

Briefing for Lancashire OSC Steering Group July 2014 Calderstones Commissioning Intentions

Since April 2013 Clinical Commissioning Groups have been responsible for the commissioning of the Calderstones Partnership NHS Foundation Trust service.

Calderstones is the only specialist Learning Disability Trust in England. The Trust provides highly specialised in-patient treatment and community care to individuals presenting with complex behavioural, mental health and social care needs. Over the last two decades the Trust has proved itself to be a high quality service, with a strong reputation for its research and innovation borne out by national awards and accreditations. The Trust uses its specialist skills and knowledge to contribute to national events in sharing best and innovative practice. The Trust accepts referrals from the Secure Commissioning team which is part of the North of England Specialist Commissioning Group, for individuals from the age of 18 upwards who require treatment in medium and low secure environments. These are mainly individuals with forensic needs and individuals whose behaviour is extremely challenging to mainstream local services.

Individuals admitted to secure facilities are detained under the provision of the Mental Health Act (1983) or other legislation as required. In addition to the secure services, the Trust also provides a step-down service for those individuals who no longer require a physically secure environment but still need a service where risks can be assessed before they move into a community placement. The Trust also provides an Enhanced Support Service and a Forensic Support Team.

A commissioning group was formed with representation from health and social care commissioners across Lancashire, Greater Manchester and Liverpool. The group has met regularly since July 2013 to consider the needs and priorities of service users of the Enhanced Support Service at Calderstones. As a result of this, the commissioners have agreed a plan to improve the patient care pathway, improve the quality of care planning, and develop a framework to improve choice to service users, offering care closer to home. The aim of this is to improve and achieve high quality patient outcomes for service users, offering independent living in the community for those who are able to.

The Department of Health has called for a fundamental change to take place in the care and treatment of people with learning disabilities in-patient hospital settings. The Department of Health has recommended that such services should be safe, appropriate and high quality, as well as local and community based. A specific recommendation was that all in-patient placements should be reviewed by June 2013, and that anyone who was inappropriately placed in hospital and could be better served in the community, should be supported to move to independent living in the community with support where required as quickly as possible, and no later than 1 June 2014.

On 1 September 2013, commissioners advised Calderstones NHS Foundation Trust that it would be planning to fund services on a patient by patient basis, rather than as a block contract. This approach was felt to support the adoption of the Winterbourne recommendations including the careful and managed transfer of patients from Calderstones to community based support. This is because the funding will be able to follow the patient easily and transparently from Calderstones to community based support if that is the appropriate course of action.

Negotiations between Calderstones and the commissioners are on-going to consider the requirements and where appropriate, ensure that the process of change is undertaken carefully and effectively to ensure that the planned transfer of patients happens in the best interest of the patients, and without significant negative impact on Calderstones.

The Winterbourne concordat is an action plan for people with challenging behaviour in hospital following the Winterbourne View report. The concordat is an agreement that local health and care commissioners who buy services will consider every person with challenging behaviour who are in hospital and if they do not need to be in hospital they will be supported to move to community support by June 2014 if not earlier.