

Background

The *Transforming Care* Programme was borne out of the abuse scandal at Winterbourne View in 2011. In October 2015 a national plan, '*Building the Right Support*', was published by NHS England. The Local Government Association (LGA), and the Association of Directors of Adult Social Services (ADASS) supported the plan which publicly committed to a programme of review of inappropriate and outmoded in-patient facilities, with the aim of establishing stronger support in the community.

Lancashire, Blackburn with Darwen, Blackpool and South Cumbria Councils and their partner Clinical Commissioning Groups (CCGs) form the Pan-Lancashire Transforming Care Partnership (TCP). TCP is not only about bringing patients out of hospital into a community setting, but is also focussed on preventing the admission of people with learning disability into inappropriate hospital beds.

NHS England has set a target of 40 specialised commissioned beds and 36 CCG commissioned beds across Lancashire and South Cumbria by the end of Q1 2018. As of 27 June 2018, there are currently 97 individuals in inpatient beds, broken down as follows:

	Secure (Spec Comm)	Non-secure (CCG)
Lancashire & South Cumbria STP	51	46
Lancashire County Council	27	25

Patients are mainly based at the Whalley Site (formerly known as 'Calderstones') and now operated by Mersey Care Foundation Trust (MCFT). The facility consists of several different provisions for people with learning disability and/or Autism. These are:

- Medium secure services
- Low secure services
- CCG commissioned non forensic beds

NHS England Commissioned Secure Services

Medium Secure Unit (MSU)

A full business case for the 123 bed joint mental illness and learning disability Medium Secure Unit at the Maghull Health Park was approved by the Mersey Care Trust Board in April 2017. This has had approval from NHS Improvement (in September 2017) and Department of Health (in January 2018) and the Treasury (March 2018). The building is expected to complete by June 2020. It is anticipated that medium secure services will remain at MCFT Whalley site until summer 2020.

Low Secure Unit (LSU)

NHS England has confirmed that they will commission 40 Low Secure beds for people with learning disabilities (20 male and 20 female). Mersey Care has been asked to develop an Outline Business Case (OBC) for this service which will be presented to the MCFT Board in June/July 2018. It is unlikely that any new build would be ready before 2021 and therefore low secure services will remain at Whalley until this time.

Step Down Service: Enhanced Support Service (ESS)

NHS England no longer commission Step Down services from Medium and Low Secure. The service is now commissioned by CCGs, who will continue to pay for this until all current service users are discharged into and stable within suitable community placements. No new admissions are being made to the service.

CCG Commissioned Inpatient Provision

The national planning assumptions set out in *Building the Right Support*, specify that by March 2019, a range of inpatient provision should be in place to meet the national specification. Lancashire and South Cumbria TCP have identified the need for up to 24 non-secure Specialist Acute Learning Disability Inpatient Beds.

The current provision of CCG commissioned beds is through the Enhanced Support Service (ESS) based on the MCFT Whalley site. This is supplemented by a number of spot-purchased, out of area beds from independent providers. At the start of the TCP programme in 2016/17 Lancashire & South Cumbria were required to discharge 61 patients from Specialised Commissioning (SC) Beds and 46 patients from CCG commissioned beds. Any patients who are admitted to ESS/ out of area beds in the meantime are also added to the numbers counted.

Papers detailing transformational proposals and project timelines, in line with national requirements were presented and approved at the Collaborative Commissioning Board (CCB) and the Joint Committee of Clinical Commissioning Groups (JCCCG) in November 2017. The initial plan approved a 2 staged approach that incorporated an interim solution and the development of a long-term, permanent model.

Interim Solution - It was proposed that during 2018-19, care would be delivered through the optimisation and expansion of the existing ESS service on the MCFT Whalley Site. This would enable patients from out of area placements to return to Lancashire and South Cumbria and help retain a highly skilled learning disability workforce.

Permanent Model – was developed by clinical experts within the North West Learning Disability and Autism Operational Delivery Network (ODN). Their proposed model satisfies the Building the Right Support (BRS) target for the Lancashire and South Cumbria footprint. The model incorporates:

- Provision of 14-16 beds in a specialist in patient unit (a mix of rehabilitation and Assessment and Treatment beds) co-located / in close proximity to a hospital site and on a bus route and close to amenities/community.
- 10 step-up / step-down placements (homes not beds). It is proposed that these placements are CQC registered as Domiciliary Care and **not** as hospital beds. These placements would offer short term placements with a clear pathway into supported living once appropriate.

- In addition there will be a need for a number of individual tenancies for service users who will be provided with the necessary packages of support in their own homes. Initially it is suggested that 10 such tenancies will be required.

Based on this approach the total model would take up to 2021 to deliver. It is now clear that that this time line will not be acceptable to NHS England and that all learning disability patients must be relocated from the site by July 2019. On this basis it is now recommended that TCP move directly to implement the permanent model without an interim solution with the ambition to move all patients off the site at Whalley by April 2020.

Consultation and engagement

A plan for public, patient and stakeholder consultation on the model of care is in development, this will comply with NHS England's Four Tests for Service Change:

1. Strong public and patient engagement;
2. Consistency with current and prospective need for patient choice;
3. A clear clinical evidence base; and
4. Support for proposals from clinical commissioners.

For the consultation a six step process will be undertaken underpinned by engagement and involvement with patients and carers, public, clinicians, staff and stakeholders.

Phase	Activity	Progress
Strategy and planning	Develop communications strategy and plan	Complete
Emerging thinking	Develop engagement plan and process with Confirm and Challenge Assurance Group (23 rd June) Engagement activity to include co-design of process with: <ul style="list-style-type: none"> • Patient, public and stakeholder groups • Lancashire and South Cumbria clinicians. 	In process
Development of options	Further engagement with clinicians, patients, public and stakeholders to develop consultation options, materials (including easy read) and activity during consultation.	July to August 2018
Public consultation	Promotion, proactive and reactive media and social media activity. Deliberative events in addition to more innovative approaches.	Oct to end Dec 2018 (12 weeks)
Analysis	Evaluation of responses, engagement activity to support the final decision	January 2019
Final decision	Board support, promotion of decision and planned approach to decision event	February 2019

Further details are provided in Annex A.

Specialist Acute Learning Disability Inpatient Service Engagement and Consultation Timeline

The formal public consultation will consult on a new model of CCG commissioned inpatient provision utilising the Lancashire and South Cumbria Integrated Care System Board six-step consultation approach. The pre-consultation, consultation and post-consultation plans also comply with the Department of Health's Four Tests for Service Change:

1. Strong public and patient engagement;
2. Consistency with current and prospective need for patient choice;
3. A clear clinical evidence base; and
4. Support for proposals from clinical commissioners.

The table below is an expansion of the wider project timeline and highlights the draft consultation and engagement plans, timescales and progress:

Date Range	4 Tests Compliance	6 Steps Compliance	Activity	Status
	Test 1	Strategy	Develop communications strategy and plan	COMPLETE
April 2018 – July 2018	Tests 1, 2 & 3	Emerging thinking	<p>Pre-consultation Co-produce and develop Engagement Plan with Service Users</p> <p>Mapping and formation of stakeholder lists including liaison with Pathway Associates to identify service user groups</p>	<ol style="list-style-type: none"> 1. Laura and Neil will lead a session with service users at the confirm and challenge group on 23 May 2. A stakeholder list is under development using information from previous programme engagement events
April 2018 – July 2018	Tests 1, 2 & 3	Development of Options	<p>Further Engagement Engagement with clinicians, patients, public and stakeholders to develop consultation options, materials (including easy read) and activity during consultation as follows:</p> <ul style="list-style-type: none"> • Political engagement to outline how we will formally consult • Consultation and Engagement with: <ul style="list-style-type: none"> ○ Confirm and Challenge Group (This is the TCPs service user assurance group) ○ Health and Wellbeing Board ○ Heath Overview and 	<ol style="list-style-type: none"> 1. Engagement with HWBB deferred from 15 May until 17 July. Further consideration of other Boards to be considered 2. Progress as follows <ul style="list-style-type: none"> - Pathway Associates informed and have agreed to support the use of Confirm and Challenge forums to receive and input into the process - Attendance at the Lancashire HWBB organised for July 2018 - HOSC - tbc - Full stakeholder list under development 3. Laura, Neil and Lucy to progress

			Scrutiny Committee <ul style="list-style-type: none"> ○ Wider stakeholders e.g. Healthwatch, patient groups etc. ○ Arrange drop-in sessions at current inpatient sites ● Development of regular newsletters ● Full TCP Programme input including clinical consultation and technical appraisal of the NW LD&A ODN recommendations ● Revisit conversations with MPs to discuss how the Partnership will formally consult ● Public event to ensure we communicate: <ul style="list-style-type: none"> ● what we are planning to do ● how can we make sure we reach everyone ● Co design of stakeholder q'naire 	4. Laura and Lucy to progress. Services Users to advise on content and easy read 5. The ODN recommendations have been submitted to the lead CCGs. The Strategic Commissioners Group will lead the clinical consultation and technical appraisal with the wider TCP. This will include development of a number of potential options for delivery 6. To be progressed 7. To be progressed
Oct 2018 – Dec 2019	Test 1	Public Consultation	Public consultation (Minimum period of 12 weeks) <ul style="list-style-type: none"> ● Promotion, proactive and reactive media and social media activity ● Deliberative events in addition to more innovative approaches 	
Jan 2019 – Feb 2019	Test 1	Analys	Consultation Evaluation Evaluation of responses, engagement activity to support the final decision <ul style="list-style-type: none"> - Receive evaluation from consultation - Present to relevant Boards - Agree final model 	
Feb – March 2019	Test 1	Final Decision	Outcome Board support Promotion of decision and planned approach to decision event	

List of background papers

'Building the Right Support' <https://www.england.nhs.uk/wp-content/uploads/2015/10/ld-nat-imp-plan-oct15.pdf>

'5 Year Forward View 2014' <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf>

'Next Steps on the 5 Year Forward View 2017' <https://www.england.nhs.uk/wp-content/uploads/2017/03/NEXT-STEPS-ON-THE-NHS-FIVE-YEAR-FORWARD-VIEW.pdf>

'The Right Track – Transforming Care in Lancashire'
<https://righttracklancashire.nhs.uk/publications/1-lancashire-learn-ing-disabilities-fast-track-plan/file>