

1. Introduction

1.1 This report has been prepared at the invitation¹ of Medway Council's Health and Adult Social Care Overview and Scrutiny Committee (HASC) to provide an update about the Kent and Medway Partnership NHS Trust (KMPT).

1.2 This report aims to update Members on current activities and priorities, successes, challenges and opportunities and to provide a reminder to Members of the current service provision in Medway.

1.3 This report will be presented under the following set of headings:

1.3.1 Current service provision – a reminder.

1.3.2 Current activities and priorities.

1.3.3 New initiatives and opportunities.

1.4 The Committee is asked to note the content of the report and provide comment.

2. Current service provision – a reminder

2.1 KMPT is commissioned to provide a range of inpatient, community and specialist services to younger and older adult residents of Medway. Some of these services are based in Medway; others are based outside of Medway and offer an in-reach provision to the residents of Medway.

2.2 **Appendix A** provides an outline of those services based in Medway.

2.3 **Appendix B** provides an outline of those services based outside of Medway that offer an in-reach provision to the residents of Medway.

3. Current activities and priorities

Care Quality Commission (CQC) inspection progress and improvements:

3.1 The CQC's comprehensive inspection in January 2017 rated the organisation as Good overall and Outstanding for Caring. At the end of 2018, the CQC undertook a Well Led inspection.

3.1.1

The full inspection report was published at the end of February 2019. Feedback from the CQC acknowledges that the Executive Team has led phenomenal improvements to quality of care: not only has a CQC warning notice in relation to adult community mental health teams been lifted, but the inspection of these teams as part of the 2018 well led inspection has seen the overall rating of this core service improve from *Requires Improvement* to *Good*. The overall Trust rating has remained *Good* but with noticeable improvements in forensic inpatient services which improved from *Good* to *Outstanding* overall and older people community mental health teams which improved from *Good* to *Outstanding* in their caring domain. No CQC domains have deteriorated since the last comprehensive inspection in 2017; improvements were noted in 9 domains.

Ratings for the whole trust

Safe	Effective	Caring	Responsive	Well-led	Overall
Good ↑ Nov 2018	Good ↔ Nov 2018	Outstanding ↔ Nov 2018	Good ↔ Nov 2018	Good ↔ Nov 2018	Good ↔ Nov 2018

¹ Email to Helen Greatorex, Chief Executive (KMPT) from Jon Pitt, Democratic Services Officer (Medway Council) dated 24 January 2019

Whilst as always, the CQC highlighted areas for improvement, their recognition of the significant progress made by KMPT since the last inspection was heartening.

3.1.1.1 *“Every member of staff we spoke to, without exception, spoke of how much the culture had improved since our last inspection in 2017”.*

3.1.1.2 *“Staff at all levels from a wide range of disciplines reported feeling proud of the care and treatment they provided to patients”.*

3.1.1.3 *“Staff were motivated and inspired to improve patient care in every way possible”.*

3.1.2 The organisation is focused on delivering Brilliant Care through Brilliant People and has welcomed the Commission’s recognition of our commitments to meet our promise.

3.2. **Ruby ward:**

3.2.1 Ruby ward is a 14 bedded female ward for older adults with mental health problems at Medway Maritime Hospital (Gillingham). The ward cares for people with both functional mental health problems and those with dementia. The unit was not designed as a mental health ward and the environment has long been recognised as being unfit for purpose with dormitory style bed areas and only two side rooms creating issues with privacy and dignity. As the ward is on the first floor there is no immediate access to outdoor space and access to fresh air is some distance away through the main hospital. The ward is also a standalone unit leading to isolation and limited access to mental health support when required.

3.2.2 The CQC feedback following the comprehensive inspection in 2017 stated that the ward does not meet compliance standards. A robust maintenance programme has been implemented and a review of capital works undertaken; capital investment is now in place to ensure essential improvement to the environment. This work has been out to tender and work is due to commence in the coming weeks.

3.2.3 The works include replacement flooring throughout, replacement ceiling, redecoration, replacement of internal glass, upgrade of sanitary ware, air conditioning installation, new LED lighting installed throughout, replacing and lowering the bath, and fitting anti ligature taps.

3.2.4 In order to safely undertake the works required the ward will need to decant into temporary accommodation within KMPT. The work undertaken will greatly improve the environment and reduce the risk of harm arising from health and safety incidents although a long term solution is still required to ensure that patients receive care in a modern environment that is fit for purpose.

3.3 **Medway hub:**

3.3.1 The new Medway hub, at Britton Farm Site, will provide a central accessible location for all services currently based at Canada House, Elizabeth House, A Block (administration corridor) and part of Magnitude. The project formed part of KMPT’s original Estates Transformation Programme. The estate at Britton Farm Site was identified through the Sustainability and Transformation Partnership (STP) and offered by Medway Council.

3.3.2 Good progress is being made by the project group to agree the internal layout of the building, expected to be signed off at the project meeting in February 2019. Some concerns about the external environment and the Council’s plans for improvement in the area are being discussed with the Council’s lead officer. The Council has prepared a works specification and will meet with KMPT’s capital project manager to agree that all appropriate standards have been detailed. Tendering of the building works will be completed in March 2019. Once all costs are confirmed and the commitment to lease agreed, building works can commence.

3.3.3 The works are expected to take six months and whilst they are being completed KMPT will continue to work with the Council to prepare for the move. Completion of the building works will lead into a six week period of commissioning when KMPT will have access to the building to complete data and telephone installations. A move to the new Medway hub is therefore expected to take place late in 2019 / early 2020.

3.3.4 A visit to another of KMPT's hubs, at Ashford, is being arranged for Councillors following the January 2019 HASC discussion. The Ashford hub replaced three sites in Ashford four years ago and has been a notable success. Its layout and design are similar to that proposed at the Britton Farm Site. A programme of consultation and engagement with KMPT's prospective 'neighbours' in the new location will be developed and led by the local service manager in advance of actual moves.

3.4 **Clinical Care Pathways Programme:**

3.4.1 KMPT launched its Clinical Care Pathways Programme in August 2018. The programme aims to develop and support the review and implementation of quality care pathways, expanding and developing the use of information management technology, and through a closer alignment of its built environment to the needs of services. These developments align with the national themes for the NHS as health and care systems are subject to increasing demand and downward financial pressure and are being taken forward through the development of a two year cost improvement plan, commencing in 2018/19 and being fully functional by the end of 2019. The programme will ensure that patient care remains the ultimate priority and focus and will draw on national work and pathways work completed in KMPT in 2016/17 to develop streamlined clinical care pathways affording efficacy and efficiency to meet a range of diagnoses. The programme is working with local clinicians, people that use services, carers, commissioners and local stakeholders to ensure developments meet local need in line with locality planning within the STP. In addition and as part of the Clinical Care Pathways Programme, KMPT is seeking to build more robust links with partners and third sector providers, such as Porchlight, Live It Well and Healthwatch, to ensure thinking is joined up and together, KMPT and its partners, deliver whole pathways that reduce the current fragmentation.

3.4.2 The Clinical Care Pathways Programme has three underlying principles: Right Pathways², Right Practice³ and Right Place⁴. The development of care pathways will ensure people who need mental health services get the right support and treatment at the right time and know what is going to happen for them for the duration of the time they receive services. Care pathways will support clinical staff to know what is expected of them and provide both staff and people using the service clarity on treatment and intervention options to ensure people recover as quickly as possible and / or maintain their wellbeing.

3.4.3 The Clinical Care Pathways Programme work is progressing at pace. A number of pilots have commenced across the county to test the change. In Medway one pilot has commenced, and second is due to commence in late spring / early summer 2019:

3.4.3.1 The **personality disorder change programme** pilot in Medway commenced in September 2018 for 8 patients (with staggered start times). It is a structured clinical management based intervention of 8 sessions over 8 weeks for people who are assessed. Evaluation will consider how the person was pre the programme, how they coped with the programme and how they are at the end of the programme.

² Right Pathways: Creating clear pathways of care for people, which provide evidence-based support and set out the journey that people can expect to make with KMPT - from assessment to recovery and onward care or discharge.

³ Right Practice: Creating clear pathways of care for people, which provide evidence-based support and set out the journey that people can expect to make with KMPT - from assessment to recovery and onward care or discharge.

⁴ Right Place: Working more flexibly and efficiently and minimising KMPT's investment in unnecessary buildings and offices, so that KMPT can support more people without compromising the quality and safety of the care it provides.

3.4.3.2 Medway CMHT has been identified as the next team to be trained in **initial interventions**, which provides individual treatment for people requiring secondary care mental health treatment through 4 x 1 hour sessions on a fortnightly basis. It is based on cognitive behavioural therapy and provides a guided self-help package focused on understanding difficulties, learning new coping strategies and coming away with a clear recovery plan. It is delivered by CMHT staff, predominately support time and recovery workers. Training and weekly group supervision is provided by psychologists. A pilot commenced in November 2018 at the South Kent Coast Community Mental Health Team. Up to 35 patients are in this pilot and the first 20 will be formally evaluated as the test for change. The formal evaluation is expected to commence in April 2019. Early feedback is impressive including high rates of staff satisfaction. Following successful evaluation roll out is planned across all CMHTs.

3.5 **St Martin's West (Canterbury):**

3.5.1 For completeness and clarity, Appendix C is the joint briefing written by Helen Greatorex, Chief Executive of KMPT and Caroline Selkirk, Managing Director of East Kent Clinical Commissioning Groups (CCGs) for NHS Improvement (NHSI) and NHS England (NHSE). It sets out in clear and simple terms, the background and next steps.

4. **New initiatives and opportunities:**

4.1 KMPT continues to welcome the opportunity to develop new initiatives and opportunities to deliver its vision⁵. To achieve this, KMPT is involved in a number of initiatives in partnership with other agencies:

4.2 **Urgent Care Response:**

4.2.1 A meeting between Mental Health and Urgent Care Commissioners and KMPT has taken place to discuss options for a mental health presence in the Urgent Treatment Centre. Original discussions had centred on an urgent care lounge being housed in the Urgent Treatment Centre for those service users who have been assessed by KMPT as needing inpatient assessment to wait until a bed is identified. There has however been significant improvement and reduction in the numbers of service users in the emergency department waiting for prolonged periods of time for a mental health inpatient admission. This is due to the implementation of KMPT's Patient Flow Strategy and patient flow matron. The need for a mental health urgent care lounge is therefore being reviewed in light of improved patient flow and significant reduction in 'stranded' mental health patients in the Emergency Department.

4.2.2 Individuals accessing the Medway Foundation NHS Trust's Urgent Treatment Centre or Emergency Department who are referred for a secondary care urgent mental health assessment would, however, benefit from an improved waiting space, which could be housed in the Urgent Treatment Centre. Discussions are taking place with regards to how this could be implemented.

4.3 **Mental Health Strategy, Five Year Forward View and the NHS Long Term Plan:**

4.3.1 KMPT remains an active partner in the STP and particularly in the Mental Health SPT Programme.

⁵

KMPT's vision is to create an environment within Medway and Kent where mental health is everyone's business, where every health and social care contact counts, where everyone works together to encourage and support children, their parents, young people and adults of all ages with a mental health problem or at risk of developing one to live in their own community, to experience care closer to or at home and to stay out of hospital and lead a meaningful life.

4.3.2 The Quarter 3 STP submission in January 2019 to NHSE showed that Medway is achieving 80% of the National Mental Health Strategy and Five Year Forward View delivery targets. This is subject to validation by NHSE in February 2019. The following summarises progress, achievements and challenges.

4.3.3 **Progressing well:**

4.3.3.1 **Improving access to psychological therapies:** Medway has exceeded the target for the number of people accessing the service and was quick to discover the reason for not achieving the recovery target. An investigation by the provider identified that a recent change in their analysts had led to an incorrect data submission; this has now been rectified for the next data submission. Medway exceeded waiting time targets with 96.7% of people receiving treatment within 6 weeks, and 98.3% within 18 weeks.

4.3.3.2 **Crisis resolution home treatment:** A best practice evaluation has been completed for Medway's Crisis Resolution Home Treatment Team. Clear messages were given by the team about the demands put on them by the wider emergency and urgent care system which detracts from their core function of assessing and home treating those who are acutely mentally unwell and who ordinarily would be admitted to hospital. Commissioners and provider representatives have heard the feedback and developed a service development improvement plan. This includes milestones and trajectories to ensure the crisis resolution home treatment team is operating with high fidelity to recommended best practice. It also includes establishing finance commitment by both commissioner and provider by 2020/21. This will be included in the 2019/20 KMPT contract and progress monitored.

4.3.3.3 Whilst crisis resolution home treatment provides an alternative to hospital for those who are mentally unwell, there needs to be alternatives for people who want urgent help with issues that cause them distress. For this reason the Mental Health STP Programme is progressing its urgent and emergency care workstream, where consideration of a range of options that allows people quicker access to advice, assistance or support. Often, causes of distress are linked to social not medical need (Citizens Advice 2015), which is why integration needs to also focus on social models of health as well as medical ones. Statutory duties set out in the Health and Social Care Act 2012 promotes integrated care, requiring improved quality of care and reduced inequalities in health.

4.3.4 **Biggest achievements are:**

4.3.4.1 **Suicide reduction:** Data published in November 2018 shows there has been a slight fall in the suicide rates in recent years. The 2015/17 rates in Medway fell to 9.7% and rates are falling faster in Medway than nationally. This fall has occurred during the same period as the implementation of the Kent and Medway Suicide Prevention Strategy 2015/20. During 2018/19 the implementation of the strategy has been boosted with £660K of additional funding from NHSE. This funding has been used to further roll out of the Release the Pressure social marketing campaign, training over 1,500 individuals in suicide prevention and awareness, strengthening high risk points in secondary mental health services and awarding 27 community projects funding through the Saving Lives Innovation Fund.

4.3.4.2 **Early intervention in psychosis:** 88.9% of people in Medway requiring early intervention of psychosis were able to access National Institute for Health and Care Excellence concordant care within two weeks of referral, and this is well over the national target of 53%.

4.3.5

Challenges:

4.3.5.1 **Maintaining the dementia diagnosis rate at 66.7% and improving post diagnostic care:** Medway is below target at 56.6% for diagnosing people with dementia. The Clinical Commissioning Group has developed a whole pathway action plan that engages with general practitioner surgeries, care homes, patients and carers, KMPT, Medway Foundation NHS Trust and community services. Collectively through the STP, health and social care commissioners and providers are also exploring ways to overcome the challenges with support from the South East Clinical Network.

4.3.5.2 **Introducing physical health checks to 50% of those with a severe mental illness who are well and under the care of their general practitioner only:** Medway Clinical Commissioning Group is hopeful of achieving this target and has planned a targeted approach of general practitioner surgeries to ensure health checks are carried out for those on the severe mental illness register and that each are recorded so achievement can be monitored.

4.3.6 **Mental health in the NHS Long Term Plan:** Mental health is one of the top priorities in the NHS Long Term Plan. Headline messages so far include:

4.3.6.1 **Tenacity of purpose:** The Mental Health Five Year Forward View, a current overarching national strategy for mental health, has two years remain: 2019/20 and 2020/21. The NHS Long Term Plan requires the STP to carry on and make good on all Five Year Forward View service priorities and deliverables.

4.3.6.2 Areas of difference between the two plans include the NHS Long Term Plan raising the bar on some existing Five Year Forward View commitments; adding new mental health service areas and standards and changing the context in which the health and care work to improve people's mental health is done. Changing the context includes the shift towards integrated care - integrating physical and mental health care and place-based systems and a focus on population health, including mental wellbeing and illness prevention. Also, there are specific resolutions for primary and community services and acute services.

4.3.6.3 **Investment to reduce the mental health care gap:** The NHS Long Term Plan intends to grow NHS investment in mental health services faster than the overall NHS budget in each year between 2019/20 and 2023/24. Further, that children and young people's mental health services funding will rise even quicker, outstripping the rate of growth in both overall NHS funding and total mental health spending.

4.3.6.4 The upshot is that mental health investment will be at least £2.3b higher a year by 2023/24. The new money must be visible in delivery of the Five Year Forward View and the NHS Long Term Plan mental health priority areas and standards and for the direct benefit of people who use mental health services. There will be special scrutiny of this, relating mental health spend, services activity and workforce. Clinical Commissioning Group mental health investment plans for 2019/20 will be subject to external review.

4.3.6.5 **Tackling the big issues for population mental health:** The burning ambition is to deliver world-class mental health care, when and where children, adults and older people need it. Among other things, the NHS Long Term Plan supports the following:

4.3.6.5.1 Children and young people: significantly more children and young people aged 0-25 years will access timely and appropriate advice and help via NHS-funded specialist mental health services and school or college based mental health support teams.

- 4.3.6.5.2 Expectant and new mothers with a mental illness and their partners: more women will access specialist perinatal mental health services and the period of care will be extended from 12 to 24 months after childbirth.
- 4.3.6.5.3 People experiencing a mental health crisis will be able to call NHS 111 and have 24/7 access to the mental health support they need in the community.
- 4.3.6.5.4 Adults with moderate to severe mental illness will access better quality care across primary and community teams, have greater choice and control over the care they receive and be supported to live a fulfilling life.
- 4.3.6.5.5 Fewer people will die by suicide.

5. Conclusion and Recommendation

- 5.1 KMPT is committed to playing its part as a system leader and driving up the quality of care it provides. Whilst it faces a series of challenges, it is clear about how to address them and believes in an open and collaborative approach.

APPENDIX A : SERVICES BASED IN MEDWAY

Type of service	Description of service
Acute (younger adult) services	
Crisis resolution and home treatment (CRHT)	Based at A Block, Medway Maritime Hospital (Gillingham), the Medway and Swale CRHT provides support at home 24 hours 7 days a week to those individuals aged 18 years and over experiencing mental health crisis and whom without support would require hospital admission
Liaison psychiatry	Based at Medway Maritime Hospital, the Medway Liaison Psychiatry service operates 24 hours a day 7 days a week and aims to provide mental health support to people admitted to Medway Maritime Hospital. The service works very closely with staff at Medway Maritime Hospital to allow a patient's mental health to be treated effectively alongside any physical health problems. The service is available to anyone over the age of 18, regardless of address, who attends the emergency department or is an inpatient at Medway Maritime Hospital and needs advice, assistance or a mental health assessment.
Community recovery services	
CMHT	Based at Canada House (Gillingham) the Medway and Swale CMHT provides services to adults of working age (18 to 65 years) with severe long term mental health needs.
Mental health learning disability (MHLDD)	Based at Canada House, the Medway and Swale MHLDD team provides services to adults of working age (18 to 65 years) with mental health learning disabilities.
Early intervention for psychosis (EIP)	Based at Canada House, the Medway and West Kent EIP service works with people aged between 14 and 35 years old who are experiencing their first episode of psychosis, and who have been experiencing symptoms for less than three years.
Inpatient rehabilitation	Based at Newhaven Lodge, Medway Maritime Hospital, the 8 bedded Newhaven Lodge Rehabilitation Unit is a mixed gender inpatient adult mental health rehabilitation unit. The rehabilitation team work with men and women who have experienced a relapse in their mental health, to promote recovery and support them to develop or regain skills for every day living.
Older adult services	
Inpatient older adult	Based at A Block, Medway Maritime Hospital, the 14 bedded Ruby Ward is a female only inpatient older adult unit for people suffering acute mental health challenges and experiencing dementia, depression, anxiety and psychotic conditions.
Community mental health service for older people (CMHSOP)	Based at Elizabeth House (Rainham), the Medway CMHSOP provides a service for people age over 65 years with both organic and functional presentations.
Forensic and specialist services	
Criminal justice liaison and diversion service (CJLD)	Based in the Medway Custody Suite, the Medway CJLD service ⁶ provides screening and assessment of individuals, of all age groups and vulnerabilities within the criminal justice system.
Chronic fatigue syndrome (CFS) / myalgic encephalopathy (ME) (pain clinic)	Based at Medway Maritime Hospital the pan-county service offers multidisciplinary assessment and treatment programmes for adults from 18 years with a diagnosis of CFS / ME.
Disablement services (prosthetics and orthotics) and environmental control services	Based at the DSC the pan-county Disablement and Environmental Control teams provide services to people with a permanent medical condition or severe physical disability by providing suitable equipment that can help with every day life. This includes providing electronic assistive technology equipment, on loan, to severely disabled people to enable them to live more independently in their homes.
Community brain injury	Based at Medway Maritime Hospital the Medway and Swale Community Brain Injury team supports people with non-progressive brain injuries between the ages of 18 and 65 years.

⁶The Medway CJLD team is one of seven operating pan-county; in addition to the team operating out of the Medway Custody Suite, teams operate from six other suites outside Medway.

APPENDIX B : SERVICES BASED OUTSIDE MEDWAY THAT OFFER AN IN-REACH PROVISION TO THE RESIDENTS OF MEDWAY

Type of service	Description of service
Acute (younger adult) services	
Section 136 suite	Based at Priority House (Maidstone), the 2 roomed suite offers a place of safety for those individuals on a section 136 awaiting assessment. Should the Maidstone suite be full, individuals can be taken to the 1 roomed suite at Little Brook Hospital (Dartford).
Inpatient acute	Based at Little Brook Hospital, the two 17 bedded (Amberwood and Cherrywood) and one 16 bedded (Pinewood) acute younger adult admission wards provide inpatient care with intensive support for patients in periods of acute psychiatric illness.
PICU	Based at Little Brook Hospital, the pan-county 12 bedded (Willow suite) PICU provides mixed gender facilities designed for short-stay treatment of patients with mental health problems requiring intensive treatment, care and observation.
Older adult services	
Inpatient older adult	Based at Darent Valley Hospital, the 16 bedded Jasmine Ward is a mixed gender older adult unit for people suffering acute mental health challenges and experiencing dementia, depression, anxiety and psychotic conditions.
Inpatient continuing healthcare (CHC)	Based at the Frank Lloyd Unit (Sittingbourne), the two 15 bedded wards, Hearts Delight and Woodstock CHC bed stock for all North Kent localities. Patients with a diagnosis of dementia and associated needs are admitted to the most suitable bed for the individual's need.
Forensic and specialist services	
Street triage	Based within the Kent Police Force Control Room and South East Coast Ambulance NHS Foundation Trust (SECamb) Emergency Room, the pan-county service will operate between 16.00 and 00.00 hours Sunday to Tuesday from November 2016. Currently the night service comprises one band 4 nurse within the Control Room; this is increasing to one band 6 nurse who will respond in person and two band 4 nurses who will be based in the Control and Emergency Rooms to provide advice from November 2016. In addition as an extension to the Criminal Justice Liaison and Diversion Service based within the Kent Police Northfleet custody suite (Gravesend) the pan-county day service will operate between 09.00 and 17.00 hours Monday to Friday from November 2016. This service will comprise one band 7 senior practitioner who will respond in person.
Inpatient forensic (medium secure)	Based at the Trevor Gibbens Unit (Maidstone) the pan-county service provides medium secure care for men and women.
Inpatient forensic (low secure)	Based at the Greenacres site (Dartford) the 20 bedded pan-county Tarentfort Centre consists of two wards for male patients with a learning disability whose offending behaviour and mental health needs require that they are detained under the MHA in secure conditions. In addition, the 20 bedded pan-county Allington Centre offers holistic person centered care packages for male patients between the age of 18- 64 years detained under the MHA, whose mental health and offending / criminal behaviors puts them and / or others at significant risk.
Inpatient forensic (rehabilitation)	Based at the Greenacres site the 10 bedded pan-county Brookfield Centre provides a rehabilitation and recovery inpatient service for forensic male patients with a learning disability. The service helps to reintegrate this patient group into the community, and acts primarily as a step down service for patients from the Tarentfort Centre.
Personality disorder	Based at The Brenchley Unit (Maidstone) this service provides a therapeutic community and range of services for patients diagnosed with a severe or borderline personality disorder.
Inpatient addiction	Based at Fant Oast (Maidstone) the pan-county 10 bedded Bridge House Service provides inpatient detoxification treatment in a high quality environment.
Neuropsychiatry	Based at Darent House (Sevenoaks) the West Kent and Medway tertiary neuropsychiatry service offers outpatient assessment and treatment to individuals with a psychological / psychiatric disorder that manifest as neurological / organic conditions.
Eating disorder services (EDS)	Based at Oakapple Lane (Maidstone) the pan-county EDS provides services to people with eating disorders and works mainly with people who are experiencing anorexia or bulimia nervosa.

Mother and infant mental health services (MIMHS)

Based in Canterbury and Maidstone the pan-county MIMHS is for women with mental health difficulties who are considering pregnancy, are currently pregnant, or have given birth and the baby is under a year old. The team also provides in-reach services at Canada House.

APPENDIX C : JOINT BRIEFING REGARDING CRANMER WARD, ST MARTINS HOSPITAL, CANTERBURY

Prepared by:

Helen Greatorex, Chief Executive, Kent and Medway NHS and Social Care Partnership Trust
Caroline Selkirk, Managing Director of East Kent CCGs

For NHSI and NHSE

11 February 2019

This briefing has been jointly prepared in order to ensure clarity on the background, current position and next steps for all parties.

Further highly detailed information is available from KMPT should that be helpful.

Background

- KMPT has sold to Homes England, the old St Martins (West) former hospital site.
- Of the many original wards, only one remains; Cranmer. Cranmer provides 15 beds for older adults.
- KMPT has until April 2020 to vacate the premises.

Current Position

- KMPT's Senior Clinicians have over the last twelve months worked on three key changes that will improve the quality of care and significantly reduce the need for beds across the whole Trust.
- The three key changes are (please see attached Appendix D) :
 1. Extension and improving our Patient Flow Team to be 24/7
 2. Developing an Urgent Care Support and Signposting Service.
 3. Achieving the recommended length of stay for older adults (it is currently double).
- There is an established track record of strong partnership working between KMPT and the CCGs.
- KMPT recognises that the CCGs may determine that public consultation is necessary as determined by statutory duties.
- The work to deliver the three key changes is well underway with results expected to be seen in April 2019.

Next Steps

- The Accountable Officers and their respective teams are working closely to ensure development of joint plans, developing two potential options for change:
 1. Proposal for maintaining the current inpatient bed base within the KMPT estate.
 2. Proposal to support a net reduction of 9 beds by clearly evidencing the impact of additional services to reduce patient flow and length of stay.
- As this change will affect all Kent and Medway Commissioners it is agreed that the East Kent CCGs will lead the case for change given the geographical location of the St Martin's site.
- The CCGs will consider the case for public consultation in accordance with NHSE 'Planning, assuring and delivering service change for patients' guidance with decision by April 2019.
- The impact of the three key changes will be monitored as a key element of the case for change.
- A programme of engagement with patients, families, staff and stakeholders has commenced however comprehensive engagement plans will need to be agreed jointly and taken forward by KMPT and CCGs as a priority.

APPENDIX D : KMPT ENABLING PROJECTS AND THEIR KEY BENEFITS

- **Reducing older adults acute length of stay**

In a study by Tees, Esk and Wear Valleys NHS Foundation Trust, a rapid process improvement workshop (RPIW) was used by a multidisciplinary team to observe ward processes and to identify areas of waste. 12 months after implementing changes across two wards, significant reductions were reported: in **length of stay (57%), bed numbers (21%) bed occupancy (22%), staff absence (63%), violent incidents involving staff (79%) and service user complaints (100%)**.

KMPT will be carrying out a RPIW in March 2019. Orchards ward has been selected for the workshop due to its high variance in length of inpatient stay.

- **Extension and improving our Patient Flow Team**

The patient flow team has had a highly-positive influence and been instrumental in achieving a reduction in the number of admissions, Delayed Transfers of Care (DToC) and reducing overall bed-occupancy levels. The team also plays a major role in keeping patients out of private beds. **Over the 9 months that the Patient Flow Team have been in operation, admissions have gone down by 10.8%, bed occupancy by 2.1% and DToC days by 27.5% (when compared to the nine months prior).**

- **Developing urgent care support and signposting service**

A clinical audit of acute admission in April and November 2018 indicated that only 30-40% of admissions clearly met the clinical indicators for admission.

A key driver for this is that the person presenting is often presenting in an emotional crisis and/or with complex social issues that cannot be de-escalated in time frame available.

The lack of time and immediate relief that staff undertaking secondary mental health assessment can offer often means that staff feel they have to offer an admission as there is no other available or quickly accessible place for the person to have time to reflect and be proactively helped to manage their immediate distress, be offered quick practical plans and support to meet their social needs.

Based on the data analysis undertaken, provision of a 24/7 service would see 2-3 services users present each day for a 12-hour average length of stay. Key benefits of developing the new service are anticipated to include:

- **Decrease in length of stay of less than 7 days.**
- **Decrease in informal admissions following S136**
- **Decrease in referrals to CRHT following support and signposting**
- **Reduction in inpatient admissions following support and signposting**

APPENDIX E : SUMMARY OF SERVICES TO BE RELOCATED FROM ST MARTIN'S (WEST)

The following are services provided from the St Martin's West site. The only frontline service is Cranmer Ward. All other services will relocate within other KMPT sites.

A. Operations – Older Adult Care Group

Service Element	Present location
Older Adult In-patient Services	Cranmer Ward

B. Medical and Quality Improvement Directorate

Service Element	Present location
Medical Education – Training Rooms Educational Resources Room Admin / Office Space	Medical Education Centre
Medical Staff On Call overnight accommodation	St Martins – Admin Block

C. Workforce, Organisational Development and Communications Directorate

Service Element	Present location
Learning and Development Training Rooms	Med Ed Centre and Lang Ward

D. Nursing and Governance Directorate

Service Element	Present location
Physical Education Training Facilities Movement & Handling Training Facilities PMVA Training Facilities	Lang Ward
PET team (including Chaplaincy and Vol Services)	Administration Block
PALs and Complaints teams	Administration Block
Multi Faith Space Off- ward therapeutic / communal space	Main Hall

E. Information Communication Technology Directorate

Service Element	Present location
Medical Records	Temple Ward

APPENDIX F : SUMMARY OF SERVICES TO BE RETIANED ON ST MARTIN'S (WEST) SITE

A. Younger Adult Acute In-patient Services

Service Element	
Fern Ward + Section 136 Suite	Female - Acute Admission (18 beds) Assessment Unit (2 beds)
Samphire Ward	Currently a male - Acute Admission (15 beds) Proposed new facility for Cranmer Ward
Bluebell Ward	Mixed Sex – Acute Admission (16 beds)
Foxglove Ward	Mixed Sex – Acute Admission (16 beds)

B. Older Adult Community Services

Service Element	
Gregory House	Admin Offices and out-patient facilities

C. Various Services / Eastern and Coastal Area Offices

Service Element	
Workforce Information / E Rostering	Admin Space / Offices
HR Recruitments and KMPT bank	Admin Space / Offices
Single point of access	Admin Space / Offices
Crisis Teams (North and South)	Admin Space / Offices
Open Dialogue Team	Admin Space / Offices
Approved Mental Health Professionals	Admin Space / Offices
Patient Safety Team	Admin Space / Offices
Learning and Development Team	Admin Space / Offices
Allied Health Professionals	Admin Space / Offices
Acute Services – Patient Flow Team + Early Discharge Team	Admin Space / Offices
Mental Health Act Administration Team	Admin Space / Offices
Psychology and MIMMHs Services	Clinical Consulting Rooms
MIMMHS and Specialist Services	Admin Space / Offices
Pharmacy Administration	Admin Space / Offices
Early Intervention in Psychosis	Admin Space / Offices
Physical Health / Medical Devices	Admin Space / Offices

D. Home Loan Store

Service Element	
ICT – Services Team	Admin Space / Offices – Secure Equipment Storage

E. Main Kitchen

Service Element	
Patient Catering Services	Main Kitchen - food production
Staff Catering Services	Restaurant / dining facilities
Site Management	Admin Space

F. Payroll Hut

Service Element	
Payroll Team	Admin Space / Offices
Psychology	Admin Space / Offices

G. Patient Experience Team / Vounteers

Service Element	
Webb's Gardens	Horticultural Project