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Sent via email to:

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Dear Councillor Wildey and Medway HASC colleagues

ERADICATING DORMITORY WARDS IN MENTAL HEALTH FACILITIES ACROSS KENT AND MEDWAY – RELOCATION OF RUBY WARD

Thank you for your letter and formal response to our consultation on proposals to eradicate dormitory mental health wards in Kent and Medway.

I am writing to let you know that the Kent and Medway Clinical Commissioning Group's Governing Body agreed at its meeting on 25 November 2021, to go ahead with the proposal to relocate the last 'dormitory' style mental health ward, Ruby Ward, from its current home at Medway Maritime Hospital to a new purpose-built unit at KMPT's Hermitage Lane site in Maidstone.

As you know, this is a £12.65million investment that is part of the national drive to eradicate dormitory style wards in inpatient mental health facilities. It is an investment that will ensure that residents from across Kent and Medway have access to the highest standards of inpatient mental health care, should they need it.

You know too from our consultation with you that Ruby Ward is run by Kent and Medway NHS and Social Care Partnership Trust (KMPT) and is for older adults (people aged 65 and over) with complex functional mental illness, such as severe depression, schizophrenia, or bi-polar disorder. At present, because of the ward layout, Ruby Ward can only care for female patients, admitting women from across Kent and Medway. You will be aware that while staff work hard to provide the best care possible, the current ward environment makes it difficult to provide a full range of therapeutic activities, welcome visitors, or enable easy access to outside space.

The Governing Body's decision follows a significant programme of work over the last year to develop the proposal for the future of Ruby Ward, including our consultation with Medway Council, and a seven week formal public consultation this summer. The team are grateful for your scrutiny and focus on the proposals, and the feedback you have given us over the duration of this programme of work. That, plus the feedback, stories and insights shared with us during the public

consultation, demonstrated that we all share a belief that the privacy, dignity, and safety of anyone requiring admission to a mental health ward is paramount. We are grateful to HASC members and everyone who contributed to our consultation.

I know HASC will be disappointed that Ruby Ward will move from Medway Maritime Hospital to KMPT's Hermitage Lane Maidstone site, and we have rehearsed together the pros and cons and issues raised by this proposal. However, please be assured your views have helped refine and focus the plans for the new facility, including the development of a travel and transport strategy for patients and their families which we discussed the development of and proposed content, with you at your meeting on 26 October. We have also committed, of course, to the continued involvement of patients and staff in the design of the new building. You asked for a briefing note to update the committee on the result of the additional evaluation and assessment of potential alternative sites, put forward by members of the public during consultation. This briefing note is attached at Appendix A.

The new Ruby Ward unit will include single ensuite rooms, space for providing counselling, group therapy and creative activities and access to specially designed garden areas. There will be dedicated areas indoors and outside for patients and visitors and facilities to help people relearn essential skills such as cooking and cleaning. It is anticipated that this environment will help patients recover faster and return home more quickly. The new facility will mean that KMPT can offer people admitted as inpatients a room of their own and it will enhance the care and support staff can provide.

In addition to this investment in inpatient mental health services for everyone in Kent and Medway, as you know we are also focused on developing community-based mental health services and have shared with you regular updates on how these are being provided and strengthened in Medway and Swale. We too want to make sure that those in Medway and Swale who need mental health treatment and care have access to the best support at home, in their communities, and in specialist inpatient services for the small proportion of people who need that level of specialist care.

It is anticipated the construction work on the new Ruby Ward unit will begin next Spring (2022) and the new unit will be fully operational in 2023.

We will make sure that we, and our colleagues in KMPT, bring regular updates on this important programme to HASC as we move into the detailed implementation planning and delivery phase.

Yours sincerely



Wilf Williams
Accountable Officer, NHS Kent and Medway CCG &
Senior Responsible Officer (SRO) for the
Kent and Medway Integrated Care System (ICS)

Attach: Annex A – Briefing Note

Appendix A

Briefing note for the Medway Health and Adult Social Care Overview and Scrutiny Committee

Eradicating dormitory wards in mental health facilities across Kent and Medway

Background

At October's meeting of Medway Health and Adult Social Care Overview and Scrutiny Committee (HASC), we agreed to share a briefing note with members on the analysis of the additional potential sites and locations suggested by members of the public during the Ruby Ward consultation. The briefing note is below and reflects the information outlined within the [decision-making business case \(DMBC\)](#) (agenda item 13) which was considered by Kent and Medway Clinical Commissioning Group's Governing Body members at their meeting on Thursday 25 November. We hope this briefing is helpful to HASC members.

Assessing potential sites and locations for Ruby Ward – a briefing note for HASC members

As HASC members are aware, the process to access national funding for the eradication of mental health dormitory wards outlined clear criteria for the awarding of funding:

- capital funding would be allocated to provider trusts;
- any capital funding received by KMPT must be invested in their estate portfolio, owned by them, and declared a KMPT asset. In other words, any potential site for redevelopment with these monies either needs to be already owned or acquired by KMPT; and,
- there is no additional funding available from the national programme to support the acquisition of assets so any acquisition of a site for redevelopment would have to be funded at local level.

Hurdle criteria

All potential sites and locations considered during the development of the Ruby Ward proposals have been assessed against five hurdle criteria. These criteria are based on the specific requirements of the capital bid process listed above, the national policy relating to the eradication of dormitory wards, and KMPT's mental health estate principles. They are:

- **Scale:** Sufficient suitable space, whether existing buildings for adaptation or for a new build including external space for a garden, parking etc. KMPT also prefers ground floor options for all inpatient services as it better suits patients' physical needs and is safer in terms of emergency evacuation.
- **Availability:** Given the urgency of the national timetable, driven by both Covid-19 related concerns and the unacceptability of mental health dormitory accommodation in terms of patient safety, privacy and dignity, the building or land must be available in the short term. The timescale set by regulators for awarding capital funds to KMPT was for commencement of construction of a new-build or major conversion by late autumn 2021 to meet a November 2022 deadline for eradicating dormitory mental health wards in Kent and Medway. It should be noted

that the deadlines for the programme have slipped since the publication of the pre-consultation business case, and it is now expected that construction will start in Spring 2022. The options have been reviewed further against this revision in criteria.

- **Location alongside other acute mental health services:** KMPT's strategy for locating new acute mental health inpatient units, in common with all other mental health trusts, is to ensure the support of other acute mental health medical, psychological, therapeutic, and most importantly, nursing staff to the ward team. It is easier to ensure this access if acute inpatient mental health services are located together which also provides economies of scale.
- **Location alongside a general acute hospital:** Mental health inpatient facilities should be located close to general hospitals so that medical emergencies are more easily managed. 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.
- **Site ownership:** The capital investment that the trust will receive needs to be invested in KMPT estate, owned by the trust, and declared as an asset on the trust's balance sheet. If the relocation were to be within Medway this would require the trust having to acquire a site there. The trust has had this position confirmed by its regulator. NHSEI also confirmed there is no additional funding available from the national programme to support acquisition of assets.

All options also needed the flexibility in space and layout to deliver care for all genders with appropriately separated sleeping accommodation and bathroom facilities.

As there was no shortlist of options resulting from the application of the hurdle criteria, it was not necessary to develop or apply evaluation criteria at the pre-consultation stage. However, we agreed that any additional options that were identified during the consultation process would be assessed against the same hurdle criteria. If one or more alternative options passed the hurdle criteria they would be assessed, alongside the proposed preferred option, against three specific evaluation criteria:

- **access:** assessed by the average and maximum time to travel to services for the catchment population
- **implementability:** assessed by the time taken to implement the scheme
- **cost:** the total capital cost and value for money assessed by net present value.

Additional sites proposed during consultation

During the public consultation on the Ruby Ward proposals, some additional sites were suggested as potential options or locations that could meet the criteria outlined in the consultation document. These sites were:

- 1 - Canada House
- 2 - Britton House
- 3 - Consider the acquisition of a building
- 4 - Gillingham Business Park
- 5 - Chatham Dockside
- 6 - Medway campus

7 - Ashford, Kent location

8 - Dartford

9 - A designated ward on every hospital site to maintain local services.

Canada House (1) and **Britton House (2)** have already been assessed against the hurdle criteria as described above and did not pass.

Due to the availability of capital funding and the timescale for eradicating mental health dormitory wards, it is not possible to consider the **acquisition of a building or land (3)**. This had been explored as a potential option during the initial options appraisal process, but it was confirmed there was no additional funding to support an acquisition.

Gillingham Business Park (4), **Chatham Dockside (5)** and **Medway campus (6)** are all large business or education parks where KMPT do not own any building assets or land, one of the hurdle criteria. No specific space was suggested during the consultation and therefore the hurdle criteria on scale and availability cannot be assessed. The locations also do not meet the hurdle criteria of being alongside other inpatient mental health facilities or near to an acute hospital location.

Ashford, Kent location (7) and **Dartford (8)** have no specific space suggested and therefore, as above, cannot easily be fully assessed against the hurdle criteria. By interpreting the suggestions for these locations to mean utilising space at existing KMPT sites in either Ashford or Dartford, the table 8 below uses the Little Brook hospital and Jasmine ward sites in Dartford and the Eureka community mental health team (CMHT) building in Ashford as the potential sites to be assessed against the hurdle criteria.

At the Dartford sites there is no land available to accommodate a new mental health facility. Whilst Little Brook Hospital meets two of the hurdle criteria of co-location with another mental health facility and site ownership, there is no suitable land available. The Jasmine unit would meet the co-location criteria but is not a viable option as it is unable to meet the other criteria.

The CMHT facility at Eureka in Ashford is an office building on a small business park. This facility is leased, not owned, by KMPT. The trust has no property assets at this location or elsewhere in Ashford. There is also no land available to develop a facility adjoining the CMHT office. This site would not meet the criteria for co-location with other inpatient mental health services, although it is relatively near the William Harvey Hospital in Ashford for close proximity to a general acute hospital.

A designated ward on every hospital site (9) would relate to any of the general hospital sites in Kent and Medway which do not currently have inpatient mental health facilities. These include Tunbridge Wells Hospital, William Harvey Hospital and Kent and Canterbury Hospital. KMPT has no property assets on these hospital sites and therefore this suggestion does not meet the hurdle criteria of site ownership.

An option of space at Medway Maritime Hospital had already been explored and considered but Medway NHS Foundation Trust confirmed it has no available space there. This point was reiterated in the formal consultation response from Medway NHS Foundation Trust. Through the submission of a letter to Kent and Medway CCG, the trust's Chief Executive, Dr George Findlay, reiterated that Medway NHS Foundation Trust remains fully supportive of the process that has been followed in relation to finding an alternative site for the Ruby Ward facility. He confirmed that there is no alternative option for relocating Ruby Ward at Medway Maritime Hospital and recognised the importance of the service offer to the patient cohort.

The following table gives a high-level overview of how each site or suggestion put forward during consultation was evaluated against the hurdle criteria:

Additional site review	Scale	Availability	Alongside inpatient mental health services	Alongside an acute general hospital	Site ownership	Comments
Gillingham Business Park	?	?	●	●	●	Evaluation criteria were not met
Chatham Dockside	?	?	●	●	●	Evaluation criteria were not met
Medway Campus	?	?	●	●	●	Evaluation criteria were not met
Canada House/Britton House, Gillingham	●	●	●	●	●	The evaluation criteria were not met except for the scale of the site.
Ashford Kent location	●	●	●	●	●	The evaluation criteria were not met except the Eureka business park in Ashford is near to the William Harvey Hospital, Ashford
Dartford	●	●	●	●	●	None of the evaluation criteria were met
A designated ward on every hospital site to maintain local services	●	●	●	●	●	The evaluation criteria were not met except for being alongside an acute general hospital
Consider the acquisition of a building	●	●	●	●	●	No additional funding is available to support acquisition

Table 1 - additional site evaluation using hurdle criteria

The deadlines for the programme have been slightly delayed since the publication of the pre-consultation business case. It is now expected that construction will start in Spring 2022. The options were reviewed against this revised availability criteria (previously November 2021) and none were found to not meet the criteria on availability alone.

Conclusion

Whilst there is an expectation that the replacement facility, at £12.65m, will meet all criteria fully, a comprehensive, multi-agency review of potential options for a Medway-based facility was undertaken, recognising that solutions are rarely perfect in all respects. Some latitude on one or other of the co-location criteria might be possible if a proposed solution meets all other criteria fully, and an acceptable 'work-around' can be identified.

No additional suitable site has been identified in consultation which meets all of the hurdle criteria including the critical factor of the timescale requirements for accessing the capital funding. This means that the option which formed the basis of the original bid for capital funding – the proposed relocation of the older adult in-patient unit to a new facility on the KMPT Maidstone site - meets all of the identified hurdle criteria and remains the recommended option and preferred way forward, and now confirmed and agreed following the CCG's Governing Body meeting on 25 November 2021.

The preferred option in the consultation proposals had emerged as a single viable option from the application of the hurdle criteria. It has not been necessary to develop or apply any further evaluation criteria. The additional alternative potential options suggested or identified during the consultation process, have also now been reviewed against the hurdle criteria. None of the new suggested sites from consultation responses met the agreed hurdle criteria. Therefore, it was not necessary to do any further evaluation of these sites and the Hermitage Lane, Maidstone site (the option that has cleared the hurdle criteria) using the three specific evaluation criteria: **access**, **implementability** and **cost**, identified in our pre-consultation business case.

As a result of the evaluation process we have undertaken, we remain left with a single preferred and recommended option of the Hermitage Lane site in Maidstone, that was

confirmed and agreed by Kent and Medway CCG Governing Body following detailed consideration of the decision-making business case at its meeting on 25 November 2021.

ENDS