Health Overview and Scrutiny

Assessment of whether or not a proposal for the development of the health service or a variation in the provision of the health service in Medway is substantial

1. A brief outline of the proposal with reasons for the change

Commissioning Body and contact details: Kent and Medway Clinical Commissioning Group

Current/prospective Provider(s): Kent & Medway NHS and Social Care Partnership Trust (KMPT)

Outline of proposal with reasons: Outdated and old-fashioned dormitory wards in mental health facilities compromise the safety, dignity, and privacy of patients. NHS England and the Government have pledged £650million in national funding to replace out-of-date mental health dormitories with single ensuite rooms, to help improve care for mental health inpatients across the country.

Across Kent and Medway, we have been making good progress in improving the safety and quality of our mental health sites and facilities, making substantial investment in community services in Medway and looking at opportunities for integrated services at Britton House in Gillingham.

As part of the Government's scheme to eradicate out-of-date dormitory wards, we are delighted to have successfully secured Government capital funding to develop modern, purpose-built accommodation for older adults with mental health issues, including dementia.

The investment in a new purpose-built building for these inpatient mental health services provides the opportunity to release Ruby ward, Kent and Medway Health and Social Care Partnership NHS Trust's (KPMT) only remaining dormitory ward (at Medway Maritime Hospital in Gillingham) meaning that patients would no longer need to be cared for in an outdated ward which compromises their privacy, dignity, and safety and is not suitable for their needs.

See attached paper for further detail about our proposal.

2. Intended decision date and deadline for comments

(The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 require the local authority to be notified of the date when it is intended to make a decision as to whether to proceed with any proposal for a substantial service development or variation and the deadline for Overview and Scrutiny comments to be submitted. These dates should be published.

We are at the outset of scoping this project, further detail will be brought back to Medway HASC in due course.

3. Alignment with the Medway Joint Health and Wellbeing Strategy (JHWBS).

Please explain below how the proposal will contribute to delivery of the priority themes and actions set out in Medway's JHWBS and:

- how the proposed reconfiguration will reduce health inequalities and
- promote new or enhanced integrated working between health and social care and/or other health related services

Our proposals align with the following themes in the Medway Joint Health and Wellbeing Strategy:

- theme 2 enabling our older population to live independently and well
- theme 3 preventing early death and increasing years of healthy life
- theme 4 improving mental and physical health and wellbeing

Our aim is to build the new facility alongside existing mental health and acute hospital services which allows for more integrated working. For example, this will ensure other medical, psychological, therapeutic, and most importantly, nursing staff can support the ward team. It is easier to ensure this support and access if a number of wards are located together, which also provides economies of scale.

It is beneficial for any new inpatient facility to be located close to general hospital services so that medical emergencies can be managed more easily. This is significantly more important for older people with mental health problems, whose physical health care needs are usually higher, as in the general population, but further exacerbated by their mental health problems, which can make diagnosis of serious physical health problems more difficult.

Our proposal is also in line with national mental health policy to eradicate outdated dormitory wards in mental health facilities which compromise the safety, dignity and privacy of patients.

4. Alignment with Kent and Medway Sustainability and Transformation Plans

This is in line with the overarching mental health strategy and five-year plan of investment and improvement in mental health services for Kent and Medway, developed and delivered under the Kent and Medway Mental Health and Learning Disability and Autism Improvement Board.

5. Please provide evidence that the proposal meets the Government's five tests for service charge:

This programme of work is in the early stages of scoping and development. The programme will adhere to the fives tests for service change and the HASC will be regularly engaged and updated on progress.

Test 1 - Strong public and patient engagement

- (i) Have patients and the public been involved in planning and developing the proposal?
- (ii) List the groups and stakeholders that have been consulted
- (iii) Has there been engagement with Medway Healthwatch?
- (iv)What has been the outcome of the consultation?
- (v) Weight given to patient, public and stakeholder views

We will return to HASC to keep members updated as plans are developed.

We are committed to involving services users, their carers, and loved ones, as well as representative groups and networks, in the design of the proposed new purpose-built facility and will ensure this is central to support the proposed development of the new unit going forward.

Test 2 - Consistency with current and prospective need for patient choice

We are committed to maintaining patient choice. We will return to HASC to keep members updated as plans are developed.

Test 3 - A clear clinical evidence base

- (i) Is there evidence to show the change will deliver the same or better clinical outcomes for patients?
- (ii) Will any groups be less well off?
- (iii) Will the proposal contribute to achievement of national and local priorities/targets?

We expect the change to at least deliver the same clinical outcomes for patients, with improvements in safety for patients, and significant improvements in the patient experience with enhanced privacy and dignity. Staff working conditions will also improve as a result of the proposed change, enabling them to deliver care in an environment that is safe, secure, and where infection control can be more effectively managed. The proposal is for the new unit to be located alongside other mental health and acute hospital services which will bring benefits to the clinical care of patients.

We will return to HASC to keep members updated as plans are developed.

The proposal delivers a Kent and Medway response to the national policy to eradicate out-dated and old-fashioned dormitory wards which compromise the safety, dignity, and privacy of patients.

Test 4 - Evidence of support for proposals from clinical commissioners – please include commentary specifically on patient safety

An important part of our ambition is to provide high-quality and safe accommodation for patients. It has been well documented – in the review of the Mental Health Act 2018, the NHS Long Term Plan and by the Care Quality Commission - that dormitory wards compromise patients' privacy, dignity, and safety, and increase the risk of infection (particularly in Covid times).

This will be a clinically led programme. Clinical oversight and leadership will be provided by the Kent and Medway Mental Health and Learning Disability and Autism Improvement Board to ensure clinical best practice, clinical quality outcomes, and patient safety continue to be at the heart of our proposals, and we will keep members updated as plans progress.

Test 5 – Does the proposal include plans to significantly reduce hospital bed numbers? If so please provide evidence that one of the following three conditions set by NHS England can be met:

- Demonstrate that sufficient provision, such as increased GP or community services, is being put in place alongside or ahead of bed closures, and that the new workforce will be there to deliver it; and / or
- (ii) Show that specific new treatments or therapies, such as new anticoagulation drugs used to treat strokes, will reduce specific categories of admissions; or
- (iii) Where a hospital has been using beds less efficiently than the national average, that it has a credible plan to improve performance without affecting patient care (for example in line with the Getting it Right First Time programme).

No, the intention is to increase the number of beds. The current number of beds for Ruby Ward is 14 and the proposed reprovision would be for 16 beds in the new location.

6. Effect on access to services

- (a) The number of patients likely to be affected
- (b) Will a service be withdrawn from any patients?
- (c) Will new services be available to patients?
- (d) Will patients and carers experience a change in the way they access services (ie changes to travel or times of the day)?

The number of patients that used this service over 2019/20 is 52. Approximately 70% of those (based on 2019/20 figures) are patients outside of Medway. A breakdown of admissions to Ruby Ward is included in the accompanying paper.

No. Our proposal is for the same service to be available, to be accessed by those who need it wherever they live across Kent and Medway, but in new fit-for-purpose accommodation in Maidstone.

The release of Ruby ward will allow MFT to pursue its own efforts to repatriate other NHS services, such as outsourced surgical and diagnostic activity, back to Medway, benefiting local residents.

The national and local strategic priority is to continue to enhance mental health community services, support people in their own homes and avoid hospital admission wherever possible. In terms of its estate plans, KMPT has made a substantial investment in community mental health services in Medway, redeveloping the Britton Farm site in Gillingham in partnership with the council, providing local residents with the highest standard of accommodation for mental health community facilities anywhere in the county. Work is ongoing between KMPT and MCH to consider opportunities for further development of integrated community services, potentially sited at Britton House, to continue to improve the health of people in Medway.

Yes, some patients and carers may have longer journey times depending on their place of residence, some will have a longer journey to Maidstone and others will have a shorter journey time. KMPT utilises its bed stock on a Kent and Medway basis which means patients may not be admitted to a unit which is closest to home, but will be admitted to the most appropriate facility to meet their needs.

7. Demographic assumptions

- (a) What demographic projections have been taken into account in formulating the proposals?
- (b) What are the implications for future patient flows and catchment areas for the service?

The catchment for the unit will remain the same - for Kent and Medway patients. We will undertake an equalities impact assessment as part of the development of these plans. Demand and capacity modelling will be undertaken as plans develop.

We will return to HASC to keep members updated as plans are developed.

8. Diversity Impact

Please set out details of your diversity impact assessment for the proposal and any action proposed to mitigate negative impact on any specific groups of people in Medway?

We are committed to mitigating any negative impacts on any specific groups and will ensure that full equality impact analysis is conducted as plans develop. In addition, we will undertake targeted engagement with specific groups identified by equalities impact analysis as well as those with protected characteristics to ensure that we are aware of, and have worked to mitigate, any negative impacts. We will return to HASC to keep members updated as plans are developed.

9. Financial Sustainability

- (a) Will the change generate a significant increase or decrease in demand for a service?
- (b) To what extent is this proposal driven by financial implications? (For example the need to make efficiency savings)
- (c) Is there assurance that the proposal does not require unsustainable level of capital expenditure?
- (d) Will it be affordable in revenue terms?
- (e) What would be the impact of 'no change'?

We do not anticipate the change to generate any change to current service demands.

The proposal is driven by the urgent need to eradicate the remaining outdated dormitory ward mental health accommodation in Kent and Medway to improve the safety, dignity and privacy and care of patients. The proposal is in line with national policy and we have secured national capital investment to develop single en-suite rooms in a modern purpose-built facility.

This is an affordable development in revenue terms and we will return to HASC to keep members updated on plans as they develop.

Outdated dormitory wards in mental health facilities compromise the safety, dignity, and privacy of patients. This has been well documented – in the review of the Mental Health Act 2018, the NHS Long Term Plan and by the Care Quality Commission.

10. Wider Infrastructure

- (a) What infrastructure will be available to support the redesigned or reconfigured service?
- (b) Please comment on transport implications in the context of sustainability and access

Following evaluation of potential sites, it is proposed that the new purpose-built facility is located on the Maidstone site. As existing acute and mental health facilities are already located on the site, it is already accessible, and benefits from long-established private and public transport links.

11. Is there any other information you feel the Committee should consider?

Please refer to our attached paper, which provides a summary of the programme and site selection process and proposal to date.

12. Please state whether or not you consider this proposal to be substantial, thereby generating a statutory requirement to consult with Overview and Scrutiny

Yes, we consider this proposal to be substantial change of service for Medway residents.