

## **Cover Sheet Learning Disability Programme Board Papers**

### **Report to Learning Disability Programme Board Meeting**

#### **Date of meeting**

19 November 2013

#### **Attachment number: LDPB (13)35**

#### **Title of paper**

Updates on the 7 post Winterbourne View workstrands and Communications

#### **Summary**

This paper summarises the key achievements in each workstrand and the key milestones for the next 6 months.

#### **Action required / recommendation**

FOR INFORMATION AND DISCUSSION

LDPB members are asked to:

- note key points
- say if you agree with what the reports say
- say if you think anything is missing or you have concerns

# **Learning Disability Programme Board Meeting 19<sup>th</sup> November 2013**

## **Key actions and milestones progress update**

### **Background**

1. This paper summarises the main progress made since the last Programme Board meeting in July. It includes:
  - A summary of key achievements in the last period
  - A high level plan and milestones for 2013
  - Progress update reports for each workstrand
  - Proposals for measuring outcomes for each workstrand

### **Project governance**

2. There is work underway to review governance of the JIP, including appointment of a full time programme director.

### **Progress on the programme actions**

3. We have a table of all programme actions by workstrand theme, which will be available at the Programme Board meeting. This sets out by theme, all the actions in *Transforming care* and actions in the Concordat which are identified separately. These are “living documents” and are updated on a regular basis. We have not circulated the table because it is too detailed and complicated. Some hard copies will be available at the meeting and we are always happy to send the latest version to Programme Board members in between meetings.

### **Detailed reports**

4. Progress updates for the 7 workstrand themes are attached. These are grouped to help keep track more easily:
  - Right care, right place (including JIP)
  - Regulation, inspection and corporate responsibility
  - Good practice, standards and advocacy

- Information and Data
- Medication, positive behaviour support and physical intervention
- Workforce
- Children and transition

5. No reports are reported as green or red overall. All are either Amber/Green or Amber

6. These reports are rated as amber/green:

- Good practice, standards and advocacy
- Medication, positive behaviour support and physical intervention
- Workforce
- Children and Transition
- Information and data

A horizontal rectangular box with a blue border and a gradient background from orange on the left to green on the right. The text "Amber/Green" is centered in white.

Amber/Green

7. These reports are rated as amber:

- Right care, right place (including Joint Improvement Programme)
- Regulation, inspection and corporate responsibility
- Communications

A horizontal rectangular box with a blue border and an orange background. The text "Amber" is centered in white.

Amber

The ratings refer to progress on key deliverables not outcomes. Proposed measures to capture longer term outcomes are below. The Forums and Mencap will develop proposals for the Board meeting in February.

### Summary highlights

8. Key activities since July include:

- Development of enhanced quality assurance programme to assess quality of reviews and make sure people who were at Winterbourne View are safe. A more detailed report from NHS England is attached separately.
- Full Local Stocktake report published in October
- Joint LGA, DH and NHS England letter to commissioners on developing community-based provision on 1 Oct
- Completion of consultations on CQC's new regulatory approach and registration requirement on fitness of board members

- Joint Health and Social Care Self Assessment Framework launched in August
- Learning disability census undertaken on 30 September
- Ministerial roundtable on restraint held on 20 August
- Consultation on scope of review of use of medications completed in October

### **Priorities for the next period**

9. Planned activities for the next period include:

- Follow up work to make sure all people who need care reviewed have been identified
- Plans are in place to move people to community based support
- JIP Deep Dives with some local authorities
- Consultations on (i) requirements for registration with CQC including duty of candour for all providers, and (ii) fit and proper person test for Directors
- Work on Advocacy Quality Performance Mark and Code of Practice to move to new organisation
- Publish data from Learning Disability Census in December
- Consult on draft key performance indicators and pilot KPIs in December
- Report from Joint Health and Social Care Self Assessment Framework data collection in December
- Consult on guidance on positive behaviour support in December
- Develop *positive and safe* programme, to reduce restrictive practices in mental health and learning disability services
- Progress report on actions in *Strengthening the Commitment* by December

10. Board members may want to note progress on the EQAP, Learning Disability Census, timetable for consultation on corporate accountability, Work on advocacy and the positive and safe programme, which aims to reduce restrictive practices across mental health and learning disabilities beyond the Winterbourne View programme

# Proposals for rating outcomes

**(R)ED = OFF TRACK**

**(A)MBER = TAKE CARE**

**(G)REEN = ON TRACK**

## 1. Right Care, Right Place (including WV JIP)



- For everyone inappropriately in hospital to be supported to move to community based support. There are quality care and support services locally based on the model of good care

## 2. Regulation, Inspection and Corporate Accountability



- Stronger accountability and responsibility of providers, and their management, for quality of care. Tighter regulation and inspection of providers

## 3. Good Practice, Standards and Advocacy



- Improved quality and safety so that best practice in learning disability services becomes normal practice. Good information and advice, including advocacy, is available to help people and their families

## 4. Information and Data



- Transparent information and robust monitoring to deliver transformed care and support and to make sure the public, people with behaviour that challenges and families know whether we are making progress

# Proposals for rating outcomes

## 5. Medication, Positive Behaviour Support & Physical Intervention



- Improved quality and safety so that there is better understanding of good practice and positive behaviour support and the environment so that challenging behaviour and the need for physical restraint are reduced. Antipsychotic and antidepressant medicines are used to ensure the best course of action for the patient and not over-used

## 6. Workforce



- Improved quality and safety through better capability of the workforce so that staff are properly trained in essential skills supported by good clinical and managerial leadership. Health and care professionals understand and are supported in achieving minimum standards and aspire to best practice. Members of staff feel it is safe to raise concerns when things go wrong and are listened to

## 7. Children & Transition



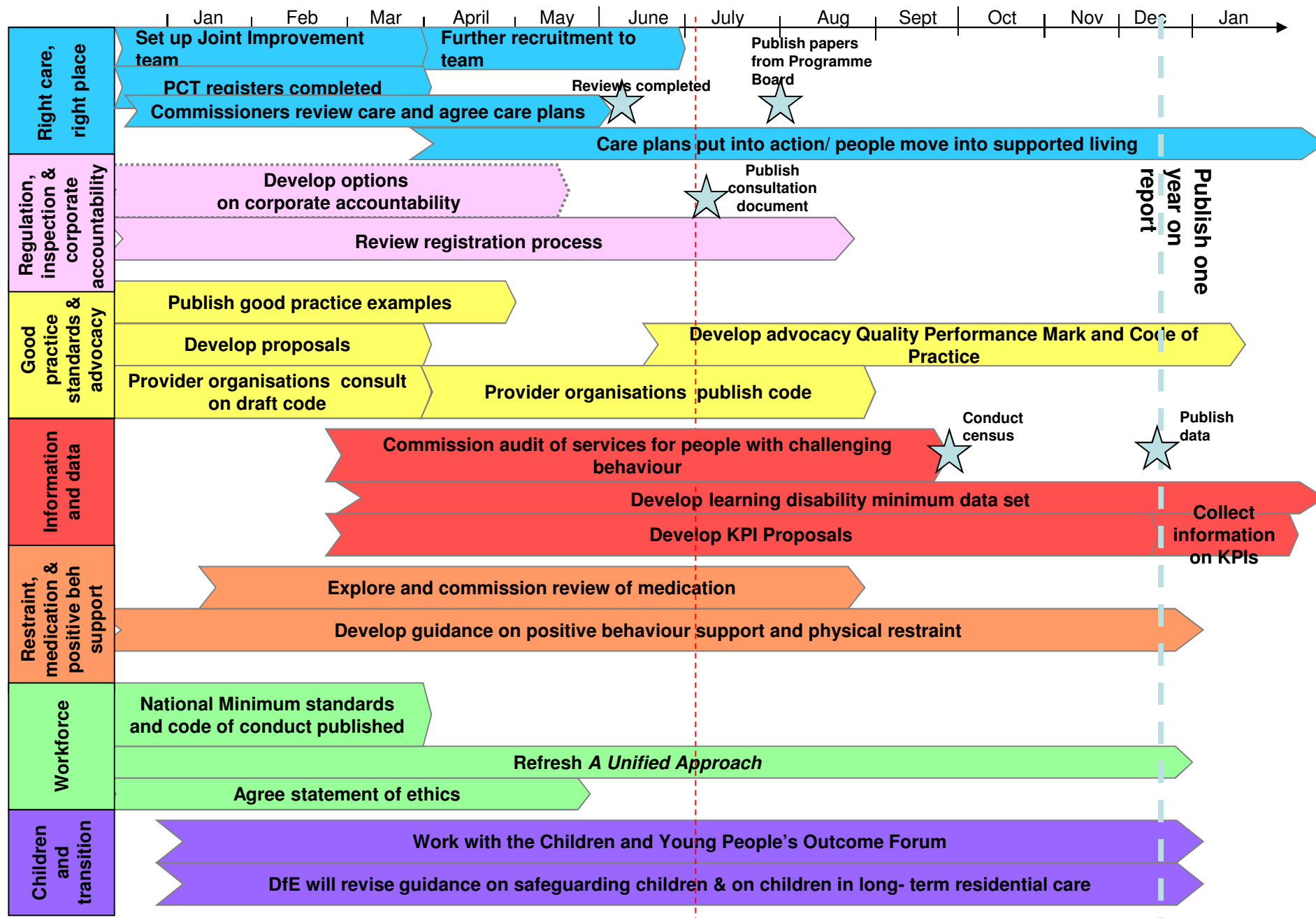
- There is integrated support to vulnerable children and young people with special educational needs (SEN) and/or safeguarding concerns. This includes early help where possible, supported by multi-agency inspection where possible

## 8. Communications



- Key stakeholders know about actions taken in response to Winterbourne View, key milestones and intended achievements
- Progress is clear (based on experiences of people with learning disabilities, autism and behaviours which challenge) across the programme of work and also show where more needs to be done. We spread best practice and also challenge the sector where necessary

# Post Winterbourne View – Key actions and key milestones 2013

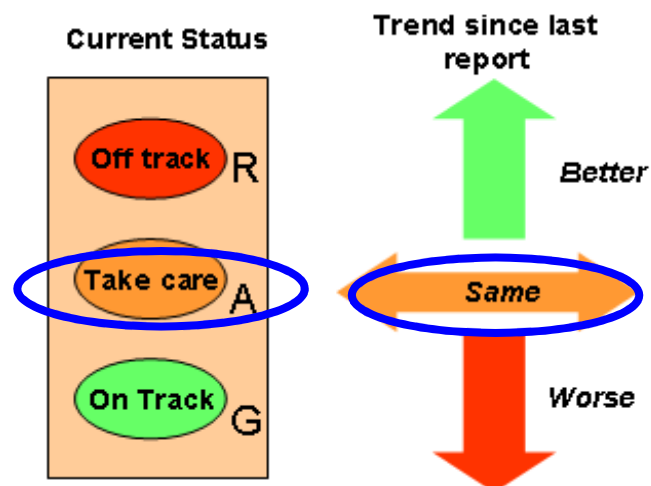




Department  
of Health

## PROGRAMME WORKSTRAND 1 : RIGHT CARE, RIGHT PLACE (NOVEMBER 2013)

Workstrand leads: Sam Cramond, NHS England & Joint Improvement Programme (LD Team: Zawar Patel)



Key Actions this period	Lead	Status
(18) A-D: Model service specification – adults developed, all-age being developed as per (19) - NHS Contract schedules – completed - CQUINs draft model CQUINs developed - SAF framework rolled out – data collection underway	NHS England, JIP	Green
(19) Service specifications for adults completed	NHS England	Amber
(30) CQC to share information, data and details they have about providers with the relevant CCG, local authorities and Joint Improvement Programme	CQC	Green
(20) Royal College of GPs and Royal College of Psychiatrists produce guidance on commissioning	Royal College JC Panel	Green
(21) Produce guidance on use of different inpatient services	Royal College of Psychiatrists	Green
(42) Commissioners to review care of all people in learning disability or autism inpatient beds and agree personal care plans for all based around their and their families' needs and agreed outcomes [Now includes developing enhanced quality assurance programme]	NHS England	Amber
(67) Co-produce resources to support health and wellbeing boards on specific aspects of Joint Strategic Needs Assessments (JSNAs) and Joint Health and Wellbeing Strategies (JHWSs). Final draft ready for sign off.	DH, JIP, NHS Confederation, LGA	Green

## Main Achievements

### Joint Improvement Programme

- Developed enhanced quality assurance programme (EQAP) to assess quality of reviews, ensure former residents of Winterbourne View are safe, and share good practice (42)
- Local Stocktake final report published in October (42)

### Supporting commissioning

- Engagement with CCGs, specialised and secure services to get information on registers and reviews
- Joint DH, LGA and NHS England letter (1 October) about development of community based provision

## Next Period

### Joint Improvement Programme Plans

- Appoint new leadership for JIP
- Triangulate NHS England data from CCGs and secure services with information from the learning disability census. Follow up where care reviews still need to take place
- Deep dives in Local Authorities following Local Stocktake

### Other

- Engagement events with providers following census
- Embed EQAP and share information with Quality Surveillance Groups





**High level summary of aims:**

Reviewing placements and supporting everyone inappropriately in hospital to move to community based support. Locally agreed plans to ensure quality care and support services based on the model of good care.

**What was delivered since last report?**

- Local stocktake report
- Royal College of Psychiatrists report
- Development of enhanced quality assurance programme to follow up development of registers and care reviews

**What are the overdue delivery objectives, and why?**

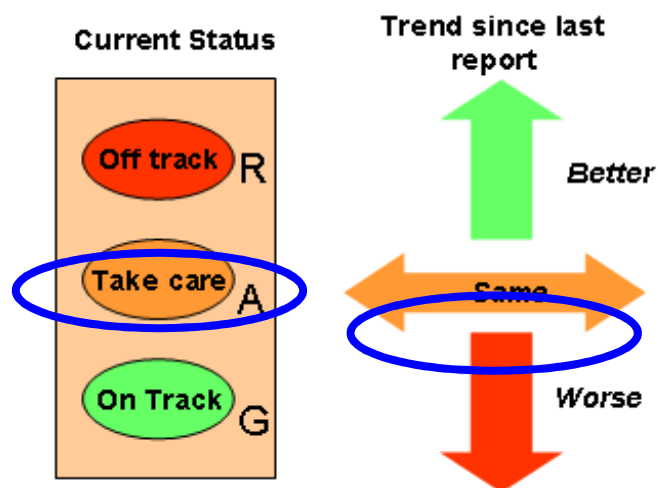
None. There will be a clearer understanding of more work needed on care reviews after triangulation of learning disability census data with NHS England and JIP data.

**What are the key milestones in the next six months?**

Most people identified in care reviews moved to community based support (June 2014)  
Learning from enhanced quality assurance process.

**Risks and Issues**

People identified by the census who have not had their reviews.  
Enhanced quality assurance process identifies poor quality of reviews.  
People moved to inappropriate settings without proper consideration of their needs.  
Lack of information on what is happening



Key Actions this period	Lead	
(29) CQC continued programme of inspections and enforcement action – ensuring model of care is part of inspection and registration	CQC	Green
(40) Examine how corporate bodies, Boards of Directors and financiers can be held to account for poor care including: regulatory and criminal sanctions, CQC powers, fit and proper persons test for board members	DH	Amber
(68) Review regulatory requirements for criminal records checks and provider requests for criminal record certificates	DH	Green

## Main Achievements

- CQC completed consultation on new regulatory approach, to change the way it inspects services for people with learning disabilities and improve systems and checks when providers apply to register with CQC;
- Completion of consultation on proposal for new registration requirement on the fitness of directors.

## Next Period

- DH to consult on draft requirements for registration with CQC including new fundamental standards and a duty of candour on all providers (autumn 2013)
- DH to publish response to corporate accountability consultation and to consult on draft registration requirement to put in place a fit and proper person test for Directors (early 2014)
- CQC to continue to inspect adult care services for people with a learning disability



**High level summary of aims:**

Strengthen corporate accountability and responsibility of providers, and their management, for quality of care. Tightening regulation and inspection of providers.

**What was delivered since last report?**

Consultation on CQC's new inspection model. Consultation response published October 2013.

DH consultation on proposals to increase corporate accountability including a new registration requirement on the fitness of Directors. Responses now being analysed.

**What are the overdue delivery objectives, and why?**

Corporate accountability proposals delayed so they could be considered alongside response to Francis and new CQC approach. This work is now being taken forward to a longer timescale.

**What are the key milestones in the next six months?**

Consultation on draft regulations to set out fundamental standards (autumn 2013) and the fit and proper person test for Directors (early 2014). New regulations to be introduced in 2014.  
CQC to inspect mental health hospitals led by Sir Mike Richards (January 2014)

**Risks and Issues**

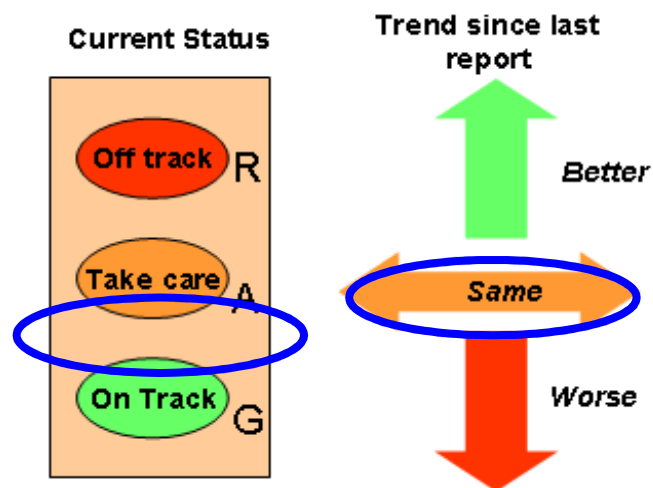
Fit and proper persons test may not prevent catastrophic care failures



Department  
of Health

## PROGRAMME WORKSTRAND 3: GOOD PRACTICE, STANDARDS & ADVOCACY (NOV 2013)

Workstrand lead: Anita Wadhawan (DH)



Key Actions this period	Lead	Status
(49) DH continues to work with independent advocacy organisations to drive up the quality of independent advocacy. This is being taken forward primarily through specific projects in actions (7) and (8) and the overall approach of the Care Bill.	DH Advocacy orgs	Amber
(8) Drive up the quality of independent advocacy, through strengthening the Action for Advocacy (A4A) Quality Performance Mark (QPM) and reviewing the Code of Practice for advocates to clarify their role. Interviews to identify the new organisation to take over A4A completed on 4 October. New organisation will be identified shortly. Some slippage to the timeline for this work is likely.	DH	Amber

### Main Achievements

(7) Inclusion North have developed a scope for work to provide people with learning disabilities good access to information, advice and advocacy in hospital.

(39) Joint work programme between LGA and Local Healthwatch England agreed. National Healthwatch implementation team in place and working with local commissioners.

(43) Provider organisations pledge/code based on Think Local Act Personal Making it Real principles was launched in September.

Care Bill amended to introduce a duty on local authorities from 2015 to provide independent advocacy where it is considered a person would experience substantial difficulty in being involved in their social care assessment, support planning or review.

### Next Period

(8) Transfer of QPM and Code of Practice to organisation identified to take over from A4A.

(44) Publish Good Practice project final report and disseminate by end of December 2013.

Care Bill - Development of draft regulation and guidance on advocacy for consultation by Spring 2014



**High level summary of aims:**

Improve quality and safety so that best practice in learning disability services becomes normal practice. Ensuring good information and advice, including advocacy, is available to help people and their families.

**What was delivered since last report?**

See progress on actions (7), (39) and (43) under main achievements.

**What are the overdue delivery objectives, and why?**

(8) Drive up quality of independent advocacy, by strengthening A4A QPM and reviewing Code of Practice for advocates to clarify their role. Interviews to identify an organisation to take over A4A completed on 4 October. New organisation identified and will be announced shortly. Some slippage to the timeline for transfer.

(44) The Good Practice Project final report is not yet published. DH is currently looking for an opportunity to launch the report before the end of the year. Some plans to align with JIP plans on dissemination of good practice

**What are the key milestones in the next six months?**

To ensure progress is maintained to deliver the actions on (7), (8), (49) and (39)

**Risks and Issues**

Good practice not embedded across all areas. Need to make sure linked closely with JIP work on what good looks like.

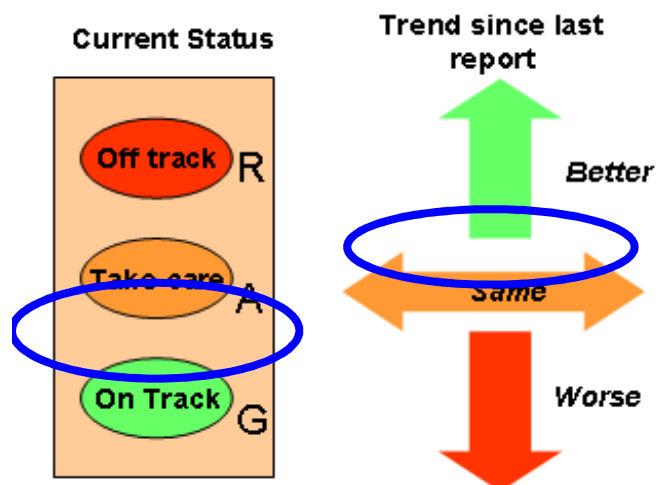
Further delay on starting work on the QPM and Code refresh following appointment of new organisation



Department  
of Health

## PROGRAMME WORKSTRAND 4 : INFORMATION & DATA (NOVEMBER 2013)

Workstrand leads: Zawar Patel DH, Sam Cramond, NHS England/Joint Improvement Programme



Key Actions this period	Lead	Current Status
(17) Commission audit of current services for people with challenging behaviour to take a snapshot of provision, numbers of out of area placements and lengths of stay. To be repeated 1 year on	DH	Green
(37) Develop measures and key performance indicators (KPIs) to support commissioners in monitoring their progress	DH, NHS England, HSCIC	Amber-Green
(38) Implement a joint self-assessment framework (SAF) to monitor progress of key health and social care inequalities and publish the results from local areas	NHS England, ADASS	Green
(52) Monitor and report on progress nationally, including reporting comparative information on localities - Initial stock take of progress of key Concordat commitments	DH, NHS England/LGA, JIP	Amber-Green
(61) Develop a new learning disability minimum data set to be collected through the HSCIC	DH, HSCIC	Amber

### Main Achievements

- Learning disability census (audit) completed. Data being analysed
- Joint Health and Social Care SAF implemented. Data collection ends on 30 November
- Local Stocktake undertaken and final report published in October

### Next Period

- Report census data in December. Triangulate with NHS England data
- Develop KPIs, consult with stakeholders and pilot them in early 2014
- Progress work on Mental Health and Learning Disability Data Set
- Address issues including aligning health, social care and education data



**High level summary of aims:**

Ensure transparent information and robust monitoring to deliver transformed care and support and make sure the public, people with challenging behaviour and families know if we are making progress.

**What was delivered since last report?**

Local stocktake report, learning disability census, Joint Health and Social Care SAF

**What are the overdue delivery objective**

KPIs and work on data set are not overdue yet, but are at risk of delay and mitigation is underway.

**What are the key milestones in the next six months?**

- Report census data. Triangulate this with NHS England and JIP data on registers and care reviews
- Report Joint Health and Social Care SAF data
- Develop, consult on and test KPIs
- Ensure all groups and all relevant data are included in progressing actions.

**Risks and Issues**

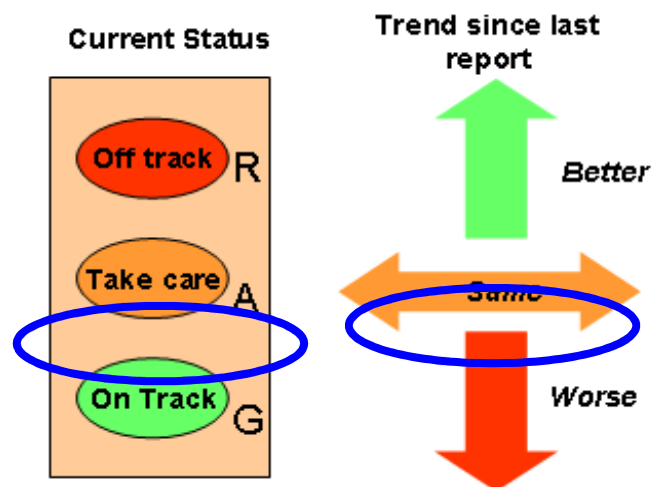
- Ensure approvals in place to allow sharing of data
- Delays in developing KPIs and Data Set
- Potential gaps in data, meaning lack of transparency on baseline data against which to measure progress and improvements
- Need to ensure alignment with other developments, e.g. in social care data



Department  
of Health

**PROGRAMME WORKSTRAND 5: MEDICATION, POSITIVE BEHAVIOUR SUPPORT & PHYSICAL INTERVENTION (NOVEMBER 2013)**

Workstrand leads: Nicola Guy DH and Ray Avery, NHS England



Key Actions this period	Lead	Status
(45) Explore whether there is a need to commission an audit of use of medication for this group. As a first stage, commission a wider review of the prescribing of antipsychotic and antidepressant medicines for people with challenging behaviour	NHS England	Amber /Green
(51) Ensure medicines are used in a safe, appropriate and proportionate way and their use optimised in the treatment of people all ages with challenging behaviour.	NHS England, RC Psych, Royal Pharmaceutical Society	Amber /Green
(53) Publish guidance on best practice around positive behaviour support so that physical restraint is only ever used as a last resort where the safety of individuals would otherwise be at risk	DH, RCN	Amber
(59) Update the Mental Health Code of Practice and take account of findings from this review	DH	Green

## Main Achievements

- (45) & (51) Medications: agreement on three pieces of work:
- Established collaborative in partnership with NHS IQ. Produced initial scope in September, consulted with stakeholders Sep-Oct.
  - Work with CQC on SOAD data on prescribing for antipsychotic and antidepressant medicines.
  - Analysis of data held by MHRA on prescribing for antipsychotic and antidepressant medicines.

(53) Work agreed to be taken forward by RCN led group. Separate work on commissioning training underway by Skills for Care and Skills for Health.

Ministerial roundtable on restraint held on 20 August.

## Next Period

(45) & (51) Launch of collaborative – final scope to be prepared for November.

(53) Draft ready for consultation by end Dec 2013

(59) Project team in place including steering group for Mental Health Code of Practice update.

Development of work programme “Positive and Safe” to reduce restrictive practices in learning disability and mental health services which goes beyond scope of *Transforming care* actions and governance.





### **High level summary of aims:**

Improved quality and safety to give a better understanding of good practice on positive behaviour support and the environment so that challenging behaviour and the need for physical restraint are reduced. Antipsychotic and antidepressant medicines are used to ensure the best course of action for the patient and not over-used.

### **What was delivered since last report?**

(45) & (51) NHS IQ in place to lead collaborative and improvement programme for medication.

(53) RCN led group of clinical professionals established and project managing refresh of PBS and restraint guidance including Expert Reference Group

General proposal for a wider programme of work to reduce restrictive practices in learning disability and mental health services – initial proposal put to stakeholders closed in October.

### **What are the overdue delivery objectives, and why?**

(53) Final draft now due in March 2014, but consultation and draft will be delivered by December 2013

### **What are the key milestones in the next six months?**

- RCN consultation – Dec 2013
- Mental Health Code of Practice consultation – Feb 2013
- RCN publication – March 2014
- Skills for Care & Skills for Health publication – March 2014

### **Risks and Issues**

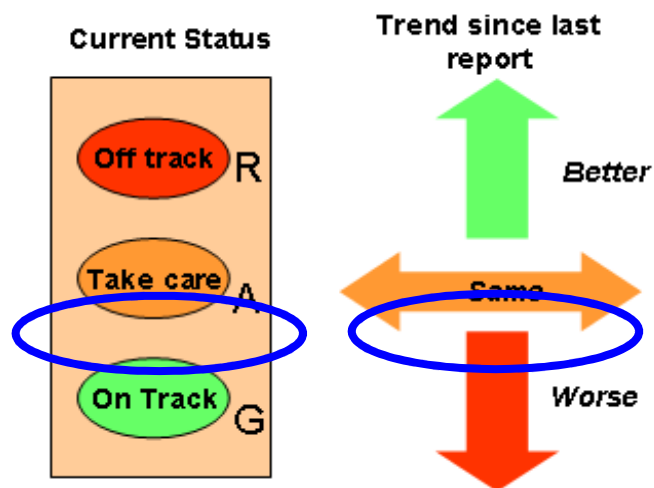
Linkages need to be made between projects to avoid any unintended consequences and duplication.



Department  
of Health

## PROGRAMME WORKSTRAND 6: WORKFORCE (NOVEMBER 2013)

Workstrand Lead: Anita Wadhawan (DH)



### Key Actions this period

### Lead

### Current status

(12) The Royal College of Speech and Language Therapists good practice standards for commissioners and providers to promote reasonable adjustments required to meet speech, language and communication needs of people will be published in November.

RCSLT

Green

(14) The Professional bodies that make up the Learning Disability Professional Senate will refresh *Challenging Behaviour: A United Approach* to support clinicians in community learning disability teams to deliver actions that provide better integrated services, likely to be published by Royal College of Psychiatry in December.

RC Psych  
LDPS

Amber/  
Green

(23) The Academy of Medical Royal Colleges and the bodies on the Learning Disability Professional Senate (LDPS) will develop core principles in a statement of ethics to reflect wider responsibilities in the health and care system. DH urgently following up with Royal College of Psychiatry and Academy on timescale for completion.

The Academy of  
Medical Royal  
Colleges & LDPS

Amber/ Red

(28) Health Education England (HEE) have taken on the duty for education and training across the health and care workforce And will work with partners to improve skills and capability to meet the needs of people. HEE are now on the LDPB. Discussions are on-going re inclusion of Winterbourne View element in the HEE mandate

Health Education  
England & the  
Department of  
Health

Green

### Main Achievements

(21) The Royal College of Psychiatrists published its guidance about the different types of inpatient services for people with learning disabilities and how they should most appropriately be used in July.

(10) The College of Social Work & British Association of Social Work have published a brief guide to good practice standards. A follow-up more in-depth guide is being developed and will be published later in 2013/14.

### Next Period

(12) RCSLT good practice standards for commissioners and providers to promote reasonable adjustments to meet speech, language and communication needs of people (November)

(54) Progress report on actions to implement recommendations in *Strengthening the Commitment* report of the UK Modernising Learning Disability Nursing Review (end 2013)

(23) The Academy of Medical Royal Colleges and the bodies on the Learning Disability Professional Senate will develop core principles on a statement of ethics to reflect wider responsibilities in the health and care system. Urgent follow up action underway with DH and RCPsych and Academy on timescale for completion.



**High level of summary aims:**

Improve quality and safety through improving the capability of the workforce. Staff are properly trained in essential skills supported by good clinical and managerial leadership. Health and care professionals understand and are supported in achieving minimum standards and aspire to best practice. Members of staff should feel it is safe to raise concerns when things go wrong and be listened to.

**What was delivered since last report?**

See progress on actions (10) and (21) under main achievements.

**What are the overdue delivery objectives, and why?**

(23) Ethics statement was due by 1 April 2013 – delayed. DH have an urgent follow up underway with the Royal College of Psychiatrists. The Academy has a framework in place for this work and is consulting on a final version now. DH is urgently discussing with Royal College of Psychiatrists and the Academy the revised timescale for completion and reasons for further delay.

**What are the key milestones in the next six months?**

To ensure progress is maintained to deliver the actions on (12), (23) and (54) as listed overleaf under reporting for the next period.

**Risks and Issues**

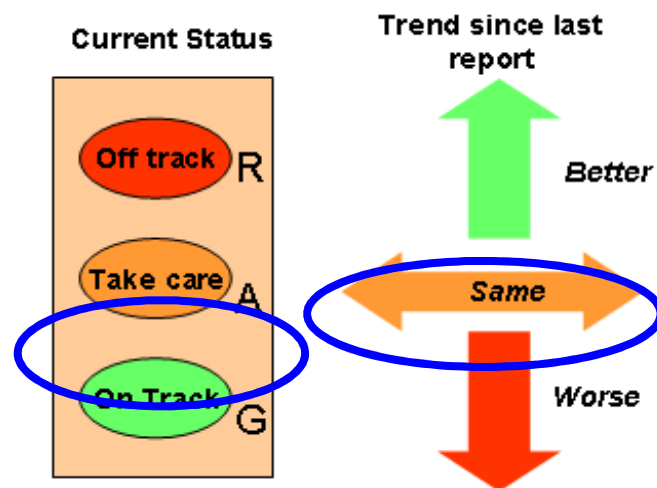
(21) Need to ensure professional bodies agree about key issues from Winterbourne View and products do not give confusing or mixed messages.



Department  
of Health

## PROGRAMME WORKSTRAND 7: CHILDREN AND TRANSITION (NOVEMBER 2013)

Workstrand leads: Helen Nix, DfE, and Colin Startup, DH



Key Actions this period	Lead	Current Status
(56) Special Education Needs (SEN) reforms to progress to Lords Committee stage by summer recess . Draft Code of Practice on SEN to be published for consultation Autumn 2013.	DfE/ DH	Green
(46) Children and Young People's Health Outcomes Forum to progress their work on outcomes for children with challenging behaviour (to report in September 2013).	DfE/ DH	Amber / Green
(47) Draft guidance for children in residential care to be shared with key stakeholders.	DfE/ DH	Green
(19) DH and DfE to continue working with NHS England, independent experts in the Children's Health Outcomes Forum and others on developing the draft service specification for children, young people and adults with challenging behaviour (to be published in 2013).	NHS England, ADASS, ADCS	Green
(74) DfE Ministers to continue discussions with Ofsted about taking forward multi-agency inspections on child protection issues.	DfE	Amber

### Main Achievements

- The SEN clauses of the Children and Families Bill are in Lords Committee. The Draft Code of Practice and regulations have been issued for public consultation.
- Draft service specification produced and widely discussed with relevant partners, with aim of publication in November.
- DfE and DH developing an engagement strategy to ensure CCGs and LAs are prepared for new arrangements.
- The National Network of Parent Carer Forums has produced guidance on transition outcomes for children at the request of the Children and Young People's Health Outcomes Forum
- Statutory guidance on long-term residential care shared with stakeholders.

### Next Period

(56) Children and Families Bill to receive Royal Assent in January 2013. NHS England engaging with CCGs on preparedness.

(47) Guidance for children in residential care to be published.

(19) Core service specification for children, young people and adults with challenging behaviour to be published in November ready for Local Authority/CCG 2014/15 planning.

NHS England to test and publish service specification for transition.



### **High level summary of aims:**

To deliver integrated support to vulnerable children and young people with challenging behaviours. This should include early and effective intervention with care co-ordinated around and tailored to the needs of the individual child or young person.

### **What was delivered since last report?**

(56) Code of Practice published for consultation. Pathfinders developing new approaches to SEN and promoting via Pathfinder champions and local engagement.

(47) guidance for children in residential care shared with CDC and comments incorporated.

(19) Draft of core service specification developed.

(75) Ofsted discussing with CQC potential for multi-agency / joint inspections of children with SEN.

Start of programme to develop the Disability E-Learning Portal by consortium led by RCPCG, to make available interactive online programmes to extend the skills and knowledge of all staff working with children and young people with challenging behaviour and disability.

### **What are the overdue delivery objectives and why?**

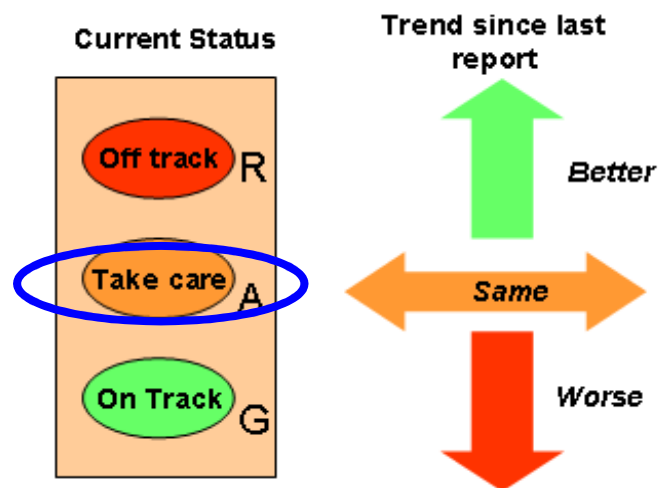
(46) Children and Young People's Health Outcomes Forum to progress their work on outcomes for children with challenging behaviour (to report in September 2013). Guidance on transition has been developed, but not formally endorsed by the Forum yet (although published); the Forum is considering additional recommendations in relation to this.

### **What are the key milestones in the next six months?**

- Children and Families Bill receives Royal Assent (January 2014)
- SEN code of practice finalised (Dec 2013)
- Publication of guidance for children in residential care and further CYP Forum advice (December 2013)

### **Risks and Issues**

- CCG readiness; local authority capacity.



## Main Achievements

- Comms supported:
  - WV session at NCAS
  - Local Stocktake
  - Concordat event

## Next Period

- Comms planning for one year one progress report



**High level summary of aims:**

- To inform key stakeholders of actions taken in response to Winterbourne View, key milestones and intended achievements
- Demonstrate progress (based on the experiences of people with learning disabilities, autism and behaviours which challenge) across the programme of work and show where more needs to be done, spreading best practice and challenge the sector where necessary

**What was delivered since last report?**

n/a

**What are the overdue delivery objectives, and why?**

n/a

**What are the key milestones in the next six months?**

- One year on progress report (December)

**Risks and Issues**

- Need to maintain close links between DH and comms lead for JIP. Propose regular meetings.
- There is a real need to keep close to what is happening on the ground and to the individuals who were at Winterbourne View. Risk can be mitigated via intelligence gathered through the JIP, media monitoring and close working with stakeholders.