsibility for co-ordinating and providing effective inter-agency working to safeguard local people whose circumstances make them vulnerable, and who may be at risk of abuse and neglect. The LEG supports the strategic aims and objectives of the TSAB by providing operational leadership at a local level and by embedding the Tees-wide Policy, Procedures and Practice Guidance in front line practice.
- 3.6 Inextricably linked to safeguarding and protecting adults from abuse or significant harm are Deprivation of Liberty Safeguards (DoLS). These safeguards have been in place since April 2009 under the auspices of the Mental Capacity Act 2005 and the Local Authority is the lead agency and Supervisory Body for ensuring that people who, for their own safety and in their own best interests, need to be accommodated under care and treatment regimes that may have the effect of depriving them of their liberty, but who lack capacity to consent, are only 'deprived' following due process.
- 3.7 A Supreme Court judgement in March 2014 had a major impact on the way Deprivation of Liberty Safeguards (DOLS) were interpreted and applied, as has been reported to the Committee previously.

4. YEAR END PERFORMANCE

- 4.1 The Year End Performance Report is attached at **Appendix 1**. The new reporting format has been developed by the TSAB Business Unit and includes information on safeguarding activity, categories of abuse and outcomes as well as DoLS activity and local developments / issues.
- 4.2 The report identifies that there has been a significant increase in safeguarding alerts identifying possible cases of abuse of adults but a reduction in the number of alerts that then led to further investigation and action under safeguarding adult procedures. It is important to highlight that although 302 alerts required no specific further action in terms of safeguarding procedures, these alerts were genuine concerns reported to the Department and each alert was examined and appropriately risk managed. These alerts were then managed through interventions by social work and care management teams or the Commissioned Services Team; dealt with as complaints or managed by providing more detailed information, advice or guidance at the contact point, usually in relation to sign-posting people to relevant health professionals. The increased number of alerts is positive as it reflects that people are more aware of potential abuse of vulnerable adults and better informed about how to raise concerns. It also means that lower level concerns that do not meet the threshold for a

safeguarding investigation, are brought to the Council's attention and appropriately addressed before potentially escalating further.

- 4.3 The report also highlights the impact of the changes in relation to DoLS, with referrals increasing from 38 in 2013/14 to 648 in 2014/15 (an increase of 1605%). As reported previously, this has created a significant pressure for Adult Services in relation to staffing, with a new team created to manage the additional work, and budgets, as the costs for legal advice, additional applications to the Court of Protection and access to Section 12 Mental Health Assessments are all borne by the Local Authority. The same issues are being experienced by all Local Authorities in relation to DoLS, as the increased activity is due to a change in legislation. In the north east region, nine of the twelve Councils have experienced increases in activity of over 1000% with one authority managing an increase of over 3300%.

5. DEVELOPMENTS IN 2014/ 15

- 5.1 There were a number of significant developments in relation to adult safeguarding in 2014/15:
- 5.1.1 The TSAB was formally established as the statutory safeguarding board for the four Tees local Authorities with an Independent Chair appointed and a new Business Unit established to support safeguarding work across Tees. Local Authorities are represented on the TSAB by their Director with responsibility for Adult Services and their lead member for Adult Services.
- 5.1.2 The TSAB established the following sub-groups to take specific projects forward:
- Learning, Training and Development;
 - Policy, Procedures and Practice;
 - Performance, Audit & Quality;
 - Communication & Engagement; and
 - Case Review.
- 5.1.3 Local Executive Groups have been established in each Local Authority area chaired by Assistant Directors.
- 5.1.4 A Designated Safeguarding Manager has been identified, in line with the requirements of the Care Act.
- 5.1.5 An induction programme for new TSAB members has been developed.
- 5.1.6 A TSAB Development Day was held in June 2015 and work is underway to finalise the TSAB Annual report for 2014/15 and the Board's Strategic Plan for 2015/16.
- 5.1.7 A Serious Case Review was instigated in Hartlepool prior to the introduction of the LEG, following the tragic death of a vulnerable person as a result of an arson attack on a property. An independent investigation was completed

and an executive summary report and action plan have been approved by TSAB and published.

- 5.1.8 A second Serious Case Review instigated in Hartlepool prior to the introduction of the LEG, but delayed due to legal proceedings, is currently underway in relation to the death of a vulnerable older person who died after falling from a window in a care home. An independent investigation is underway and an executive summary and action plan will be presented to TSAB for approval later this year.
- 5.1.9 In line with the new requirements of the Care Act, the TSAB has instigated a Safeguarding Adult Review in relation to the murder of a vulnerable female in Hartlepool in December 2014. The review has not commenced due to ongoing legal proceedings, which have recently been delayed, but will be reported and published in due course.
- 5.1.10 In response to the Association of Directors of Adult Social Services (ADASS) and the Local Government Association (LGA) initiative Making Safeguarding Personal, Adult Services implemented a pilot scheme to assess and evaluate the experience and outcomes of people who use safeguarding services. The pilot scheme focused on people living in residential and nursing care due to the high proportion of reported safeguarding incidents from these settings, and the potential learning that could be gleaned from this initiative. An independent evaluation has been commissioned to inform strategic decision making going forward and the outcome of this evaluation will be reported to the LEG and subsequently the Adult Services Committee later this year.
- 5.1.11 As a result of a project undertaken by Healthwatch Hartlepool which investigated the effectiveness of hospital discharge arrangements, an improvement action plan has been developed in response to the recommendations made. Adult Services are working with North Tees and Hartlepool NHS Foundation Trust and Healthwatch Hartlepool to monitor and evaluate the concerns raised as part of the safeguarding preventative agenda so lessons can be learnt and hospital discharge practice can be improved, thereby preventing significant harm occurring to vulnerable people. The LEG will receive regular updates regarding progress with this issue.

6. RECOMMENDATIONS

- 6.1 It is recommended that the Adult Services Committee:
- note the contents of this report;
 - note the ongoing impact of the Supreme Court judgement in relation to Deprivation of Liberty Safeguards; and
 - receive a further report regarding the Tees-wide Safeguarding Board Annual Report and Strategic Plan when the documents are finalised.

7. REASONS FOR RECOMMENDATIONS

- 7.1 The Local Authority has the lead responsibility for the co-ordination of adult safeguarding arrangements and the implementation of Deprivation of Liberty Safeguards.

8. CONTACT OFFICER

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Hartlepool Local Executive Group - Year End Performance Report 2014/15

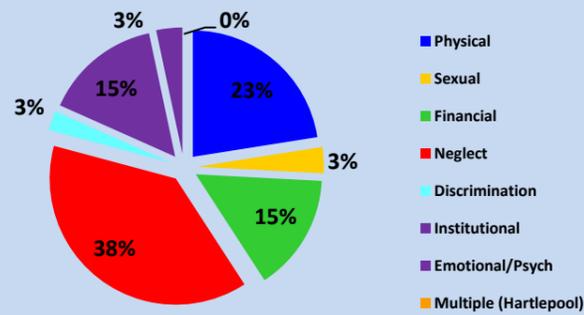
Demographics

Ethnicity - Less than 1% of referrals (and alerts) were from people other than White British, which is in line with Hartlepool's population.

Age - 69% of alerts related to people aged over 65, while 60% of referrals relate to this age group.

Gender - in 2014/15, 59% of referrals related to females, which has reduced from 64% in 2013/14.

Category of Abuse



Neglect is the biggest category of abuse (38% in 2014/15 although reduced from 59% in 2013/14), while physical abuse accounts for 23% (up from 14% in 2013/14). Financial abuse accounts for 15% of activity, which is similar to the previous year.

Outcomes 2014/15

Outcomes for Vulnerable Adult

Increased monitoring occurs in 24% of cases, while there is no further action taken in 44% of cases in 2014/15.

Outcomes of Episodes

In 2014/15, 43% of cases were either substantiated or partly substantiated, which is slightly down from the previous year of 48%.

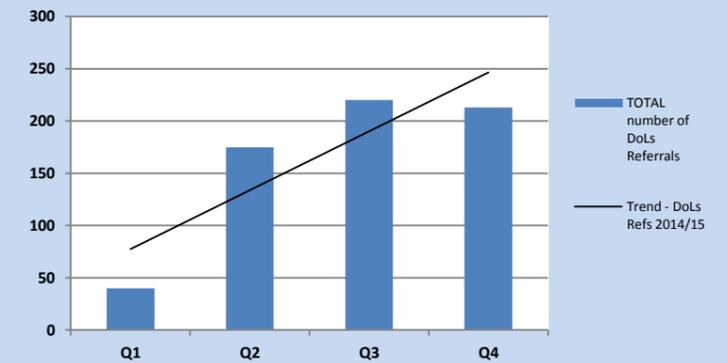
End of Year Summary 2014/15

This report provides an overview on the Safeguarding Adults activity in Hartlepool during the reporting year of 2014/15. Key areas during this year include:

(1) One Serious Case Review (now Safeguarding Adult Review since the implementation of the Care Act 2014) was commissioned and completed by an Independent Investigating Officer. Recommendations were made and an action plan developed with the implementation of the action plan being overseen by the Hartlepool Local Executive Group and the Teeswide Safeguarding Adults Board. Representatives of the Hartlepool Local Executive Group have also been involved in a Domestic Homicide Review which was commissioned by the Safer Hartlepool Partnership as a result of a female residing in Hartlepool being murdered by her partner. Recommendations were made and an action plan developed with the implementation being overseen by the Safer Hartlepool Partnership.

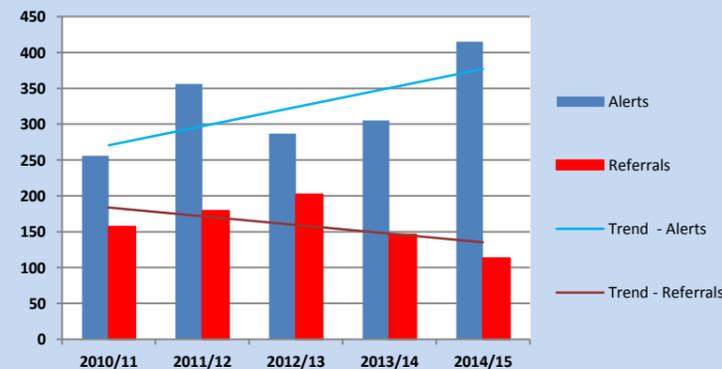
(2) In response to the ADASS and LGA sponsored Making Safeguarding Personal initiative Hartlepool Borough Council implemented a pilot within the Safeguarding, Quality & Review Team to assess and evaluate the experience and outcomes of people who use safeguarding support services. This was initially focused on people living in residential and nursing care due to the high proportion of safeguarding referrals from these settings, and the potential learning that could improve outcomes for this vulnerable group. An independent evaluation of this project has been commissioned to inform strategic decision making going forward and the outcome of this evaluation will be reported to the Local Executive Group in July 2015.

DoLS 2014/15



The number of DoLS referrals has increased massively (in line with other councils across the country, following the Supreme Court Judgement). There were 38 referrals in 2013/14, which has risen to 648 in 2014/15, an increase of 1605%.

Number of Alerts / Referrals 2014/15



In 2014/15, alerts increased by 36% (from 305 to 415), while referrals decreased by 23% (from 146 to 113).

The number of Repeat Referrals in 2014/15 was 17, which is 14% of all referrals received during the year - this is less than in 2013/14 (17%).

Local Perspective & Operational Views

(1) In response to serious concerns raised regarding the service delivery to vulnerable people in a nursing home, the Teeswide Safeguarding Adults Board's Serious Concerns Protocol was implemented. A series of visits and meetings over a three month period were undertaken by representatives of the Care Quality Commission; Clinical Commissioning Group; North Tees & Hartlepool NHS Foundation Trust; Tees, Esk and Wear Valleys NHS Foundation Trust and Hartlepool Borough Council to identify and mitigate risks associated with the concerns raised. Following extensive work the provider decided they could no longer operate and strategic partners worked together to transfer the residents to alternative provision.

(2) In 2014/15 safeguarding training was provided to a range of staff:

- Care Act Advanced Safeguarding Seminar - 14 attendees
- Court of Protection/DoLS update - 15 attendees
- Safeguarding and Domestic Abuse - 1 attendee
- Safeguarding Adults and the Law - 3 attendees

(3) In relation to the location of reported allegations of abuse, the most common location was care homes, with 54% of the overall activity being focused in this area. In comparison to the previous financial year this is an increase from 53%. Historically, reported allegations of abuse have always been higher in this sector than elsewhere which is why the Making Safeguarding Personal initiative focused on engaging with the victims of reported abuse or their advocates in registered facilities so that the Council could listen to people's views; learn lessons; reduce risks and improve standards.

Any further key issues to highlight

(1) Due to the implications of the Care Act 2014, HBC have commenced the process of reviewing a number of the Department's procedures and practice guidance to ensure they are Care Act compliant including the information relating to:

- Local Authority Designated Officer (LADO) Policy and Procedure
- Running and Missing Procedures
- Multi-Agency Risk Assessment Conference (MARAC) Arrangements
- Multi-Agency Public Protection Arrangements (MAPPA)
- Hate Crime and Mate Crime Procedures
- Vulnerable Victims Procedures

(2) Following a project undertaken by Healthwatch Hartlepool which looked into the effectiveness of hospital discharge arrangements, an action plan was developed in relation to the recommendations which were made. Hartlepool Borough Council (HBC) are working with North Tees and Hartlepool NHS Foundation Trust and Healthwatch Hartlepool to monitor and evaluate the concerns raised as part of the safeguarding preventative agenda in order to learn lessons and improve hospital discharge practice and thereby preventing significant harm occurring.

ADULT SERVICES COMMITTEE

17 August 2015



Report of: Director of Child & Adult Services

Subject: LEARNING DISABILITY UPDATE - TEES
INTEGRATED COMMISSIONING GROUP (TIC)

1. TYPE OF DECISION/APPLICABLE CATEGORY

No decision required; for information.

2. PURPOSE OF REPORT

2.1 To provide the Adult Services Committee with an update on progress in relation to the Tees Integrated Commissioning Group action plan for adults with learning disabilities and a number of key areas affecting this agenda.

3. BACKGROUND

3.1 The Tees Integrated Commissioning Group (TIC) consists of the four Local Authorities (Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton) and the North of England Commissioning Support Unit (NECS), representing both Hartlepool & Stockton on Tees Clinical Commissioning Group and South Tees Clinical Commissioning Group (CCG).

3.2 The group was established in 2006 to ensure consistency of approach across Tees in respect of commissioning arrangements for adults with a learning disability. Over time the remit of the group has expanded to include autism, and more recently mental health.

3.3 The group is well established and has been instrumental in supporting and developing a number of Tees Framework agreements, including:

- Tees Advocacy Hub
- Tees Forensic Workstream
- Tees Autism Framework and Strategy

4. TEES INTEGRATED COMMISSIONING GROUP – ACTION PLAN

- 4.1 The terms of reference for the group were reviewed and revised in 2014 and will be reviewed again to include reference to mental health.
- 4.2 The TIC action plan for 2015/16 is attached as **Appendix 1**.

5. PROGRESS ON PREVIOUS ACTIONS

- 5.1 The driving force influencing the TIC action plan has been the national Transforming Care agenda, previously referred to as the Winterbourne View Concordat. The resulting focus was in establishing an agreed joint plan across health and social care to ensure people with a learning disability were appropriately placed in accommodation that met their needs. Subsequently this work expanded to include people who were receiving assessment or treatment within a 'NHS specialised commissioned forensic service'.
- 5.2 Following the publication of the Winterbourne View Concordat (December 2012) which identified the poor standards of care and support experienced by adults with a learning disability, the chair of the Joint Improvement Board (NHS England & Local Government Association) asked for assurance of collaboration between health and local authorities.
- 5.3 The report found widespread poor service design, failure of commissioning, failure to transform services in line with established good practice and failure to develop local services and expertise to provide a person centred and multidisciplinary approach to care and support.
- 5.4 The main actions identified for TIC commissioners through the review and concordat were to:-
- Complete and maintain a register
 - Identify people placed in inpatient services
 - Ensure people receive an appropriate review of their care
 - Identify those who are placed 'inappropriately'
 - Agree a plan to move on with all parties
 - Develop commissioning plans
- 5.5 A joint report was presented to Hartlepool Adult Services Committee in July 2013 to providing a stock-take of the position and advise that a joint plan was being developed which included a review of existing inpatient assessment and treatment bed requirements for the future.
- 5.6 It is important to note that this work will be on-going as there remains a flow of people that will make the transition through to adult services with the same level of complexity and associated specialist requirements, whose needs will require careful planning and commissioning.

- 5.7 In 2013/14 a review of bed occupancy was completed by NECS and significant reinvestment, in line with a reduction in inpatient beds, was recommended.
- 5.8 The review has resulted in an increased response from specialist community teams to support local learning disability services with an intensive community support response (8am-8pm) and on-call arrangements.

6. RISK

- 6.1 The 'Transforming Care' timescales identified nationally posed a significant challenge given the complexity of the people identified, and the risk of re-admission throughout the programme remained high. The timescales required a 50% reduction in the number of people in hospital provision by June 2014 – most regions were not able to achieve this target.
- 6.2 The market within Teesside required a significant shift in development with regard to workforce training and culture. A range of re-developed community provision was required to meet the needs of this vulnerable and challenging group of people.
- 6.3 As at June 2015, there are two people in inpatient care currently that have Hartlepool Borough Council identified as their responsible Local Authority.
- 1 person, admitted in 2013 into a specialist package of care, has received a full Care and Treatment Review and is being considered for discharge within the next 6-8 months.
 - 1 person, admitted in the last 3 months is currently undergoing assessment and treatment and is not considered to be ready for discharge at this stage.
- 6.4 Three Hartlepool patients identified from the initial Winterbourne Assessment Process have been successfully resettled into bespoke packages of care in the community and there are increased positive signs of improvement in terms of quality of life indicators for all three people.
- 6.5 A short presentation to members will provide a brief overview of a Hartlepool persons experiences.

7. TRANSFORMING CARE – FAST TRACK SITES

- 7.1 On 3 June 2015 NHS England issued a clarion call to health care leaders to redesign the care of patients across the NHS so that it is sustainable for the future and better able to meet the needs of patients.
- 7.2 Five 'fast track' sites will receive extra support to transform services for people with learning disability and/or autism and challenging behavior or a mental health condition.
- Greater Manchester and Lancashire;

- Cumbria and the North East;
- Arden, Herefordshire and Worcestershire;
- Nottinghamshire;
- Hertfordshire.

7.3 The transformation will be about improving lives by closing inpatient beds and strengthening services in the community. The five areas will receive extra technical support from NHS England to draw up transformation plans over the summer, and will be able to access a £10million non-recurring transformation fund to kick-start implementation from autumn 2015.

7.4 A regional Transformation Board has been established to support the process and is chaired jointly by the CCG Forum and Association of Directors of Adult Services (ADASS) lead.

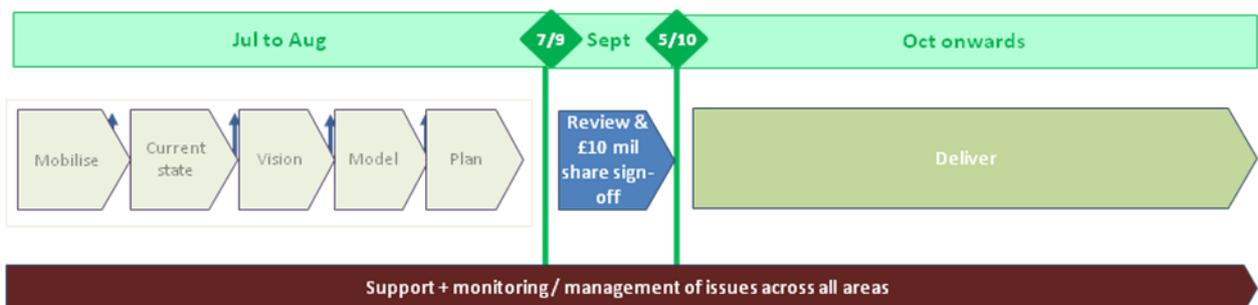
7.5 Further work is ongoing with Tees Local Authority and CCG partners to establish the requirements of those patients who are currently within the secure service provision commissioned by NHS England, and may be stepping down to local non secure services. The forecasting of the commissioning requirements for these people is a significant challenge as their needs can be more complex and challenging to existing service provision.

8. FAST TRACK TIMELINE

8.1 At a meeting in Leeds on 9 July the interim arrangements were presented and NHS England asked CCGs, LAs and NHS specialised commissioners to formulate a joint transformation plan, with ambitions to reduce inpatient services and strengthen support in the community. The plan needs to demonstrate:-

- Improved quality of care
- Improved quality of life
- Reduce reliance on inpatient care

8.2 Timeline for proposals



9. NEXT STEPS

9.1 The Tees Integrated Commissioning Group met and discussed the proposals on 10 July and identified a number of areas for consideration as part of a regional bid.

1. Community Resilience Model.
 - Prevent placement breakdown
 - Provider workforce development
 - Develop predictive tools
2. Carers support
 - Improve health respite care
 - Improve carers skills & knowledge
3. Transitional planning
 - Analysis of information from Education Health & Care plans within Children's Services and transitions to predict and prevent placement failure.
4. Crisis Care
 - Identify the need for short term accommodation in the event of a crisis, without need for a hospital admission

9.2 Further work will be required to develop these areas, and they will need to be met from the total current spend on health and social care services.

9.3 There was an expectation from NHS England that any proposals put forward from fast track sites would be match funded by CCGs, this had not been communicated as part of the Clarion Call.

10. PUBLIC ENGAGEMENT

10.1 Progress against actions from both the TIC and proposed fast track plan will be shared with the Hartlepool Learning Disability Partnership Board and sub groups.

10.2 Evidence of actions achieved is reported using the Annual Self Assessment process which includes independent validation. The outcomes are captured and form the basis of a National Learning Disability Overview Report.

11. RECOMMENDATIONS

11.1 It is recommended that members of the Adult Services committee note progress on actions to date, note updates on recent developments and receive further reports as plans progress. Members are also asked to note that this report was also considered by the Health & Wellbeing Board on 3 August 2015 due to the implications across health and social care.

12. REASONS FOR RECOMMENDATIONS

- 12.1 The Tees Integrated Commissioning Group action plan provides evidence of local involvement, engagement and consultation in developing and shaping future service provision.
- 12.2 The action plan sets out a shared commitment to learning disability services with a process that allows progress to be monitored.
- 12.3 Successful implementation of the transforming care agenda aims to transform services and improve outcomes for people with a learning disability and / or autism and challenging behavior or a mental health condition.

13. BACKGROUND PAPERS

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213215/final-report.pdf

<https://www.improvinghealthandlives.org.uk/>

<https://www.improvinghealthandlives.org.uk/projects/jhscsaf2014>

14. CONTACT OFFICER

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7.3 APPENDIX 1

Transforming Care					
What needs to happen	How will it happen	Lead	By when	Update	Linked to draft NHS Care principles
Report on Forensic review	Review currently taking place and paper to be shared once completed	MBC	Aug 2015	Fully costed options paper to be developed and shared with TIC members	10
Compile inpatient bed data	Data from business intelligence to be gathered including information from TEWV	CCG	May 2015	Inpatient data collected. Shared at Complex Inpatient and Community Group (remodelled forensic workstream group) - COMPLETED	9
Complex care and support contract to be completed and shared with TIC members for agreement.	Heather Weir to provide	MBC	May 2015	Contract details shared - commissioners contributed to specification - COMPLETED	1 - 3 - 5 - 6 - 8 - 10
Tender process to be arranged	Heather Weir to arrange process	MBC	Aug 2015	Commissioners contributed to new proposed specialist framework	1 - 3 - 5 - 6 - 8 - 10
Framework implemented	Tender to go out by end of Aug 2015	MBC	April 2016	New framework to be in place by April 2016, on track	10
Terms of Reference from the network and work plan to be obtained.	Request to be made for Judith Thompson to provide terms of reference and work plan. To be shared with TIC group	SBC	Mar 2015	Terms of reference of regional network changed and will be embedded in new Tees Commissioning arrangements - COMPLETED	10
TIC to make considerations and review its own Terms of Reference	Terms of reference to include outcomes linked to Fast Track process	All	Oct 2015	Terms will reflect any changes as a result of Fast track process and regional network	10
Review the standards Donna is doing for the community services with TEWV	Circulate to TIC members for comments.	CCG	Jun 2015	Measures and outcomes for community model shared with TICG and awaiting sign off with TEWV	10

Information on inpatients who need to move on.	Need to understand individual information in relation to Inpatient CCG's / NHSE Commissioning	CCG	July 2015	Inpatient data collected for CCG commissioned cases to be shared at next Complex Inpatient and Community Group. Awaiting the NHSE data.	4 - 5 - 6 - 8 - 9 - 10
Understand who we have in our area.	Contact Lynn Bradford and re-request list with information broken down across Tees.	CCG	July 2015	Response sent to NHSE for meeting to be Tees focused at TIC- request for current cases and estimated steps down timeframe to be shared	4 - 6 - 8 - 9 - 10
Review Forensic LD to transforming care & review people	combine the Tees workstreams, Forensic & Transforming care	CCG	Sep 2015	Group has new terms of reference new approach pending the outcome of any bids for additional resources to NHS England	10
Complete the review of respite and day care	Task and finish group in place to revise demands and review current model to see if fit for purpose.	HBC	Aug 2015	Information recirculated to the group and agreement for this to be addressed at future TIC meeting - COMPLETED	2
Individual Service Designs to be undertaken for each identified Transforming Care case	Positive Support in Tees have developed a business case	TIC	Dec 2015	Potential to develop local capacity to support the ongoing care and treatment review recommendations using individual service design model.	2 - 3 - 4 - 5 - 6 - 7 - 8 - 9

Mental Health					
What needs to happen	How will it happen	Lead	By when	Update	Linked to draft NHS Care principles
Complete CAMHS list of cases likely to require services as Adults	List to be compiled and report completed and shared	R&CBC	Aug 2015	Ongoing-list will identify numbers of cases coming through transition to facilitate and enable better commissioning	8
IMHA -Gather information from CAB for each LA area	Ask CAB about figures which link to MHA assessment from TEWV (Julie & Vanessa)	R&CBC	Aug 2015	Work progressing, to support the review of the new Advocacy arrangements and IMHA uptake	8 10
Understand who are our providers in mental health.	Use CQC as basis to establish current MH provision	HBC	Aug 2015	Neil to pull information from CQC Website - COMPLETED	3
Identify gaps to develop a framework	Identify gaps in provision across Tees	HBC	Sep 2015	Neil will present information at next TIC	6

Include mental health within TIC group	Agreed to establish Mental Health Workstream	CCG	Apr 2015	COMPLETED	3 6
Need reps from all four LA's to crisis concordat group.	Make sure people have information before they attend	HBC	July 2015	COMPLETED	10
LA's to look at individual strategies and bring them back to TIC	Review individually	TIC Leads	Oct 2015	Agenda for future TIC meeting	10
Explore opportunities to develop a Teeswide AMHP service along with considering how this can work with Forensic Service below	Discuss with AMHP Tees leads to obtain view on possibilities.	TIC	Dec 2015	Will explore possibility of forming a Tees AMHP Service. May have to examine issues such as pay etc. Took forward the proposal to Tees CCC group, spoken to Ian Hall who agreed to link in with some regional AMHP work through ADASS.	8

Transitions					
What needs to happen	How will it happen	Lead	By when	Update	Linked to draft NHS Care principles
Share the transition referral checklist	TIC group will circulate with operational staff	TIC	Aug 2015	Referral checklist shared - COMPLETED	10
Invite Head of service of children's services to TIC	Discussion to take place	MBC	Oct 2015	Identify and invite Children's commissioner to future TIC meeting	10
Discuss agenda and include everything needed around "vision"	TIC to seek an understanding of each LA's transitions arrangements	MBC	Dec 2015	Review our existing arrangements for transitions linked to the Care Act / Children and Family Act	1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 - 10

Autism

What needs to happen	How will it happen	Lead	By when	Update	Linked to draft NHS Care principles
Information on what we need to do along with increasing membership of Tees ASDG	What we need to do – Why you need to attend	R&CBC	Sep 2015	Linda has sent letter to current members. Agreed Autism Providers to be invited to future meetings.	1
Annual Review of the Autism Framework and review Quality Framework	Share outcomes of the quality review	HBC	Aug 2015	All Framework providers to be invited to next ASDG meeting, list of providers sent to Linda for circulation	1 - 3 - 5 -6 - 8 - 10
Complex Health Care Respite Review – include Autism in this	Neil to discuss at meeting – what needs to be included and to involve Autism	HBC	Aug 2015	Agreed to tag onto TIC meeting, information received from 4 LA's an TEWV	2
Children's Strategy – all Commissioners to comment on document	Derek to circulate	R&CBC	2 weeks	Comments return, attended engagement events on Tees fed in information to NECS - COMPLETED	10
Review and update Adult Strategy and to include Workforce Development / Autism Friendly Communities	ASDG	R&CBC	Sep 2015	Agreed to use NEAC £911 and use some of the understand on Advocacy contract to refresh Autism strategy for Adult, with a view to align with Children's strategy.	1 10
Review performance indicators with TEWV	Donna to address in Contract meeting	CCG	Mar 2015	Shared with TIC. TEWV to sign off COMPLETED	10

KEY

Draft NHS Care principles

- 1 I have choice and control over my care
- 2 My care is proactive, planned and coordinated
- 3 I live in the community with support from my family and carers
- 4 I have choice about where I live and who I live with
- 5 I have a fulfilling and purposeful everyday life
- 6 I get good care from mainstream NHS services
- 7 I can access specialist health and social care support in the community
- 8 I am supported to stay out of trouble
- 9 When I need additional care and support I get high quality, timely care
- 10 Commissioners monitor performance data to support improved outcomes