

# Agenda Item 7

		<b>THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE</b>	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of Lincolnshire Partnership NHS Foundation Trust

Report to	<b>Health Scrutiny Committee for Lincolnshire</b>
Date:	<b>11 July 2018</b>
Subject:	<b>Future Model of Service Provision of Specialist Health Services to People with a Learning Disability</b>

## Summary:

This report provides the full feedback from the targeted engagement events held with the public and patients to discuss the proposals for changes in the Learning Disability (specialist health) services run by Lincolnshire Partnership NHS Foundation Trust (LPFT).

The report also shares the summary output from a survey of all of the staff in LPFT on the proposed service changes.

## Actions Required:

To provide feedback and advice to Lincolnshire Partnership NHS Foundation Trust on the outcomes of the engagement exercise on the future model of service provision of specialist health services to people with a learning disability in Lincolnshire.

### 1. Background

On 11 October 2017, the Health Scrutiny Committee approved a decision for Lincolnshire Partnership NHS Foundation Trust (LPFT) to commence a period of targeted engagement with the public, patients and staff about the model of service provision of specialist health services to people with a learning disability in Lincolnshire. This decision followed the temporary closure of the learning disability in-patient service at Long Leys Court in Lincoln in July 2015, which was operated by LPFT.

To provide a service whilst this inpatient service was temporarily closed, four community teams and a central (24/7) team have operated on a county wide model. These teams provide community facing health services to people with learning disabilities and their families. In addition there is an assessment (only) service for people with Autism in place.

The policy driver nationally for Learning Disability services is a best practice framework called Transforming Care, which sets new standards for the delivery of health care to this group of people.

## **2. Results of the Targeted Engagement**

Five targeted engagement events have been completed to gain feedback and views about the move to a community based model of service for people with Learning Disabilities.

The five events included an additional event, requested by the LPFT Council of Governors, for an event in Skegness.

The events and attendance were as follows, with 72 people involved: -

- Grantham 6th February 2018 – with 13 people attending
- Spalding 7th February 2018 – with 6 people attending
- Boston 21st February 2018 – with 10 people attending
- Lincoln 6th March 2018 – with 26 people attending
- Skegness 21st March 2018 – with 17 people attending.

The attendees included a significant proportion of patients and carers. The sessions were open meetings and were widely publicised. Attendees who joined the meetings were a mixture of patients, carers, staff members from LPFT, staff from partner agencies and staff who work for other providers in Lincolnshire.

A number of LPFT staff contributed to the sessions as either provider of the existing services or for general interest purposes as employees of LPFT. A member of Healthwatch Lincolnshire was present at each event.

Ideally more people would have been present at the sessions – however 72 people is a good number of interested people in our experience for mental health events.

The people leading the sessions were Fionn Morven, Service Manager Learning Disability Service; Linda O'Hara, Head of Patient and Public Engagement; Laura Suffield, Engagement Support Officer; Diane Hansen from South West Lincolnshire Clinical Commissioning Group; and Jane Marshall, Director of Strategy.

In addition an online survey was issued to all staff based in Lincolnshire Partnership NHS Foundation Trust to elicit their views about the proposed service change.

We would like to thank those patients, carers and staff that gave their time to attend the engagement events, which were very constructive and positive sessions, and to record their opinions in the staff survey.

Explicitly the engagement exercise confirmed that moving to a model of inpatient care for people with Learning Disabilities is not the preference at this time.

This is due to the fact that national best practice advocates a community service; that staff who are delivering the new community model of service report it is an improved service and also that there is a reported patient satisfaction rate of above 95% on the community facing model.

This has meant that the clear statements made from LPFT colleagues leading the sessions were that re-opening inpatient beds is not the proposal at this time.

Appendix A gives the unabridged feedback collected from each event.

This collection of data was done by two main methods: first through verbal questions in response to explanations about the previous service model and the new; and group work and second through encouraging people to record their thoughts in writing as part of the event.

All information and feedback is reported faithfully to ensure that the Board of Directors is fully sighted on all that was said at the events.

The structure of the events was: -

- Introduction about what the service change is and the background;
- Description of the service model and what it means for patients and carers who access it/how to get a service/access to mainstream services and the structure and make-up of the community teams;
- Presentation of a video with a patient describing his experience of Transforming Care;
- Group work to discuss what is good about the service and what could be better;
- Question and answer sessions and networking.

The main themes from the feedback from the engagement events were: -

- There was support for the move to community based services;
- There was support for the Community Home Assessment and Treatment Team (CHAT) that is a 24/7 service that is dedicated to a rapid response and preventing the need for admissions;
- There was no objection to moving to a community based model of service;
- One person registered concern about the lack of beds for people with a learning disability in Lincolnshire should they need one – however this person caveated this by saying this was a concern about people having to travel long distances to access an inpatient bed;
- There was significant concern about gaps in services for people with Autism and their carers' and families;

- There was concern that services should be more integrated and seamless;
- There was consistent concern that more was needed to signpost people to services and to integrate/connect service providers together;

There was concern about transitions of care between different services and agencies.

- There was concern about people having to tell their stories over and over again to different providers;
- There was concern about a lack of carer support and carer breaks.

Appendix B outlines the summarised feedback from the staff survey. All LPFT staff were asked to complete the survey and given access to it. The total number of responses from staff was 43.

The main themes from the staff comments were: -

- The majority of respondents were supportive of the new model;
- There was significant concern about gaps in services for people with Autism; and
- There was a small number of respondents who expressed concerns about the new model and other aspects of the service.

A communication and feedback on these results has been given to staff and further consideration is being given by the Specialist Services Division Management Team as to what if any further follow up work is required with the staff groups.

### **3. Healthwatch Lincolnshire**

Feedback from the Healthwatch Lincolnshire Patient Experience Committee was that they were broadly supportive, whilst noting that the number of people involved in the engagement events was just 72 and expressing concern about planning for transition to adult services and a lack of services for people with Autism/Autistic Spectrum Disorder.

### **4. Conclusion**

The results of the engagement events support the move to a community based model of service on a permanent basis.

At this time the feedback received supports the move to permanently close the inpatient Learning Disability service and move fully to the community model. At each session (except for the Skegness session when the mix of people in the room was mostly service users and the format of the meeting was slightly different) the Director of Strategy for LPFT explicitly asked about views on the permanent closure of the inpatient service.

No objection to this was voiced at the engagement meetings with the exception of one person who had not got an objection to the community based model but queried what would happen if a bed was needed.

In the past the Health Scrutiny Committee has expressed concern about out of area patients. There will always be a small number of highly specialist placements needed for people who have to move out of Lincolnshire for their care. This was always the case and will continue to be the case. It would be neither safe nor effective in terms of use of resources to have a very small number of inpatient beds remain in Lincolnshire.

Through this report, LPFT is asking for advice from the Health Scrutiny Committee on the outcome of the engagement exercise. LPFT officers would welcome an early resolution on this service given the fact that the inpatient service has been temporarily closed for nearly three years.

The level of investment in the community service is £5 million and is broadly the same amount as that which was invested in the inpatient unit. Commissioners in clinical commissioning may see a reduction in the amount of money being spent on out of area admissions as admissions avoidance improves.

The Board of Directors at LPFT received the full information contained in this report at the meeting of the board, held in April 2018. There was no publicity following this meeting and the full report is available on the Trust website at [lpft.nhs.uk](http://lpft.nhs.uk)

## **5. Consultation**

This report presents the outcomes of an engagement exercise on the model of service provision of specialist health services to people with a learning disability in Lincolnshire.

## **6. Appendices**

These are listed below and attached at the back of the report	
Appendix A	Feedback from the Notes Taken at the Learning Disability Engagement Events in February and March 2018.
Appendix B	Transforming Care in Learning Disability Services - Staff Survey January 2018

## **7. Background Papers**

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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