

**CCG (Chief Executives,
Chief Operating Officers,
Medical Directors, Chief Nurses)**

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Copied to:
Transforming Care Partnerships SROs;
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By email

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Dear colleagues

Change in oversight arrangements for Quality of Inpatient Care for people with a learning disability and / or autism

As you will be aware, the Long Term Plan published in January this year reconfirmed our commitment to reduce the health inequalities faced by people with a learning disability, autism or both so they can live happier, healthier, longer lives.

As part of the plan to deliver this, we reiterated our ambition to deliver Transforming Care/Building the Right Support and reduce the number of people with a learning disability, autism or both in specialist inpatient settings, so that they can be a supported community. Since 2015, together we have made good progress: the number of people in hospital has reduced by more than a fifth, with thousands of discharges from hospital taking place and over 785 people who had been in hospital for over five years are now being supported in their community, and I would like to again express my thanks for your help in moving this agenda forward.

The Long Term Plan commitment to improving quality of inpatient care

We know that collectively there is still more for us to do to reach the ambition set out in the Long Term Plan and ensure that children, young people and adults with a learning disability, autism or both are supported in the community; but for those people that do require specialist inpatient care and treatment we must ensure that it is of the highest quality and closer to home.

The Long Term Plan quality of inpatient care commitments include:

- improving the quality of specialist inpatient care for all people with a learning disability, autism or both across the NHS and independent sector, with a specific focus on reducing the use of restrictive practice; and
- reducing the number of people that access specialist hospital care away from their own area



Changes in oversight arrangements: action to take now

We are writing to you today to inform you of some of the changes we will be making to deliver these commitments. As you will know commissioners of services are required to set clear expectations around the quality of care that should be provided within a specialist inpatient setting. They should ensure that there are robust and effective processes in place to identify any issues or concerns relating to quality, in line with Building the Right Support, and that these are acted on in a timely way.

Six or eight weekly out of area visits

For those individuals who are placed out of area – particularly children and young people and adults with a learning disability, autism or both, we want to ensure that they benefit from an enhanced level of oversight and focus on the quality and safety of their care.

The Secretary of State for Health and Social care has already announced that an early action needs to be ensuring that every person who is placed out of area has a minimum of a 6 or 8 weekly site visit from their commissioner (6 weeks for children and young people in a CAMHS Tier 4 setting, and 8 weeks for adults aged 18 or over with a learning disability, autism or both in an inpatient setting) – this must be additional to the CTR / CETR. This requirement was also set out in the Long Term Plan Implementation Framework.

It is expected that NHS England specialised commissioning teams and all Clinical Commissioning Groups (CCGs) will be making plans for local delivery of this commitment, to be fully operational not later than the end of December 2019.

For Specialised Commissioning, this requirement will be for all patients – irrespective of whether they are placed in or out of area – as is consistent with the Specialised Commissioning case manager Standard Operating Procedure (SOP).

CCG responsibility for new oversight arrangements

The Secretary of State also announced the expectation that, for CCG-commissioned inpatient care, the host CCG will take responsibility for the oversight of any issues relating to quality and safety from a commissioning perspective. We have engaged with CCG colleagues on this role and have developed a set of Frequently Asked Questions (Appendix One) that should support commissioners to put this into place. Whilst we develop further, more detailed guidance, we expect CCGs to be putting this arrangement into place with immediate effect, particularly where there are providers with quality concerns or with patients placed by multiple and dispersed commissioners.

Next Steps

NHS England and Improvement will work with regions, CCGs and specialised commissioning hubs to develop a commissioning quality toolkit, which will be available during Spring 2020. In December 2019, NHS England and Improvement will publish further guidance on:

- A framework for the 6 or 8 weekly site visits;
- Further, detailed guidance around the host commissioner responsibilities
- a refresh of the case manager Standard Operating Procedure for case managers within Specialised Commissioning;
- best practice guidance on the inclusion of people with lived experience in quality oversight arrangements;

The regional workshops that colleagues held in July have started the conversation about this work, and we look forward to your continued support in taking this forward.

If you have any questions, please contact your NHS England and Improvement Regional Lead(s) for Learning Disability and Autism. (Details are below).

Many thanks for your continued support in improving the quality of specialist inpatient care for people with a learning disability, autism or both.

Kind regards



Claire Murdoch

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