

# Winterbourne View - Joint Improvement Programme

## Stocktake of Progress Report

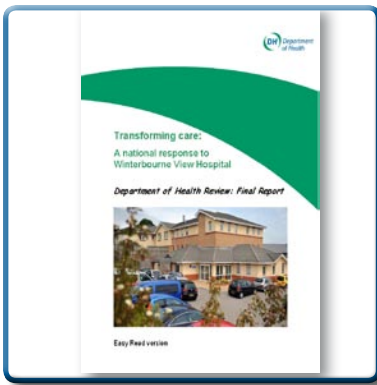
October 2013



### Easyread version

Words in **blue** are in the word list at the end of the booklet.





## Winterbourne View

**Winterbourne View** was a hospital where people with learning disabilities lived.

Some staff **hurt and abused** the people who lived at the hospital. This was against the law and the hospital is now closed.

There has been a big investigation into the hospital to find out how staff had been able to abuse patients.

It also aimed to make sure that abuse like this never happens again in other places.



## The Concordat (agreement)

**Winterbourne View Concordat** is an **agreement** that lots of groups signed to show they agreed with the ideas in it and would do things to make sure that what happened at Winterbourne View could not happen again.

It makes sure that people with learning disabilities will get better care, have their care checked and that they do not stay in hospitals far from home.

One of the things that was done to help make sure that changes were happening was asking people what they had done about it. This was called **the Stocktake Questionnaire**.



## The Stocktake Questionnaire

This was sent to Local Councils, Clinical Commissioning Groups and Health and Wellbeing Boards.



It was part of the Winterbourne View Joint Improvement Programme.

The Questionnaire asked local areas to check whether they were doing the things in the **Winterbourne View Concordat**.

It was based on the idea that the changes needed could only happen through **local organisations working together**.



It made it easier for people who use services, family carers, **advocacy** groups and providers to work together.

Local areas could say what **support** they need from the Improvement Programme.

The Questionnaire asked about things like:

### ■ **Commissioning - Keeping People Safe**

- Developing local services
- How the organisations work together to pay for services
- Case management and reviews
- Safeguarding
- Understanding the people who may need services
- Children and transition to adults





## What did the Questionnaire find out?

- All areas are working towards the things agreed in the Concordat
- **Health and Wellbeing Boards** are very important
- There are skilled staff who want to offer the best care to people who may use services
- In many areas, partners are involving **people who use services and their family carers**. But this is not happening everywhere.
- Good **safeguarding** is happening
- In many areas there is **joint working** to understand people's needs and finding the right ways of providing services
- **Clinical Commissioning Groups** are bringing in new ideas in some areas
- There is new **planning** for services in some areas. This will mean that less people are being placed in long-term units, far from their home
- There were lots of examples of **good policy and practice** sent in.



## The questionnaire also showed that some things need to be better:

- There is a need to be clear about the people who are seen as part of the change programme
- **Whole life course planning** needs to be worked on – remember children become grown-ups





- There needs to be more spending on **behaviour support** and **homes in the community**.

This will make sure support services are safe **and** local

- Providers need to **work together** to set up different sorts of services
- **Strong commissioning** makes services better
- The money that local councils and the NHS have to provide services needs to be put together in one pot, not lots of different ones
- There needs to be more work with **people who use services and their family carers**.
- There needs to be **more advocacy**
- There needs to be more **personalisation**
- People need help to understand and use the **Mental Capacity Act**
- **Health and Wellbeing Boards** need support.





## Why are some areas doing better than others in making changes?

### Leadership and Partnership:

**What we found:** The partnership between local councils and the organisations they work with is at different stages in the different areas.

**Health and Wellbeing Boards** are seen as important in all areas. Some are more grown up than others

**What needs to happen:** The **Improvement Programme** will work on leadership and partnership and support to **Health and Wellbeing Boards**.



### Working with People and Families:

**What we found:** In many areas, there is good work with community and voluntary, user and family carers groups.

**Advocacy** is often part of this.

**What needs to happen:** There needs to be more work with these groups and good quality **advocacy**.



### Working with Providers

**What we found:** **Most** localities are looking at new providers and new ways of meeting people's changing needs.

There is some good work between commissioners and providers.

But in many places commissioners and providers do not work closely enough.



**What needs to happen:** There is work being done at a **national** level.

Providers, regions and local areas will also get help to develop their **own** way of commissioning services.

Setting up clear standards for services will help.



The programme will work with the **Care Quality Commission** to register providers.

This checks that providers offer good services.

## Commissioning



**What we found: Commissioning** is very important to make the changes. It is an area that needs a lot of support.

There needs to be commissioning where people have a **clear pathway** which starts with **a single assessment** and supported by good care management.

The issues that are difficult are:

- Ordinary Residence rules
- Working between different sorts of commissioning
- Developing **pooled budgets** – to make one pot of money
- Workforce development and local skills assessments
- Not enough long term money planning
- Limited use of care management type services







**What needs to happen:** Work with commissioners will be important.

We will link with work by groups like the Local Government Association, NHS England Commissioning Development and NHS improving Quality.



## **Children, young people and adults**

**What we found:** There is some good work which makes **transition** for young people better.

Children's needs should be seen as part of their **long term care** as they grow up to become adults

**What needs to happen:** This is important for the **Improvement Programme**. Other Government departments, groups and providers need to help make the change happen.

## **Future Support and Development**

The Winterbourne View Programme is based on **sector led improvement**.



This means that councils work to make services better. They share good ways of working and get **feedback** from service users, family carers and others to do this.

The aims of the programme are in Transforming Care and the **Concordat** and the findings from the questionnaire. These aims need to be turned into **actions and results**.

An important part of the Questionnaire has been that each area could **ask for support and development**.



The improvement offer from the programme will be based on the Questionnaire.

There have been many examples of **good practice and local policy** that will be used across local areas.

We will share the report.

This will develop the Improvement Offer and supporting programme using the four national priorities and regional and local support:



- Life course planning
- Working with providers
- Keeping people safe
- New money models



## The key regional activity will be:

- Supporting partners based on what they tell us about **their own** development and the support **they** ask for.
- Developing **regional plans** supported by the improvement programme to speed up progress
- This will link with ways that **already** exist for supporting improvement, identifying areas in need of extra support, and checking quality.
- Good work will be shared.



## Improvement Programme responses to the questionnaire

These are the things to be done that will be built into the improvement offer:

- The Improvement Programme will work on leadership and partnership and support to **Health and Wellbeing Boards**
- It will talk about the importance of working together locally and providing high quality **advocacy, personalisation** and working with family carers
- There will be **national** work with providers, regions and local areas. There will also be support in developing **their own** approach to commissioning services



This means supporting regions to set up **locally based services** - **not** long-term services far from people's homes

- **Pathway planning** for children, young people and adults is very important.



This needs to happen **across** government departments, national groups and services providers.

- The programme needs to work with areas to make sure they understand the issues around **money**.

These are things to follow up with local areas. They are key parts of the Improvement programme:



- **Alternative services** – commissioning these on time and choosing the right service providers
- **Funding issues**, such as lack of money, being clear about specialist commissioning funding, NHS Continuing Care and other issues.

Big change is needed, especially from early years through to adult care.

The improvement programme needs to work with others to target money from Government, the sector and other places.



This will help make sure that people get the right support, closer to home.

It will help stop problems like **Winterbourne View** happening again.

# Word list

## Advocacy

This is support for people with learning disabilities so they can have their say. It can help make sure services and staff treat them well.

## Behaviour that challenges

This is when a person behaves in a way which can be hard for staff and services to deal with. It may put the person or other people at risk. It can mean it is harder for them to join in everyday activities.

## Clinical Commissioning Groups

These are groups that include all of the GP groups in an area. They give doctors a say in the services that are set up for their patients.

## Commissioning

This is making sure health and care services meet the needs of people in an area. It means setting up and managing services as these needs change.

## Health and Wellbeing Boards

These are groups of people who work in health and in care who meet and work together to make the health and wellbeing of local people better.

## Mental Capacity Act

This is a law which protects the rights of people who cannot make decisions of their own.

## Partnership Board

A local meeting held every few months. Service users, staff and managers from services, health, charities, housing and other groups meet to make sure services work well together and make the lives of people with learning disabilities in the area better.

## Personalisation

This is when a person has choice and control over the services they receive.

## Review

A meeting which looks at the life of a person with learning disabilities to make sure that services meet their needs. Plans are also made to support the person to do the things **they** want to do in the future.

## Safeguarding

This is when social workers and other professionals check on people's care to make sure their health, wellbeing and rights are protected.

The Stocktake Questionnaire

It was part of the Winterbourne View Joint Improvement Programme. This was sent to Local Councils, Clinical Commissioning Groups and Health and Wellbeing Boards. The Questionnaire asks local areas to check whether they are doing the things that were in the **Winterbourne View Concordat**.

## Winterbourne View

This was a hospital where people with learning disabilities lived. Some staff hurt and abused the people who lived at the hospital. This was against the law and the hospital is now closed.

There has been a big investigation into the hospital to find out about the abuse and to make sure that it never happened again.

## Winterbourne View Concordat

The Concordat is an **agreement** that lots of groups signed to show they agreed with the ideas in it. It followed from a review of the abuse of people at **Winterbourne View**.

It makes sure that people with learning disabilities will now get better care which meets their needs and that it is closer to home.



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