

## HEALTH AND WELLBEING BOARD

2 FEBRUARY 2017

### TRANSFORMING CARE PLAN UPDATE

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#### Summary

This report provides an update to the report presented to the Health and Wellbeing Board on 3 November 2016. The Kent and Medway Transforming Care Partnership (TCP) Plan 2016-2019 was submitted to NHS England (NHSE) in May 2016 and refreshed and re-submitted in November 2016. The Plan, which included a Kent and Medway Executive Summary, Risk Register and Finance and Activity Template, as well as separate Kent and Medway local Transforming Care (TC) plans, were accepted.

Medway's inpatient figures are increasing. We do not yet fully understand the reasons for the upward trend, although it appears that the lack of forensic outreach and adult ASC provision and Tier 4 CAMHS pathways may be contributing to admissions. Transformation grants received this year and a bid for next year address these concerns.

A TCP Finance Plan was required to be submitted to the NHSE Regional Team by 18 January 2017. A Business Case was also required by 18 January to detail how and when cost and responsibility will move through the system over the remainder of the three year TC programme.

#### 1. Budget and Policy Framework

- 1.1 This matter falls within the policy framework for each of the statutory agencies represented on the Health and Wellbeing Board in respect of duties to people with learning disabilities and their families and carers, including safeguarding responsibilities. The Health and Wellbeing Board's interest is in relation to the leadership role that Health and Wellbeing Boards can undertake in ensuring that the core principles in the national Transforming Care model are achieved locally.
- 1.2 Transforming Care Plan aligns with the Medway Council Plan 2015-16 as well as Medway CCG's Operating Plan 2016/17.

## 2. Key Issues

- 2.1 TCP plans were submitted in May 2016 year and were supported by NHSE. TCPs then refreshed their original plans in November, following the establishment of Milestone reports, the publication of financial framework guidance, revised patient trajectories and discussions with regional and national teams to clarify local priorities.
- 2.2 At the beginning of January, The Kent and Medway TCP reported a figure of 83 inpatients, including 16 Medway patients, (including Tier 4 CAMHS) as described in the table below. The TCP is required to reduce this total figure to 57 or below, by March 2017 (the refreshed trajectory, submitted in November 2017 does achieve this figure). The latest figures are as follows:

| CCG/<br>Type    | Thanet    | SKC      | Can'y<br>and<br>Coast | Ash'd    | Swale     | DGS      | West<br>Kent | Med       | Totals    |
|-----------------|-----------|----------|-----------------------|----------|-----------|----------|--------------|-----------|-----------|
| CCG LD          | 6         | 1        | 5                     | 0        | -         | 3        | -            | 3         | 18        |
| CCG<br>ASC      | -         | 3        | -                     | -        | 2         | -        | 3            | -         | 8         |
| NHSE<br>LD      | 6         | 0        | 5                     | -        | 6         | 6        | 8            | 11        | 42        |
| NHSE<br>ASC     | -         | -        | 1                     | -        | 1         | -        | 4            | -         | 6         |
| Tier 4<br>CAMHS | -         | 0        | 1                     | 1        | 2         | 0        | 3            | 2         | 9         |
| <b>Total</b>    | <b>12</b> | <b>4</b> | <b>12</b>             | <b>1</b> | <b>11</b> | <b>9</b> | <b>18</b>    | <b>16</b> | <b>83</b> |

While the total figure for the TCP has reduced slightly, the figure for Medway has increased from the figure of 11 reported at the Health and Wellbeing Board in November. We do not have a clear understanding yet of why the Medway figure is increasing. The pathways review mentioned in the summary above, which will be undertaken by the NHSE National Improvement Team, will highlight blocks and gaps in our pathways and gaps in our provision (when mapped against *BRS*). A report with findings from the review will be produced by the Improvement Team and this will provide us with key information regarding what measures will be required in Medway to avoid admissions where possible.

- 2.3 Until recently, the development and delivery of TC in Kent and Medway had focussed on gaining a better understanding of our inpatient cohort and what their needs might be going forward as well as what kind of community provision will be required to support discharges from hospital and avoid further admissions.

### 2.4 TCP Finance Plan

Since mid-December the focus has widened to include detailed finance planning and modelling. A TCP Finance Plan was required for submission by 18 January 2017. The Plan includes figures of current and projected inpatient bed numbers and associated costs and is structured around 7 'Key

Ingredients' outlined in finance planning guidance supplied by NHSE. The TCP has been required to submit a self-assessment RAG-rating on the 7 Key Ingredients which are, at present, mostly rated amber. Please see Appendix 1 for the RAG rating and Kent and Medway TCP Finance Plan.

- 2.5 Our finance plans are not complete at present, and there are some gaps, such as our understanding of transitional costs, which have been highlighted in the plan, with milestones attached to explain when we expect to complete these sections. Analysis of Spec Comm cases is also required and a request has been made for support in this area.
- 2.6 The introduction of a Finance Plan requirement by NHSE at short notice has not allowed for the draft plan to go through our established governance processes. Therefore, agreement has been sought by the Kent and Medway TC SROs and Deputy SROs and by the Medway TC Finance Lead. A Finance Sub-Group is currently being established, led by the CFO of W Kent CCG to oversee the development of the Finance Plan (and the Business Case outlined below).
- 2.7 Support with the development of the Finance Plan has been provided by expertise from the SE Commissioning Support Unit (CSU).

## **2.8 SE Hub Business Case**

A key element of the Finance Plan is a Business Case proposal that outlines how and when responsibilities and funding will shift from Spec Comm to TCPs over the next two years as patients are discharged from inpatient facilities and move to community settings. Kent and Medway have been asked by NHSE to work together with Surrey and Sussex TCPs to form a SE Hub for planning purposes. The aim of the Hub arrangement is to support planning and delivery of provision that will meet the needs of the regional population. For example, a small number of medium secure and low secure beds may be required by each TCP but it would be more costly for each TCP to commission their own facility rather than share existing beds in the Hub area.

- 2.9 The Business Case has been developed by the Hub TCPs and Spec Comm and was due to be submitted on 18 January along with TCP finance plans. Please note that the Business Case had not been agreed for circulation at the time of papers being prepared for this meeting.
- 2.10 The Business Case sets out how people and the associated responsibility and funding, will move from inpatients settings, commissioned mainly by Spec Comm, to community based settings commissioned by LAs and CCGs. The basis of the Business Case is that money will shift from Spec Comm to the TCPs following sustained discharges of patients. This will be done with the agreement that the TCPs will:
- Support discharged patients in the community and meet their needs
  - Spend a proportion of the transferred funding on delivering the community provision required to avoid future hospital admissions
  - Fund any future admissions to Spec Comm beds

2.11 The Business Case includes current and projected levels of medium secure, low secure and locked/rehab beds across the Hub area, with associated costs and proposals for what savings are available to transfer across to the TCPs once patients are discharged and beds are closed.

2.12 The assurance required for funds to be released to the TCP that will need to be in place in Kent and Medway are:

- Transformation Fund bids including the Forensic Outreach Service in Kent.
- Service specifications to include clear requirements regarding how services will work together to avoid hospital admission.
- A Complex Care Response (not currently in place in Medway).
- A Discharge Planning Group, to plan ahead for each discharge.
- Workforce development to ensure the workforce has the skills to support complex cases in the community.
- Plans for housing needs.
- A LD/autism commissioning plan in Medway to ensure service provision meets the needs of the population in the light of Transforming Care.

2.13 Both the Finance Plan and the Business Case require agreement from all TCP partners. Medway has a TC Finance Lead (Finance Performance Manager, Medway CCG) who is liaising with the TCP Finance Lead and who will attend the Finance Sub-Group currently being established.

2.14 Plans submitted in May included bids for Transformation Fund grants to address the service gaps identified this year. Grants are for one year and there will be additional opportunities to bid for grants for 2017/18 and 2018/19. Grants awarded for 2016/17 are as follows:

| <b>Project</b>            | <b>Kent, Medway or TCP</b> | <b>Grant</b> |
|---------------------------|----------------------------|--------------|
| Complex Case Coordinator  | Medway                     | £85,000      |
| Adult ASC Support         | Medway                     | £29,000      |
| Adult ASC Support         | Kent                       | £93,000      |
| Adult ASC (capital grant) | TCP                        | £450,000     |
| Forensic Outreach         | TCP                        | £71,000      |

2.15 Transformation Fund grant bids for 2017/18 include:

- A KCC bid for an enhanced ASC service
- A Medway bid for a Young People’s Challenging Behaviour Service

### **3. Options**

3.1 The NHSE Improvement Team will be undertaking a Medway service review as part of the package of support available to the TCP following Fast Track status being awarded.

3.2 Options will be determined once service review is complete and findings reported.

#### **4. Advice and analysis**

- 4.1 The Medway Transforming Care Plan represents an important opportunity to improve services for people with a learning disability and/or autism, behaviour that challenges and mental health.
- 4.2 A collaborative approach with TCP partners in Kent, and with other TCPs in the South East and Specialised Commissioning will support development and delivery of TC plans as well as constructive dialogue with NHSE.

#### **5. Engagement activity**

- 5.1 As described in the Medway TC plan, and below in Section 7, a consultation exercise, and a simultaneous stakeholder engagement exercise and service review is taking place in 2017/18.
- 5.2 The TC Coordinator post in Medway was scaled down from four to two days per week in September, due to financial constraints, which has led to a delay in the start of the consultation.

#### **6. Risk management**

- 6.1. The Kent and Medway TCP Milestone Report includes a detailed risk register (see Appendix 2).

#### **7. Consultation**

- 7.1. Due to the short timescales for the initial submission of TCP plans in May, consultation was limited during the development of the local plan, but included direct input from the Learning Disability Partnership Board, the Young People's Disability Group and The Parent and Carer Forum.
- 7.2. A full consultation on learning disability and autism services in Medway is now planned to commence in 2017/18, commencing in April. The consultation will be led by the Partnership Commissioning Support and Consultation Manager and will include events for all stakeholders, including providers, service users and their families and carers, as well as a questionnaire to capture the views of as many people as possible. All feedback and comments will be recorded and considered. A report will be produced which will inform future planning and strategy.

#### **8. Financial implications**

- 8.1 A Kent and Medway Finance Plan and Business Case (with Sussex TCP, Sussex TCP and Spec Comm) was due to be submitted on 18 January 2017.
- 8.2 A Finance sub-group is being established, led by the West Kent Chief Finance Officer, to oversee the development of Finance Plans. Engagement from Medway finance leads from the local authority and Clinical Commissioning Group will be required and local financial governance agreed.
- 8.3 Agreement from all TCP partners is required to implement the Finance Plan and Business Case.

- 8.4 If sustained inpatient discharges are achieved and admissions are reduced, then funding associated with inpatient beds will move to the CCG and LA to pay for care packages and to provide additional community services. However, the breakdown of what proportion of these funds will pay for LA aftercare costs, CCG aftercare costs and the development of community provision will need to be discussed and agreed locally.
- 8.5 Financial planning and modelling will be refined during February and March and more precise figures will then be available regarding:
- The level of funding that will flow through the system to Medway following the discharge of Medway patients from specialist hospital beds.
  - The expected cost of supporting these patients in the community for the LA and the CCG.
  - How community provision will need to develop to ensure further admissions are avoided.
  - Any transitional costs that might be incurred.
- 8.6 As stated in the Finance Plan, some 'transitional costs' may create cost pressures in 2017/18 and 2018/19 due to patients being discharged from block contract beds. Further discussions with NHSE and Spec Comm are required to pinpoint costs and how these costs are to be met.
- 8.7 The Kent S75 pooled budget will provide the main vehicle for inpatient funds to move to the TCP as no mechanism exists in Medway at present.
- 8.8 Project management for the programme of work in Medway is currently funded until March 2017 at two days per week. Due to the increasing scale of the programme, two days per week may not be sufficient to coordinate TC work in Medway in 2017/18 and additional resources may be required to expand this post.
- 8.9 A new contractual arrangement for the Mental Health of Learning Disability Team is being developed to commence on 1 April 2017, following a change to the current joint arrangement with North Kent CCGs when they join a new Alliance Contract led by KCC.

## **9. Legal implications**

- 9.1. Medway Council has a legal obligation under section 149 Equality Act 2010 to have due regard to the need to eliminate discrimination, advance equality, and foster good relations between those with a protected characteristic (pregnancy and maternity, age discrimination, disability, gender reassignment, marriage and civil partnerships, race, religion or belief, sex and sexual orientation) and those who do not share it. It must encourage people from protected groups to participate in public life and other activities where their participation is disproportionately low. In order to comply with these equality duties, the Council is required to engage with service users and representative groups, and to use the information and views gathered to assess the equality impact of any proposals made by the Council in relation to service provision.

## **10. Recommendations**

10.1. It is recommended that the Health and Wellbeing Board:

- (i) Considers how the Health and Wellbeing Board can promote and engage with this important agenda going forward, to offer support, feedback and leadership to ensure the successful implementation of the Medway Transforming Care Plan and support the Council and CCG to comply with statutory duties.
- (ii) Agree for a progress report to be presented to the Board in 3 months' time, including an update on the Finance Report and Business Case.

### **Lead officer contact**

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### **Appendices**

Appendix 1 Kent and Medway TCP Finance Plan, January 2017

Appendix 2 Milestone Report Risk Register

### **Background papers**

1. *Building the Right Support*, LGA, ADASS & NHSE, October 2015
2. *Supporting people with a learning disability and/or autism who display behaviour that challenges, including those with a mental health condition – Service Model for Commissioners of health and social care services*, LGA, ADASS & NHSE, October 2015
3. *BRS Finance FAQ update*, LGA, ADASS & NHSE, September 2016