

Report to: **East Sussex Health and Wellbeing Board**

Date: **26 January 2016**

By: **Head of Quality; Eastbourne Hailsham and Seaford CCG and Hastings and Rother CCG, and; Operational Lead for Transforming Care; Eastbourne Hailsham and Seaford CCG, Hastings and Rother CCG and High Weald Lewes Havens CCG**

Title of report: **Transforming care progress**

Purpose of report: **The transforming care commissioning standards require CCGs to provide regular reports to the HWB on their progress against the Transforming Care agenda.**

## RECOMMENDATIONS

The Health and Wellbeing Board is recommended to:

- **Note the update provided regarding the original (Winterbourne) Transforming Care cohort, and the ongoing work against the Transforming Care agenda throughout quarters 1 -3 (April to December) 2015;**
- **confirm the type and frequency of reporting required going forward.**

## 1. Background

- 1.1 Our local transforming care programme is overseen by the Transforming Care Programme Board which meets on a six weekly basis. The programme board is attended by lead commissioners on behalf of the three East Sussex CCGs and East Sussex County Council. Monitoring of local progress is against the national programme of transformation as set out in key reports and national guidance

## **2. Progress against Transforming Care agenda to date**

2.1 Over 2015 the following procedures have been trialled and local procedure documents drafted to support the local implementation of the national guidance. These documents are due to be approved at the next Transforming Care Programme Board: (21.1.16)

- Blue Light Process
- Admission to inpatient setting process for agreement to fund
- Patient Objection Process

In addition, in line with national guidance, the following are also being developed:

- Local CTR procedures, to support the wider roll out of national guidance and embed this in to everyday practice;
- Local procedures for managing the Register of individuals at risk of admission

## **3. Number of individuals from original cohort remaining in inpatient CCG funded settings**

3.1 Since May 2013, of the original 17 individuals identified as part of The Transforming Care programme (Previously known as the Winterbourne programme)

- 9 were discharged from inpatient settings and moved on to more appropriate community based provision;
- 2 were removed from the list as were already in residential settings
- 2 were readmitted to secure NHSE funded provision
- 4 currently remain in inpatient CCG funded assessment and treatment units

Between April and December 2015 (quarters 1 – 3) there have been a further 5

### 3.1.2 New admissions to CCG funded inpatient settings over quarters 1 - 3 in 2015:

CCG	Quarter admitted	New admissions	Number Discharged
Eastbourne Hailsham and Seaford CCG	Q3	1 from a Surrey funded residential placement in Eastbourne	Ready for discharge and placement being sourced by Surrey
Hastings and Rother CCG	Q1 Q3	1 3	0
High Weald Lewes Havens CCG	N/A	0	0
Total		5	0

## 4. Care and Treatment reviews (CTR) and Blue light processes (pre-admission reviews)

- 4.1 The development of CTR and Blue light processes nationally has tested and implemented locally. Local procedures are in now process of development and approval in order to provide clarity for individual their families and providers thus ensuring a consistent approach embedded into everyday practice.

### 4.1.2 CTR and Blue light meetings completed in period are as follows:

CCG	CTR	Blue Light
Eastbourne Hailsham and Seaford CCG	1	2 (for same individual)
Hastings and Rother CCG	<ul style="list-style-type: none"> <li>2 complete and</li> <li>4 currently arranged for January / February</li></ul>	

- Having no fixed address.
- Being in contact with the Criminal Justice System.
- Presenting 'in crisis' at Accident & Emergency Departments.
- Having no family carers/advocates.
- Having drug and alcohol addiction problems.
- Having no effectively planned transition from Child to Adult learning disability services.
- Being placed in specialist '52-week' residential schools.
- Having recently been discharged from long stay hospital beds.

## **6. Progress on implementation of national model:**

- 6.1 Locally our main challenge is not on closing inpatient services but on
- Development of appropriately robust housing options
  - Development of resilient and robust providers and staff teams, able to effectively support people with the most challenging needs in community based settings.
  - Development of in reach / outreach support for people living in community settings to reduce the need for admission to inpatient services at times of crisis unless this is the only appropriate option to meet their needs.
- 6.2. Proposals for local service developments are discussed initially at the East Sussex Transforming Care Board and taken forward to the East Sussex Better Together Strategic Planning Group for HR and EHS CCG's and to the Governing Body or delegated sub-committee for HWLH CCG.

## **7. Sussex Transforming Care Partnership update:**

The first meeting of the Sussex Transforming Care Program Board took place 10 December 2015. This board was set up in response to the National requirement to progress the Transforming Care Agenda which is set to deliver services to people with Learning Disabilities and Autism. Request for attendance was directed through Sussex CCG Accountable Officers (AOs) and Sussex Directors of Adult Social Care. The Brighton and Hove CCG Director