

CORNWALL REPORT

Issues raised by Report	Rotherham's Current Position	Any Action Required	Lead Officer	Timescale
<p>Vulnerable Adults:</p> <p>Instances of abuse which were serious had not been followed up by the Trust and Social Services properly (inpatients).</p>	<p>There are no people living long-term in hospital property – everyone is in supported living or residential care. All services are inspected by CSCI. Adult protection policy in place.</p>	<ul style="list-style-type: none"> ▪ Ensure there is a lessons learned policy in place following instances of abuse. ▪ Provide detail about adult abuse in report to Partnership Board annually, including details of what has changed as a result of investigations. 	<p>Sandra Grinnell</p> <p>Shona McFarlane</p>	<p>1.4.07</p> <p>Annually</p>
<p>Assessment and Treatment Units:</p> <ul style="list-style-type: none"> ▪ People did not have proper care plans. ▪ People whose behaviour challenged services received punitive or restrictive treatment. ▪ People stayed in Assessment and Treatment Units for a long time, eg over 18 months – they had, in fact, become long stay units. 	<p>Assessment and Treatment Unit:</p> <ul style="list-style-type: none"> ▪ Received an NHS Award in 2005 for quality of care planning. ▪ All staff are trained using BILD accredited training techniques. Minimal use of restraint. No use of seclusion. No use of mechanical restraint. ▪ 33 days average stay in Assessment and Treatment Unit in 2006. 	<ul style="list-style-type: none"> ▪ System of file audits in place, to be sampled by Director quarterly. ▪ Use of restraint to be reported to Board annually. ▪ Use of Assessment and Treatment Unit to be reported to Partnership Board annually using a detailed inspection format. ▪ Detailed inspection format based on national best practice and incorporating existing standards to be developed. 	<p>Sandra Grinnell Shona McFarlane</p> <p>Shona McFarlane</p> <p>Shona McFarlane</p> <p>Sandra Grinnell June Ashton Shona McFarlane</p>	<p>1.4.07</p> <p>Annually</p> <p>Annually</p> <p>1.7.07</p>

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<p>Supported Living Services:</p> <ul style="list-style-type: none"> ▪ Not registered with CSCI. ▪ Not meeting standards in Valuing People. ▪ Insufficient awareness of Social Services of needs of people in NHS care. ▪ Insufficient staff training. ▪ Service users and advocates not involved in plans. ▪ Problems with Children's Respite Units. 	<ul style="list-style-type: none"> ▪ All of the supported living services are registered with CSCI. Nobody is living long-term in unregistered accommodation. ▪ Services are commissioned by the Joint Service and are monitored through 2 monthly contract meetings (one provider). ▪ Not all tenants have had a review in last year. ▪ Rotherham has highest spend in country on advocacy – a key criteria for the RAP Service is advocacy for people who used to live in hospital. ▪ Service users and carers are involved in service planning and provision. Person Centred Planning and Health Action Planning in place. ▪ No NHS Children's Respite Unit. 	<ul style="list-style-type: none"> ▪ Ensure that service users receive person centred reviews and have a voice and influence within that review, including use of advocates where needed. ▪ Develop contract monitoring meetings with all providers to the same schedule. ▪ Target reviews to increase performance. ▪ Review Health Action Plans to ensure they focus on health improvements. ▪ Develop better links with RMBC and PCT Children's Services. 	<p>June Ashton</p> <p>Jan Leyland</p> <p>June Ashton</p> <p>Health Improvement Subgroup June Ashton</p> <p>Shona McFarlane</p>	<p>1.9.07</p> <p>1.7.07</p> <p>1.4.07</p> <p>1.9.07</p> <p>1.4.07</p>

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<p>Standards of Management:</p> <ul style="list-style-type: none"> ▪ Senior managers did not check the quality of services. ▪ Senior managers felt themselves not accountable for quality of Learning Disability Services. ▪ PCT did not commission a quality assurance service. ▪ Social Services not as involved as they should be. 	<ul style="list-style-type: none"> ▪ Inspection team (member of Public Health Team and CQP) visited the Assessment and Treatment Unit following Cornwall Report. No actions arose from this inspection visit. ▪ This attitude not apparent in Rotherham – see above action. ▪ Work is ongoing to ensure services are commissioned against needs and aspirations of service users in line with Valuing People. ▪ Joint Service provision ensures that services are focused on the individual in a person centred way. Working Together Subgroup (subgroup of Partnership Board) involves service users in checking quality of services. 	<ul style="list-style-type: none"> ▪ Construct an inspection questionnaire based on best practice which challenges the performance on the unit. ▪ System of regular reporting to Partnership Board, PCT Board and Elected Members to be developed. ▪ Commissioning strategy to be developed in line with Valuing People. ▪ Report to Partnership Board on annual basis. 	<p>Sandra Grinnell June Ashton Shona McFarlane</p> <p>Shona McFarlane</p> <p>Shona McFarlane</p> <p>Shona McFarlane</p>	<p>1.7.07</p> <p>1.4.07</p> <p>1.4.08</p> <p>Dec 07</p>

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<ul style="list-style-type: none"> ▪ The needs of people with a learning disability were not included in plans, including the Local Delivery Plan. ▪ Strategic Health Authority did not check Learning Disability Services when it checked other services run by the Trust. ▪ Services for people with a learning disability were under-funded and low quality. 	<ul style="list-style-type: none"> ▪ The Local Delivery Plan 2006 / 07 makes reference to the Learning Disability Service. Services for people with learning disabilities could have a higher profile in Clinical Governance Plan, etc. ▪ Not relevant. ▪ Rotherham Learning Disabilities have a high profile locally, Beacon Award 2006, Working Together Subgroup, recent profile within Neighbourhood and Adult Services. 	<ul style="list-style-type: none"> ▪ Clinical Governance and other frameworks within PCT and RMBC to be incorporated into a Joint Performance Management Framework, reported through Learning Disability Service Team Plan. ▪ Ensure systematic reporting of issues to Partnership Board. ▪ Commissioning strategy to identify need and bring resources into line. 	<p>Shona McFarlane</p> <p>Shona McFarlane</p> <p>Shona McFarlane</p>	<p>1.7.07</p> <p>1.4.07</p> <p>1.4.08</p>