



Black Country Transforming Care Programme

**Improving services for adults
with learning disabilities**

Engaging with you

**Thursday 21st March to Thursday 23rd
May 2019 (midnight) 2019.**



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Foreword

Welcome to our engagement on transforming care for people with learning disabilities in the Black Country.

Following the investigation into abuse at Winterbourne View in 2015 and other similar hospitals, there has been a cross-government commitment to move all people with learning disabilities who were inappropriately placed in such institutions into community care.

The local NHS clinical commissioning groups, the organisations that plan and pay for many of our health services, in partnership with the local authorities, have been working to make improvements in care and support following the Winterbourne investigation.

The Transforming Care Programme was established to build on that work and accelerate progress to transform care and support for people with learning disabilities. It is a nationally mandated programme that is being rolled out across the country.

In the Black Country our work in this area aims to:

- Improve quality of care for adults with learning disabilities
- Improve quality of life for people with a learning disability
- Enhance community capacity, thereby reducing inappropriate hospital admissions and length of stay.

Our work so far has focused on areas such as: early intervention to minimise the development of challenging behaviours; crisis prevention to provide the right kind of support to prevent and reduce instances of crisis; addressing crises by responding effectively to stabilise an individual's situation and ensuring effective discharge to avoid repeat hospital admissions.

All of this means developing more community-based teams with specially trained social workers, nurses, psychologists, psychiatrists and other staff working more closely together around the needs of the child, young person or adult and their family. With fewer hospital admissions, we are intending to free up resources from existing assessment and treatment units which can be invested in the community model.

This public engagement exercise is seeking people's views on the community-based services that have been put in place in the Black Country and the impact on specialist inpatient assessment and treatment beds for adults with learning disabilities.

It follows the service-user engagement that has been carried out to develop and test the community services. It will ensure people living in the Black Country, regardless of which area they live in, have had the same opportunity to share their thoughts and views on the services and support we are putting in place for adults with learning disabilities.

The Black Country Transforming Care Programme is also developing services for children and young people and will engage separately on these pathways.

I would encourage anyone with an interest to take the time to read through this document and contribute to local plans to transform care by completing the short survey:

[Survey – Black Country Transforming Care Programme 2019.](#)

If you would like to meet us to discuss anything outlined in the proposals before you complete the survey, please attend one of the public meetings highlighted on page 14.

Hafsha Ali
Programme Director
Black Country Transforming Care Programme

Introduction

This document describes the current Black Country position of the national Transforming Care Programme (TCP) for adults with learning disabilities, who display behaviour that challenges, including those with a mental health condition. It also sets out aims and proposals for the future.

Behaviour that challenges means people harming themselves or other people, or damaging property and things. It sometimes leads to people with learning disabilities getting into difficulties with the police and criminal justice system.

TCP is only concerned with low and medium secure hospital services, not high secure services.

The Transforming Care Programme is about making sure more people are supported to receive health assessment and treatment in the community and close to home wherever this is possible. Assessment and treatment will be provided by community teams with specially trained social workers, nurses, psychologists, psychiatrists and other staff. Service users will only go to hospital because their health needs cannot be met safely in the community at that time. That hospital care will be high quality specialist care and stays will be for the shortest time possible.

The Black Country TCP has been working with people with learning disabilities and their families and carers to develop and deliver a new community model of care that maintains their rights, respect and dignity. People who require assessment and treatment in an inpatient setting will still have access to beds in the Black Country.

However, because we are investing in a community model, we need fewer assessment and treatment beds. Clinicians and other experts have analysed the existing assessment and treatment units and believe the unit that best meets the requirements for a safe and effective service is Penrose House in Sandwell.

The purpose of this engagement is to seek your views on the following:

- The introduction of a new community model for people with learning disabilities that provides enhanced support in the community
- The permanent closure of specialist inpatient beds at Ridge Hill Hospital, Dudley and Orchard Hills/Daisy Bank, Walsall. (These are beds that are reserved for assessing and treating people with learning disabilities and are not connected to general hospital services.)
- The preferred option to locate a single assessment and treatment centre at West Bromwich, Sandwell.
- The impact (positive and negative) of proposed changes on service users, family members and carers and what support you feel needs to be in place to make the new model successful.

At the end of this document we ask you what you think of these plans and what we should consider when making changes by filling in a short survey. We will use this feedback to ensure we understand the impact of our community model and are able to take any mitigating action – should it be necessary.

Who is involved in the Black Country TCP?

The Black Country Transforming Care Partnership covers Dudley, Sandwell, Walsall and Wolverhampton. Partners include:

Clinical Commissioning Groups

- Dudley CCG
- Sandwell and West Birmingham CCG
- Walsall CCG
- Wolverhampton CCG.

Local Authorities

- City of Wolverhampton Council
- Dudley Council
- Sandwell Metropolitan Borough Council
- Walsall Council.

Provider(s)

- Black Country Partnership Foundation Trust (BCPFT)
- Wider social care markets.

Also participating in the programme are current service users, their families and the organisations that provide services for them.

The current situation in the Black Country

The Black Country is home to approximately 17,000 adults, over the age of 18 years who have a learning disability including 1,000 people with a severe learning disability and 300 who display behaviour that challenges¹.

We have already started to deliver a strengthened community model for people with learning disabilities that is designed to support people to stay in the community near their family and friends by ensuring services work together across health and social care, secure settings and other services in the Black Country.

The community model includes: an intensive support service to help avoid unnecessary hospital stays; a forensic support service for people involved in the criminal justice system, or likely to become so. See page 9 for more detail.

However, there will still be a need for short-term inpatient assessment and treatment beds for some people with learning disabilities to help them through a specific health need that cannot be managed in the community. Within the Black Country, we are reducing the number of specialist beds from 28 to 10. This is based on the national recommendation to provide 10-15 beds per 1m population.

In the Black Country we currently have one active assessment and treatment unit at Penrose House, Small Heath Lane Hospital in West Bromwich which has 10 beds and can treat men and women in separate facilities. In addition, community-based teams from Black Country Partnership NHS Foundation Trust support adults with learning disabilities.

Smaller assessment and treatment units at Ridge Hill Hospital (Dudley) and Orchard Hills/Daisy Bank (Walsall) are currently not in use following a clinical assessment of these provisions in January 2017. The assessment raised environmental, clinical and staffing concerns about the assessment and treatment services at these sites. Patients who were using these beds have been discharged and are being treated in the community. In 2016 three learning disability assessment and treatment in-patient beds at Pond Lane Hospital, Wolverhampton were closed, following a public consultation.

¹ Projecting Adult Needs and Service Information, Institute of Public Care, Oxford Brookes University

How the community model works

The Black Country TCP has been working with people with learning disabilities, their families and carers to agree and deliver a community model of care based on the following principles

- Involving people with learning disabilities in their own care
- Better identification of people at risk who may need intensive support
- Support for families and carers to keep people in their own home environment.

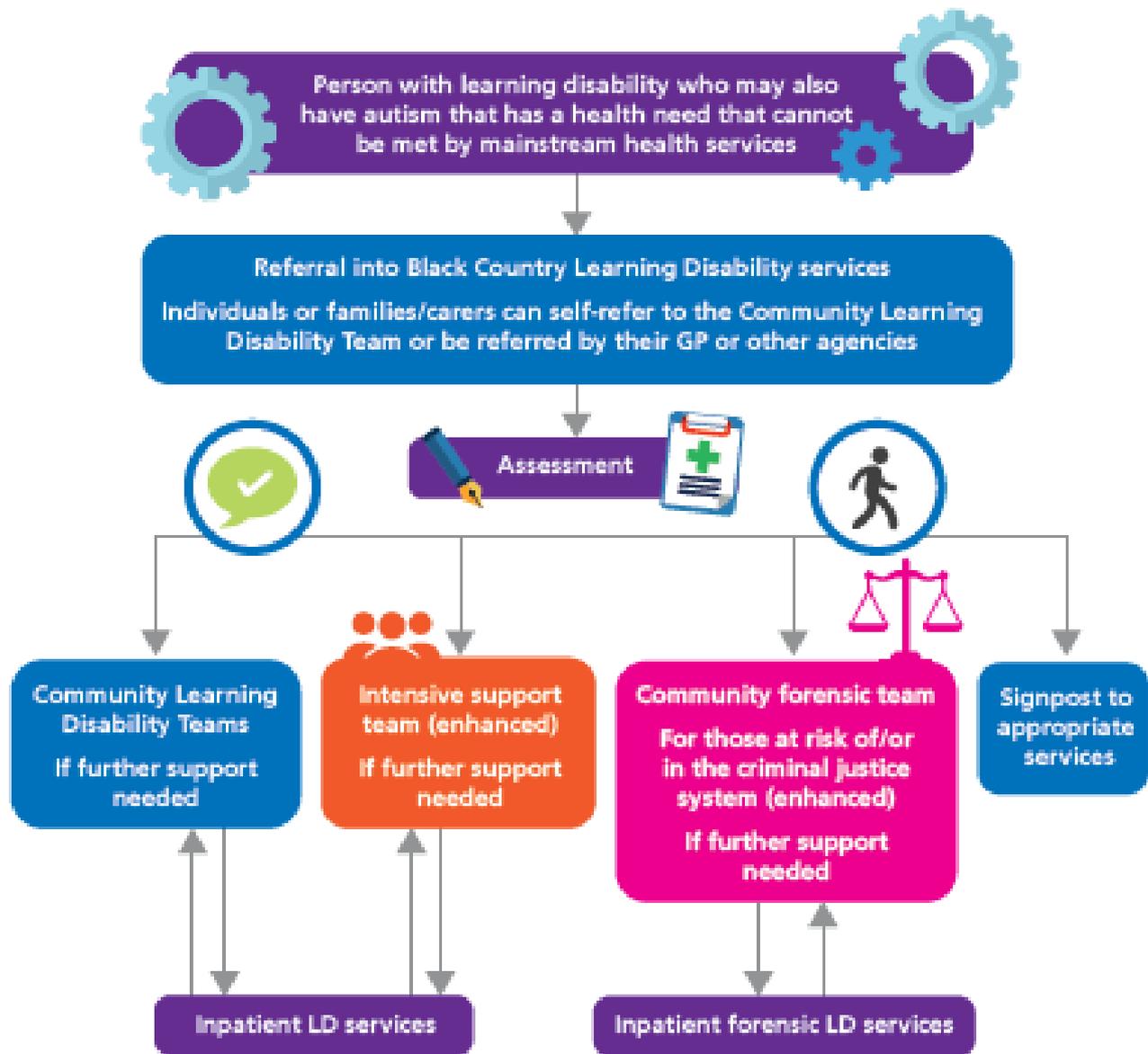
Through this work, we are ensuring services are available for people with learning disabilities and/or autism in the right place, at the right time and delivered in the right way

We believe the best way to deliver services for people with learning disabilities and/or autism is in the community, through the following services and the pathway can be seen on page 8.

- Community learning disability service
- Assessment and treatment beds
- Intensive support service
- Forensic support service.

Black Country Transforming Care Partnership – new patient pathway

TCP Black Country LD services patient pathway



Community Learning Disability Service

There are four community learning disability teams, one in each of the four Black Country and West Birmingham localities, Dudley, Sandwell, Walsall and Wolverhampton. The teams aim to provide a flexible, proactive, co-ordinated and integrated service for people over 18-years-old who have a diagnosed learning disability, are unable to access mainstream services and/or require access to a specialist health team.

The service enables service users to:

- Be as independent as possible, in the least restrictive way
- Avoid unnecessary hospitalisation
- Be discharged in a timely manner from hospital inpatient care
- Be supported to access their physical and mental health care in a way that meets their individual needs as far as possible
- To live as independently as possible in the community
- Be involved in decision making about their care
- Receive timely and accessible interventions when experiencing psychiatric, psycho-social, behavioural and/or pharmacological problems.

In addition, the service supports families and carers by improving communications methods and mechanisms and helping them to navigate the assessment process and meet the demands of caring.

It also supports staff and professionals who deliver the service by providing specialist training to enable them to support the needs of service users effectively.

Assessment and treatment beds

This is a 24-hour inpatient acute assessment and treatment service for people with learning disabilities and complex health needs.

The aim of acute learning disability inpatient services is to provide the following three core functions of support:

- The holistic assessment of and treatment for mental illness or disorder in an individual with a learning disability with associated emotional and behavioural distress, where it cannot be safely or appropriately managed in the community
- A safe place where people feel they are able to take steps towards their recovery
- Reintegration of the individual back into the community after hospital treatment including provision of support/guidance to families and carers in conjunction with Community Learning Disability and Intensive Support Teams.

Intensive support service

The Community Intensive Support Team provides a flexible, proactive, co-ordinated and integrated service, for people over 18 years-old, who have a diagnosed learning disability, are unable to access main stream services and/or require a specialist intervention team.

As with the Community Learning Disability Service, this service aims to prevent unnecessary hospitalisation, ensure timely discharge from inpatient care and support service users to live as independently as possible. In addition, the service enables:

- Early detection and timely early interventions at referral, working with community teams
- Intensive response to crisis
- Working alongside multi-disciplinary teams to assess and develop plans to support service users in managing challenging behaviours
- Planning of strategies to prevent future crisis, working with community teams
- Assessment of family carers' needs to support them with the demands of caring during periods of crisis
- Timely and accessible intervention for patients experiencing psychiatric, psycho-social, behavioural and/or pharmacological problems.

Forensic support service

The Community Forensic Team provides a flexible, proactive, co-ordinated and integrated service for people over 18 years-old with a diagnosed learning disability who are either subject to the criminal justice system or at significant risk of becoming so, are unable to access mainstream services and/or require a specialist forensic team.

In summary the service:

- Provides timely and accessible intervention to clients with active and ongoing forensic and psychiatric, psycho-social, behavioural or pharmacological needs, and consultation to the people who support them
- Promotes the qualities and values of the national Good Lives Model of offender rehabilitation
- Enables the highest level of independence possible, in the least restrictive way
- Prevents and avoid unnecessary hospitalisation.
- Facilitates timely discharge from hospital inpatient forensic care.
- Signposts and supports families and carers in accessing extra help with the demands of caring and involvement with the criminal justice system.

Identifying the best location for assessment and treatment beds

We recognise there will be times when some people with learning disabilities who may have autism need to go into a hospital bed. We know that when this happens, people want to be as close to home as possible, therefore retaining some assessment and treatment beds in the Black Country is a priority.

Our aim is to develop a single state of the art assessment and treatment centre that can provide the high level of care service users need with the focus on getting them back into the community, near their family and friends, as soon as possible.

As part of this process, senior clinicians and other relevant professionals The Black Country Partnership NHS Foundation Trust reviewed the three available units at Penrose House (Sandwell), Daisy Bank Unit (Walsall) and Ridge Hill Unit (Dudley) to determine which could best deliver the national TCP approach.

The clinicians concluded that both the Dudley and Walsall sites were inappropriate to deliver the new model of care for people with learning disabilities because:

- Both sites are in isolated community locations
- Neither affords a safe level of clinical support including emergency response to clinical incidents
- The physical environment at each of the two sites is inappropriate for managing the transformation of care.

The review also showed that Penrose House does allow for an emergency response from the MacArthur unit and Gerry Simon Clinic along with the surrounding support infrastructure. The review has therefore concluded that Penrose House is the clinically safest and most appropriate site for TCP assessment and treatment beds.

Have your say

We believe that the TCP model of care we have outlined above is the right one. But we want to be sure we have captured all your thoughts and concerns before we ask our clinical commissioners to agree to the permanent closure of assessment and treatment beds in Dudley and Walsall. This will enable us to take any supportive action needed to ensure our community model delivers the best possible care for people in the Black Country with learning disabilities.

Throughout this eight-week engagement period, we will be talking to local councillors, MPs, GPs, NHS staff, specialist schools and advocacy services to seek their views too.

Now that we have described the national programme, the local situation and our plans for the future in the Black Country, we would like to know what you think about it. Your views are very important and will be used to understand any action needed as a result of inpatient bed closures, and to further shape community support.

This public engagement exercise runs from **Thursday 21 March to Thursday 23 May**.

You can get involved through a variety of different methods:

1. Attending one of our engagement events

- Monday 8 April, Yemeni Community Association in Sandwell Limited, Greets Green Access Centre, Tildasley Street, West Bromwich, B70 9SJ. Between 1.30-3.30pm
- Tuesday 9 April 2019 at Molineux stadium, Waterloo Road, Wolverhampton, WV1 4QR. Between 10am-12pm
- Thursday 11 April 2019 at Bescot stadium, Bescot Crescent, Walsall, WS1 4SA. Between 4-6pm
- Thursday 2 May 2019, DY 1 Community building, Stafford Street, Dudley, DY1 1RT. Between 5.30-7.30pm

2. By completing the [online questionnaire](#)

3. If you belong to a group or organisation, you can invite a representative from the engagement team to come along to your meetings. Details are available below. If you would like somebody to attend to speak to your members, colleagues, friends or staff please call 0121 611 0611.

Your views will feed into a full report which will be considered by the Transforming Care Programme Board. They will then make a recommendation to each NHS Clinical Commissioning Group to inform decision making on the future of learning disabilities in the Black Country and West Birmingham.

If there are any parts of this document you do not understand, you might find it helpful to read these definitions:

Jargon Buster

If there are any parts of this document you do not understand, you might find it helpful to read these definitions.

- **Assessment and treatment units:** Specialist assessment and treatment in a therapeutic environment. People placed in Assessment and Treatment Units may be voluntary patients or they may be admitted under the Mental Health Act. They may have mental health problems and/or present seriously challenging behaviours, and they may be admitted from their home or as a 'step-down' from a secure unit. Some have more security features than others. Some are more community-based than others.
- **Autism:** Autism is a lifelong, developmental disability (from birth) that affects how a person communicates with and relates to other people, and how they experience the world around them.
- **Challenging behaviours:** Culturally abnormal behaviour(s) of such an intensity, frequency or duration that the physical safety of the person or others is likely to be placed in serious jeopardy, or behaviour which is likely to seriously limit use of, or result in the person being denied access to, ordinary community facilities.
- **Commissioning:** Commissioning is the planning and purchasing of NHS services to meet the health needs of a local population.
- **Community based assessment and treatment services:** Advice, assessment and short term treatment for mental health concerns.
- **Crisis:** A crisis is an emotional and physical response to some precipitating event or series of events that for a person with a learning disability or autistic spectrum disorder and who displays challenging behaviour, disrupts the current care and support situation. The crisis happens when something is experienced that is so hurtful, challenging, or threatening that the person concerned feels overwhelmed. For a person with a learning disability or autistic spectrum disorder who displays challenging behaviour, a crisis often causes a placement breakdown, with the person unable to continue in their current placement. It may also be a mental health crisis, when the person concerned feels their mental health is at breaking point. For example this may include hitting and kicking, throwing items, severe withdrawal and other behaviours which may result in them coming into contact with the criminal justice system e.g. the police.
- **Inpatient bed:** a hospital patient who occupies a bed for a least one night in the course of treatment, examination or observation.
- **Learning disability:** A learning disability is a reduced intellectual ability and difficulty with everyday activities – for example household tasks, socialising or managing money – which affects someone for their whole life. People with a learning disability tend to take longer to learn and may need support to develop new skills, understand complex information and interact with other people.

- **Locked and unlocked rehabilitation services:** is a whole systems approach to recovery from mental illness that maximises an individual's quality of life and social inclusion by enhancing skills, promoting independence and autonomy in order to give them real opportunity for the future that may lead to successful community living through appropriate support.

The service provides high levels of therapeutic care underpinned by evidence-based practice in keeping with industry norms, where this is published or is custom and practice. This will include a comprehensive assessment of the needs of the individual in order to devise an individualised treatment programme that will address social, physical, intellectual and mental health needs within a specific and measurable care plan, regularly collated and reviewed through the CPA framework.

The maintenance of a safe, sound and secure environment for all is paramount. It is expected that the level of security will be based on individual patient need, the responsibility to protect others, and/or prevention of harm to self. Service delivery will take account of patient diversity, meeting the needs of gender, cultural and religious diversity through policies and practices that positively respect the patient's gender, cultural, religious and spiritual preferences.

- **Low and medium secure hospitals:** Low secure provision provides a care and treatment environment for individuals who present a less physical danger to others. Security arrangements should impede rather than completely prevent those who wish either to escape or abscond. Low secure provisions will have a greater reliance on staff observation and support rather than physical security measures. Low Secure Services are not Psychiatric Intensive Care Units. Low Secure services should emphasise access to community services, and promote a philosophy of community integration. Medium secure provision provides a care and treatment environment for individuals who present a serious but less immediate danger to others. Physical security with security protocols and procedures, supported by high levels of staff should be sufficient to deter all but the most determined to escape or abscond. These environments should meet the needs of those who are not yet ready for leave into the community, but with an emphasis on graduated use of community facilities when possible. Each secure mental health provider will ensure, through the Care Programme Approach process that each individual patient will receive high-quality care and treatment which meets their needs and supports their recovery.
- **Mental health condition:** Mental health problems range from the worries we all experience as part of everyday life to serious long-term conditions.
- **NHS clinical commissioning groups:** NHS organisations set up by the Health and Social Care Act 2012 to organise the delivery of NHS services in England.
- **NHS England Specialised Commissioning:** Specialised services are those provided in relatively few hospitals, accessed by comparatively small numbers of patients but with catchment populations of usually more than one million. These services tend to be located in specialised hospital trusts that can recruit a team of staff with the appropriate expertise and enable them to develop their skills.
- **Quality of life:** the standard of health, comfort, and happiness experienced by an individual or Group.
- **Rehabilitation:** Intensive rehabilitation support for people with severe and enduring mental health problems, in a community setting. Service users are supported to engage in recovery

focused interventions which include: practical assessment of activities of daily living; tenancy support needs; family education and interventions; symptom management and treatment; medication education and management; developing wellness recovery plans; community engagement.

- **Respite care:** Can mean short term residential care – where the person you care for goes to stay in a care home or other residential setting for a short time; getting more paid help at home – this could be via paid workers helping with care or getting more help with tasks around the home; getting someone to keep the person you care for company whilst you go out - sitting and befriending services; doing something you enjoy; the person you care for taking part in activities outside the home taking a holiday with or without the person you care for.
- **Secure hospitals:** The NHS or private organisations run secure hospitals. If you are in a secure hospital, you will usually be under a section of the Mental Health Act. Secure units are gender specific so there will be separate wards for men and women. There are adolescent units too, for people under 18 years. There are different levels of secure hospitals - low, medium and high security.

Do you need any further help?

We can provide versions of this document in other languages and formats such as Braille and large print on request. If you need this document presented in another format please telephone 0121 611 0611.

Dudley CCG
Sandwell and West Birmingham CCG
Walsall CCG
Wolverhampton CCG.

