

# Winterbourne View Review:

## *Concordat or Agreement Programme of Action*



**Easy Read version**



**DEPARTMENT OF HEALTH REVIEW:  
CONCORDAT or AGREEMENT-  
WINTERBOURNE VIEW**

**THIS AGREEMENT IS IN THREE PARTS:**

**1. INTRODUCTION**

**2. THE MOST IMPORTANT THINGS TO MAKE  
CHANGE HAPPEN**

**3. ALL THE ACTIONS THAT WILL HAPPEN**

**Words shown in blue are explained in the 'Difficult words used' section at the end**



**Learning Disability Professional Senate**

# 1. INTRODUCTION



What happened to people at Winterbourne View hospital was terrible.

People with challenging behaviour were getting the wrong kind of care.

This must stop.

But we also know there are places where things go right.



We (the people who have signed this agreement – who are in the list below) say that we will work together to make change happen.

This means services get better.

This will mean better outcomes for all people with challenging behaviour.



People often end up in hospital for a long time. Hospitals can be a long way from home. Hospitals are not homes and people should not live in them.

The actions in this agreement will mean fewer people in these hospitals by 1 June 2014.



We want people to have dignity and their rights supported in local services that are good. There will be fewer big hospitals.



Everyone has a part to play in making things better for **people with challenging behaviour**.

Everyone who has signed this agreement will work together to make change happen.



The **NHS Commissioning Board** is told by the Government what to do in a document called the **Mandate**.

The **Mandate** says that the **Commissioning Board** must make sure local NHS organisations (**Clinical Commissioning Groups**) work with councils so that **people with challenging behaviour** get good, safe services.

Services should be local.

There should be fewer people in hospitals.



We will work together to make change happen at national and local level.

**We will work with people with learning disabilities and families to make this happen.**

## 2. THE MOST IMPORTANT THINGS TO MAKE CHANGE HAPPEN

These are the actions for the **NHS Commissioning Board, Clinical Commissioning Groups**, councils and commissioners who buy health and social care working with **providers**, people with learning disabilities and families

Local health and care commissioners who buy services will look at everyone person **with challenging behaviour** who is in hospital now. If people do not need to be in hospital they will support them to move to community support by 1 June 2014. Before then if possible

**1 April 2013**

Each **Clinical Commissioning Group (CCG)** will have a list of all people with learning disabilities who have care paid for by the NHS. The list will say which council or **Clinical Commissioning Group (CCG)** looks after each person.

**1 June 2013**

By this date, each **person with challenging behaviour** in hospital will have a care plan. The care plan will be done working with the person and their family to make sure it is what they need.

**1 June 2014**

If the care plan says the person does not need to stay in hospital, they will be helped to move back into the community before 1 June 2014.





We want an advocate to support the person in hospital and their families in the right way so that they can move on.

**Every area will have a shared plan for good care and support services for people of all ages with **challenging behaviour****



**2014/15**

As part of the local annual plan for 2014/15, **CCGs** and councils will say what local health and care support services are needed to meet the needs of local children and adults with challenging behaviour.

From April 2014, the plan may be part of the **Joint Health and Wellbeing Strategy**.



Local people who buy services (commissioners) should have pooled budgets so that health and social care money is in the same place.

This is the best way to get things done.

Areas that do not do that will be asked to explain why not.





Contracts with providers of services will say clearly that services must be open, safe and good.

## There will be national leaders to support local change



The [NHS Commissioning Board](#) and the [Local Government Association](#) will start a new [development programme](#) of work. This will provide national leadership to change services locally.



The [Local Government Association](#) and the [NHS Commissioning Board](#) will work with key partners like the [Department of Health](#), [ADASS](#), [CQC](#), [providers](#), people with learning disabilities and families.

The new [development programme](#) will start by the end of December 2012.

## Planning good care starts with children



The [Children and Families Bill](#) will bring in a new single way to assess children. These are called [Education, Health and Care Plans](#).

This means good planning for children when they grow up.

The [Department of Health \(DH\)](#) will work with [Department for Education \(DfE\)](#) local organisations like [The Association of Directors of Adult Social Services \(ADASS\)](#), the [Association of Directors of Children's Services](#) and [The Local Government Association \(LGA\)](#) to help them to do this.



From June 2013, the different inspectors of prisons will bring in a new shared inspection for the protection of children in England.



The [DH Children and Young People's Outcomes Framework](#) says what is needed for children and young people to have good health and care.

## Making the care people get safer and better



DH says it will be law to have Safeguarding Boards for Adults. This is about keeping people safe. Everybody will make sure that safeguarding boards work to make everyone safe. Over the next year we will work to make the skills of the workforce better so that people get better care.

**Organisations and their Directors are responsible for care being good and they will be asked to explain and held to account for poor care**



DH will look at how directors and organisations can be held responsible when care is poor or there is harm to **people with challenging behaviour**.

DH will put together some suggestions to do this by Spring 2013.

**Laws about inspecting services will be stronger**



**The Care Quality Commission (CQC)** will use the law, or regulations, to make sure service providers are doing the right thing.

Without letting **providers** know first, the **CQC** will carry on inspecting hospitals and care homes. People with learning disabilities and family carers will be in the teams doing the inspecting.

**We will check to make sure services get better**






The **Learning Disability Programme Board**, which is chaired by the Minister of State for Care and Support, will check all the actions in this Agreement and report on what is happening.

## **The organisations who have signed the Concordat:**

Action for Advocacy  
Adults with Learning Disabilities Services Forum  
Association for Real Change  
Association of Chief Police Officers  
Association of Directors of Adult Services  
Association of Directors of Children's Services  
Autism Alliance UK  
British Association of Social Workers  
British Institute of Learning Disabilities  
Care Quality Commission  
Challenging Behaviour Foundation  
Changing our Lives  
Chartered Society of Physiotherapy  
College of Occupational Therapists  
Council for Disabled Children  
Department of Health  
English Community Care Association (ECCA)  
Health and Social Care Information Centre  
Health Education England  
Health Watch England  
Housing and Support Alliance  
Housing Learning and Improvement Network  
Independent Healthcare Advisory Services  
Learning Disability Professional Senate  
Local Government Association  
Mencap  
National Autistic Society  
National Care Association  
National Development Team for Inclusion  
National Forum of People with Learning Disabilities  
National Housing Federation  
National Institute for Health and Clinical Excellence  
National Quality Board  
National Valuing Families Forum  
NHS Clinical Commissioners

NHS Commissioning Board  
NHS Confederation  
Royal College of General Practitioners  
Royal College of Nursing  
Royal College of Psychiatrists  
Royal College of Speech and Language Therapists  
Royal Pharmaceutical Society  
Shared Lives Plus  
Sitra  
Skills for Care  
Skills for Health  
Solace  
The British Psychological Society  
The College of Social Work  
United Response  
Voluntary Organisations Disability Group

### 3. ALL THE THINGS THAT WILL HAPPEN

<p> <b>COMMISSIONING BOARD</b></p> <p><b>Local Authorities</b></p> <p> Local Government Association</p> <p><b>CLINICAL COMMISSIONING GROUPS (CCGs)</b></p> <p> adass adult social services</p> <p><b>The Association of Directors of Children's Services</b></p>	<p>These organisations will work together to make the actions in the list happen:</p> <ul style="list-style-type: none"><li>• Proper services are in place for <a href="#">people with challenging behaviour</a>.</li><li>• People in hospitals are in a safe place.</li><li>• To make plans for people who don't need to be in hospital to move to community settings.</li><li>• Funding is checked for people in hospitals to see if the best support is provided.</li><li>• Contracts with providers are checked so they meet the needs of <a href="#">people with challenging behaviour</a>.</li><li>• Everyone has a named care co-ordinator.</li><li>• Healthcare for people with learning disabilities gets better.</li><li>• People with learning disabilities and their families are included in planning services. They are asked what they think about them.</li><li>• Planning starts early for children so that they have a good service when they become adults.</li><li>• We want local authorities and <a href="#">CCGs</a> to work together to make these changes.</li><li>• Budgets for health and care are 'pooled' which means they are shared to make services better.</li></ul>
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## Providers

We will publish plans to help **providers** improve the quality of care across health, housing and social care as follows:

- We will choose people with the right skills to work with **people with challenging behaviour**;
- People who work with **people with challenging behaviour** will have the right training and the right managers;
- Leaders will respect people's human rights and treat everyone with respect;
- There will be the right things happening to check that services are good;
- There will be a senior manager in charge of quality, safety and how people get treatment;
- By April 2013 there will be a statement for learning disability **providers** to explain what good services are;
- We will work to reduce the number of people in special hospitals and get more local services.



An organisation that works locally on personalisation called **Think Local Act Personal** will work with **DH** to see what will help to get more local services and fewer hospitals by April 2013.



### **Care Quality Commission**

The list below shows all the things the **Care Quality Commission** will do to make things better for people with learning disabilities.



**CQC** will share information with local **CCGs** and councils when new services are planned.

**CCGs** and councils will take notice of **CQC** views when they think about placing someone with a **provider**.



**CQC** to use the law to make sure **providers** take notice of what is a good model of care and national guidance.

When there is one **provider** who has several services across a region or across England, **CQC** will put a manager in charge of the **provider** to check all their services are good.



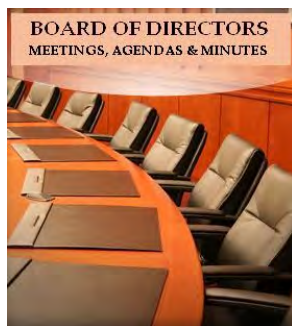
**CQC** will check if **providers** are providing the standard of care they said they would be doing when they first set up.

**CQC** will take tough action when **providers** do not have a registered manager in place or where they do not meet other standards.

**CQC** to see if they can carry out a test of board members as part of registration of **providers**. The test will be to see if they are the 'fit and proper' people to take on the job.

**CQC** will take action against **providers** who do not recruit people properly and make sure they have the right skills. The law says they must do this.

**CQC** will meet provider organisations if there are worries about quality and safety to see how things can get better.



The **CQC** stakeholder group that helped on the inspection of the 150 learning disability services will carry on meeting. This will happen twice a year chaired by the **CQC** Chief Executive.



**CQC** will improve the quality of inspections of services. This will include actions from the **Serious Case Review** about Winterbourne View and inspection of 150 hospitals and care homes.

**CQC** will make sure the model of care is used when registering and inspecting services from 2013.

**CQC** will continue do inspections of providers of learning disability and mental health services without telling providers first. They will include self advocates and families in the inspections.

**CQC** has learned from the inspection of 150 learning disability hospitals and will do different types of inspections when vulnerable people are involved.



**Skills for Care & Skills for Health**

We make people who work with people with learning disabilities more skilled.

We will make a code of conduct to say what behaviour is expected. We will improve training of supporters who work in healthcare and social care workers in England.



## Learning Disability Professional Senate

The **LD Professional Senate** is made up of professionals like GPs, Nurses and Psychiatrists who work closely with people with learning disabilities.

We will provide leadership and training of professionals so they understand the needs of people with learning disabilities.

The **LD Professional Senate** will work with **ADASS** and the **Association of Directors of Children's Services**

to make sure medicines are used in a safe and proper way to help people with learning disabilities.

We will look again at the guidance *Challenging Behaviour: A unified Approach* by December 2012 to make services better.

The Royal College of Nursing will work across the United Kingdom to do the actions in a report on learning disability nursing.

The College of Social Work will do some good practice guidance on working with people with learning disabilities.





### **The National Quality Board**

Will publish a report by April 2013 to say how the new health system will improve quality. The report will explain the different parts of the new system and how they should work together in the best interests of people using the services.



### **National Institute of Clinical Excellence (NICE)**

Will put together best practice guidance on learning disability and challenging behaviour and learning disability and mental health.



### **Healthwatch**

The 2012 Health and Social Care Act said that local **Healthwatch** must include local people, including the voice of people with learning disabilities.

**Healthwatch** will work with the **Department of Health** and the **Local Government Association** on how local **Healthwatch** will include people with learning disabilities and their families. One way to do this is to get Learning Disability Partnership Boards taking part.





## COMMISSIONING BOARD



### NHS Commissioning Board

The NHS Commissioning Board will support changes in services so that there are better outcomes for people with learning disabilities.

This will include working with **Clinical Commissioning Groups (CCGs)** to buy services for people with learning disabilities and behaviours that challenge.

We will provide the following for commissioners (people who buy services):

There will be a service plan, which is a guide to tell commissioners how to buy good services.

A new NHS contract for learning disability services.

There will be ways of rewarding good practice.

There will be a health and social care report to check progress locally.



We will look at the new NHS contract for learning disability services to see how to include **Quality of Health Principles**. These have been developed by people with learning disabilities to say how they want to be treated in hospital.



### **Association of Directors of Adult Social Services**

We will help members share best practice and work with **ADCS**, the **LGA**, **NHS CB** and **CCGs** on the following:



**ADASS** will make sure that all local authorities and local safeguarding partners, including the police and NHS organisations take action to make sure they have safeguarding boards and other arrangements in place so that they can deal with safeguarding alerts properly.

Adult Safeguarding Boards will check they have the right ways of sharing information across health and care to deal with problems.



### **Local Government Association**

The LGA will work with local Healthwatch, NHS CB, ADASS, ADCS, CQC and DH to support the programme of work to make things better over the next two years.



**The Department of Health** is in charge of the policy and law to do with health and social care. We will do the following additional actions so that there is a clear framework to improve quality, support change and check progress.



### Children and Transition (moving to being adults)

- The Government will set out actions to improve transition for children to adult services.
- DH will work with DfE on the single way to assess children and the **Education, Health and Care Plans**. This means children and young people get a package of support they need which are carefully planned.

### Improving commissioning (buying services)

- We will work to produce information to support health and wellbeing boards. We will see how to make sure that the boards have support to understand the needs of people with learning disabilities coming out of [Winterbourne View](#) review.
- We will work with key partners to agree by April 2013 how [Quality of Life Principles](#) can be used in social care contracts to make services better. These Principles have been developed by people with learning disabilities to say what they need from social care services.



### Safeguarding

We have already said that adult safeguarding boards will be based in law. The guidance and good practice will be revised and we will make sure this shows the findings of the different reports about [Winterbourne View](#) hospital.





### Physical Intervention

DH will work with key partners to make sure that physical restraint is only used when there is no alternative. They will look at how to work with people so that this does not happen. This is called positive behaviour support.



### Improving the Workforce

- We will work with [CQC](#) so that everyone is aware of people's human rights.
- We will update the Mental Health Act Code of Practice during 2014.
- We will do a progress report by end 2013 on actions in the UK Nursing Review.
- We will make sure organisations understand policies on [whistleblowing](#).



national forum  
of people with  
learning disabilities



### Improving the quality of care

- We will work with the National Valuing Families Forum, the National Forum of People with Learning Disabilities, [ADASS](#), [LGA](#) and the NHS to identify and promote good practice for people with learning disabilities across health and social care by June 2013.



### Advocacy

- We will work with advocacy providers to improve standards. We will work with Action for Advocacy to make their Quality Performance Mark stronger and check their Code of Practice.
- We will work with advocacy providers to decide what is needed for people with learning disabilities in hospitals.



### Challenging poor care and supporting service redesign

DH will pay for a new development programme. This will include [NHS CB](#), [LGA](#), [ADASS](#), [ADCS](#) and [CQC](#).

The idea is that the programme helps make services better by supporting local areas and spreading good practice.

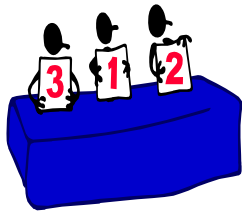


### Checking progress

The Department of Health will work with the [Health and Social Care Information Centre](#) and the [NHS Commissioning Board](#) to collect information on people with learning disabilities.

We will do a report each year.





We will also do a count of how many **people with challenging behaviour** are in services how long they are there and whether the service is local. This will include **assessment and treatment units** so we know what progress has been made in reducing numbers.

We will continue to collect other information about people with learning disabilities and report to the **Learning Disability Programme Board**.

**The Learning Disability Programme Board** will check progress and challenge people responsible for doing things.



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### **Forums and voluntary sector organisations**

We speak for people who use services, self-advocates and families.

We will ask public bodies to do what they say in this Agreement and let them know if they don't.

## Difficult words used:

<p><b>Assessment and treatment unit</b></p>	<p>An Assessment and Treatment unit is like a small hospital.</p> <p>Sometimes people go to assessment and treatment units when they are upset or disturbed or when there is a crisis and they are in danger of hurting themselves or other people. The unit helps people and find out what treatment they need.</p> <p>People who work there include nurses, doctors, psychologists and therapists.</p>
<p><b>Association of Directors of Children's Services</b></p>	<p>The Association of Directors of Children's Services Ltd (ADCS) is the national leadership association in England for statutory directors of children's services and their senior management teams.</p>
<p><b>Association of Directors of Adult Social Services (ADASS)</b></p>	<p>This an organisation made up of Directors of Adults Social Services. There is also an organisation for Directors of Children's Services.</p>

<p><b>British Institute of Learning Disabilities (BILD)</b></p>	<p>BILD is an organisation that supports people with learning disabilities and provides training, events, meetings, books and magazines for their members. They help spread good practice about people with learning disabilities.</p>
<p><b>CONCORDAT</b></p>	<p>This is another word for a written agreement that different people agree to.</p>
<p><b>Children and Young People's Outcomes Framework</b></p>	<p>The Department of Health wrote this to say what is needed for children and young people to have good health and care.</p>
<p><b>Clinical Commissioning Groups (CCGs)</b></p>	<p>A Clinical Commissioning Group (CCG) is the name for the new health commissioning organisation which will replace Primary Care Trusts in April 2013. Commissioning organisations are responsible for planning and buying of healthcare to meet the needs of people.</p>

<p><b>Care Quality Commission (CQC)</b></p>	<p>The Care Quality Commission makes sure there are good health services, and good social care for adults in England. They check up on services run by the NHS, local councils, private companies and voluntary organisations.</p>
<p><b>Education, Health and Care Plans</b></p>	<p>These are plans which mean there is good planning for children when they grow up and become adults. They cover important areas in one plan.</p>
<p><b>Forums and voluntary sector organisations</b></p>	<p>These are organisations like the National Forum for People with Learning Disabilities and the National Valuing Families Forum who speak for people with learning disabilities and the families who care for them.</p>
<p><b>Healthwatch</b></p>	<p>Healthwatch England is a national organisation from October 2012. Local Healthwatch will start in April 2013 to give a greater voice to people who live locally about health and social care.</p>

<p><b>Health and Care Commissioners</b></p>	<p>These are people whose job it is to purchase health and care services.</p>
<p><b>Health and Wellbeing Boards</b></p>	<p>The Health and Social Care Act 2012 set up health and wellbeing boards. They are a forum where key leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities.</p>
<p><b>Improvement Programme</b></p>	<p>Local government and the NHS Commissioning Board will work together to lead local change. They will do this through a new development improvement programme which will be set up by end December 2012.</p>
<p><b>Joint Health and Wellbeing Strategies</b></p>	<p>Joint Health and Wellbeing Strategies are to do with being healthy and feeling well. They are plans between different groups to make things happen locally.</p>

<p><b>Learning Disability Professional Senate</b></p>	<p>The LD Senate has professionals like GPs, Nurses and Psychiatrists who look after people with challenging behaviour.</p>
<p><b>Local Government Association (LGA)</b></p>	<p>The LGA works on behalf of councils to make sure local government has a strong voice in national government.</p>
<p><b>Mandate</b></p>	<p>The Mandate is a formal notice from DH to the NHS Commissioning Board that sets out the objectives for the Board to make care and healthcare better.</p>
<p><b>NHS Commissioning Board</b></p>	<p>This started as an independent organisation from 1 October 2012. It helps to set up Clinical Commissioning Groups (CCGs). It is part of the new health system and will take up its new work in full from April 2013.</p>
<p><b>Health and Social Care Information Centre</b></p>	<p>This is an NHS organisation that collects facts and figures about health and social care in England.</p>

<p><b>NHS Serious Untoward Incident Investigations</b></p>	<p>The NHS in the South of England carried out a special review of what happened at Winterbourne. They are also looking at what happened to patients at Winterbourne View after the hospital closed.</p>
<p><b>National Institute for Health and Clinical Excellence (NICE)</b></p>	<p>The National Institute for Health and Clinical Excellence (NICE) helps healthcare professionals and other make sure the care they provide is good quality and is good value for money.</p>
<p><b>People with challenging behaviour</b></p>	<p>When we say ‘People with challenging behaviour’ we mean people with learning disabilities or autism and who have mental health conditions or behaviour that challenges.</p>
<p><b>Providers</b></p>	<p>These can be organisations run by the Government, charities or private companies. They provide services for people with learning disabilities.</p>
<p><b>Personalisation</b></p>	<p>This means people having choice and control over the health and care they receive so their particular needs are met.</p>



<p><b>Quality of Health Principles</b></p>	<p>An organisation called Changing our Lives worked with people with learning disabilities to say how they want to be treated in hospital. The principles will be included in NHS contracts with providers.</p>
<p><b>Serious Case Review (SCR)</b></p>	<p>The local authority for Winterbourne View, South Gloucestershire Council, looked at what went wrong. They asked for reports from everyone like the NHS, the Care Quality Commission and Castlebeck Care.</p>
<p><b>Skills for Care &amp; Skills for Health</b></p>	<p>These organisations support the people who work in adult social care in England.</p>
<p><b>South Gloucestershire Council</b></p>	<p>This is the local council for Winterbourne View.</p>
<p><b>The National Quality Board</b></p>	<p>Is made up of stakeholders who make sure there is good quality right across the NHS. The Board is an important part of the work to deliver high quality care for patients.</p>

<p><b>The Department of Health</b></p>	<p>This is a Government Department in charge of the policy and law to do with health and social care.</p>
<p><b>The Department for Education</b></p>	<p>This is a Government Department in charge of policy and law to do with children and education.</p>
<p><b>The Learning Disability Programme Board</b></p>	<p>This Board includes people from Government Departments, organisations for people with learning disabilities, like the National Forum for People with Learning Disabilities, the National Valuing Families Forum and Mencap.</p>
<p><b>The Children and Families Bill</b></p>	<p>Once it has been agreed in Parliament, this Bill will be a law that brings one way to assess children. This is called a single assessment and covers education, health and social care.</p>
<p><b>Think Local Act Personal (TLAP)</b></p>	<p>Think Local, Act Personal is an organisation that works locally on personalisation.</p>

<b>Whistleblowing</b>	Whistleblowing is when a worker reports things they see at work they think are wrong to other organisations who can do something about it. DH has set up a Helpline to make whistleblowing easier.
<b>Winterbourne View</b>	This was a hospital run by a company called Castlebeck Care. The hospital was for people with learning disabilities, people with autism and people who may need support with their behaviour. The hospital is now closed.