

East Lancashire Clinical Commissioning Group

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Our Ref: MI/DCAC

Date: 10 June 2014

Walshaw House Regent Street Nelson Lancashire BB9 8AS

Tel: 01282 644700 Fax: 01282 615559 www.eastlancsccg.nhs.uk

Dear Colleague,

Re: Enhanced Support Service for Adults with a Learning Disability – Paper for CCG Agreement July 2014

You will be aware from the discussion at the CCG Network in May 2014 and at the Collaborative Arrangements Group prior to this, that NHS East Lancashire CCG is seeking to establish all associate CCG positions in July 2014 with regards to the above service provision and related contractual arrangements at Calderstones Partnership NHS Foundation Trust (Provider).

A paper is being prepared on your behalf to assist in the process of individual CCG consideration. This will be sent shortly – it will include the summary of the Programme of work to date and the specific recommendations which require CCG consideration and agreement.

Notably, this includes the intention to move to a cost-per-case basis for placements with the enhanced support service instead of the existing block contract. This shift to person-centred care planning for this cohort of patients is a fundamental element in the creation of a strengthened pathway for patients with a high level of need with a learning disability.

You will also be aware that the Provider of the current service has raised issues that they consider the commissioning intention creates for them as an organisation. In their assessment, the potential loss of guaranteed income that would result from cost per case could destabilise their business and threaten their organisational viability, resulting in potential redundancies in Lancashire. As a result, there may be political and media interest in this work. NHS East Lancashire CCG is engaged with the Provider via the Learning Disability ESS Transition Group to understand the reasonable mitigations that can be put in place by both Provider and commissioner such as supporting the modernisation of their model of care.

In addition, workstreams have been established to improve care planning, assessment and treatment options for the patient cohort concerned ensuring that any risks to patients or carers during the transition are managed and mitigated and that the end outcome of any change of process will be greater choice and quality of service for the patients and their carers. These improvements are also key to Lancashire's action plans in relation to Winterbourne and the Learning Disability Joint Health and Social Care Self-Assessment Framework (and NHS England Lancashire Area Team's Case for Change). Further detail will be provided in the paper – and there is a detailed Project Plan, papers from meetings and Communication and Engagement Strategy – all available on request.

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Chair: Dr Di van Ruitenbeek Chief Clinical Officer: Dr Mike Ions Given the risks and profile of this programme of work, NHS East Lancashire CCG is requesting that all CCGs agree a common approach and ensure that their organisations are fully aware of the proposals and the potential implications. It is suggested that it would be advisable to take the paper for agreement to your Governing Body or another decision making body of your choice such as your Executive Team, if you feel this has the necessary delegated authority and keeps your members appropriately informed.

NHS East Lancashire CCG would also like to offer to attend to present and/or support you with the paper if you would find this helpful. Please could you let Helen Rimmer, Service Redesign Officer, NHS Midlands and Lancashire Commissioning Support Unit know on 01772 214207 or https://doi.org/10.1007/helen.rimmer@lancashirecsu.nhs.uk if you would wish to have a representative present/support as soon as possible so that diary arrangements can be made?

In either case, please could you confirm to Helen Rimmer via the contact details above, the mechanism and date that you will be using in July 2014, for audit trail purposes so that this can be noted in the Project Plan.

A further email will be sent to collect the outcomes of the individual CCG considerations after the meetings have taken place with a view to collating these by the end of July 2014.

Yours sincerely

Michael Ions

Chief Clinical Officer

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Chair: Dr Di van Ruitenbeek Chief Clinical Officer: Dr Mike Ions