

# Eradicating dormitory wards – a new older adults unit for Kent and Medway

Review of sites proposed by Medway Health and Adult Social Care Overview and Scrutiny Committee (HASC) members

Working group meeting - 19th May 2021

## Introduction

The NHS in Kent and Medway is working in partnership to improve mental health services. This includes planning for a new facility for older adults with mental health issues, including dementia. Providing high-quality and safe accommodation for patients is an integral part of the therapeutic process and has a significant bearing on the experience of patients, their families and loved ones. Outdated and old-fashioned dormitory wards compromise safety, dignity, and privacy and have no place in a 21st century mental health system.

Following a successful bid for £12.65m of government funding as part of the national drive to eradicate outdated dormitory wards, it is proposed to build a new facility including single ensuite bedrooms for 16 patients (rising from 14) at Kent and Medway Health and Social Care Partnership NHS Trust's (KPMT) Maidstone site. To access this government funding, work must begin in October 2021 to be scheduled for completion in November 2022, to meet the national deadline for eradicating dormitory wards.

The new, purpose-built facility will be available to anyone who needs it wherever they live in Kent and Medway and will replace the single last remaining dormitory ward, Ruby Ward, which is currently operating at Medway Maritime Hospital. It will offer greater privacy, access to outside space and improved infection control measures, which is an increasingly important concern in light of the COVID-19 pandemic. This proposal is part of local ambitions to provide high-quality and safe accommodation for patients within the context of a programme of wider mental health transformation.

KMPT provides inpatient beds on a Kent and Medway-wide basis, with different specialist facilities and different specialist teams caring for patients in different places. There is not a concept of 'local' specialist inpatient beds designated for particular communities – all inpatient services are provided for all Kent and Medway residents. This means that patients requiring admission may not be admitted to a unit closest to their home, but they will be admitted to the most appropriate facility to meet their needs. Whilst Ruby Ward is located in the former Medway CCG catchment area, it takes patients from across Kent and Medway.

# Feedback from HASC members

Representatives from KMPT and Kent and Medway Clinical Commissioning Group (KMCCG) were pleased to present the proposals to Medway councillors at the Health and Adult Social Care Overview and Scrutiny Committee meeting on Thursday 11<sup>th</sup> March 2021. This included an update on this new capital investment, the process by which this was secured, and timescale requirements for accessing funding as well as early progress in reviewing locations for a new, updated facility for Kent and Medway residents. It was helpful to discuss the issues and hear the concerns and views of committee members.

At the meeting, HASC members asked for:

- 1. evidence of assurance from the Medway NHS Foundation Trust's (MFT) Chief Executive that there are no options on the Medway Maritime Hospital (MMH) site which would be suitable for the new, older adults unit; and,
- **2.** four additional sites to be reviewed for their potential to provide a Medway location for the new older adult acute mental health unit.

This paper outlines the response to these requests. Attached to this paper (Annex A) for reference is the previous report on potential sites for the new unit which was carried out in autumn of 2020 following confirmation of the capital funding award by the Department of Health and Social Care (DHSC). In that report the option of using space at MMH was reviewed in detail with MFT, and the conclusion was that there was no available space which was not required by MFT for its own healthcare development purposes which include, notably, repatriation of acute surgical and diagnostic activity for the Medway population. The Medway CEO has confirmed this remains the case (see Annex B).

#### 1. Assurance from Medway Foundation Trust's Chief Executive

The option of using space at Medway Maritime Hospital was explored with Medway Foundation Trust shortly after KMPT's successful bid for capital funding for a new older adults unit was confirmed. This review found that there was no available space which was not required by MFT for its own healthcare development purposes which include the repatriation of acute surgical and diagnostic activity for the Medway population.

MFT's site has some very old wards which are not regarded as fully fit for purpose, many having cramped conditions which have become even more compromised by the impact of the COVID-19 pandemic, including the need to socially distance. The Trust's strategic ambition, and that of the wider health economy, is to repatriate as much as possible of the £18m of Medway and Swale surgical and diagnostic activity which is currently outsourced to private providers. To achieve this, MFT needs a further three wards of bed capacity alongside additional diagnostic on-site services. The opportunity to have the area currently known as Ruby Ward back will make a significant contribution to tackling some of these issues.

At the time of the initial review, MFT was clear that there are no facilities available or appropriate in the main building and plans are in development for buildings sited

around the periphery, including the potential for an on-site GP or Healthy Living Centre and/or step-down facility.

As part of MFT's application for university hospital status they will be taking on 75 more junior doctors over the next four years and so are currently working through options for increasing their staff accommodation units on site from 172 to 250.

It was therefore concluded that there are no alternative premises on the MFT site for an older adults' mental health unit. MFT's Chief Executive has confirmed this remains the case and the letter confirming this is attached as Annex A. In addition to the lack of availability, one of the key criteria for the government funding for a new unit is that the site should be owned by the provider trust (in this case KMPT) and therefore any move to use estate owned by MFT would not meet that part of the criteria.

# 2. Review of additional sites suggested by HASC members

HASC members recommended that KMPT and KMCCG review four additional sites within Medway which were not part of the original review of potential sites in autumn 2020. We were pleased to receive these suggestions and have conducted a thorough review of the following sites:

- Canada House in Gillingham
- Elizabeth House in Rainham
- Medway Ambulance Station, Star Mill Lane, Chatham
- Harmony House in Rochester

#### Criteria

As with the original review of potential sites undertaken in autumn 2021, the following search criteria were used to assess the potential for these four sites.

- **Scale:** Sufficient 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.
- Availability: Given the urgency of the national timetable, driven by both COVID-19related concerns and the unacceptability of 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 eradicating dormitory wards is November
  2022 which means that construction must start by October 2021.
- Location alongside other mental health services: KMPT's strategy for locating new
  mental health inpatient units, in common with all other mental health trusts, is to
  ensure the support of other medical, psychological, therapeutic, and most importantly,
  nursing staff to the ward team. It is easier to ensure this access if a number of wards
  are located together which also provides economies of scale.

- Location alongside general acute hospitals: It is beneficial for mental health
  inpatient facilities to 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. 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. The Trust was prepared to consider any and all buildings and to explore potential site transfer options if all other criteria were met and the cost was token. If the relocation is to be within Medway this would require the Trust having to acquire a site there.

The following table gives a high-level overview of how each site scored against the criteria and includes Medway Maritime Hospital estate as HASC members requested further assurance on this point.

Site	Scale	Availability	Location alongside other mental health services	Location alongside general acute hospitals	Site ownership
Canada House	Υ	N	N	N	N
Elizabeth House	N	N	N	N	N
Ambulance station at Star Lane, Chatham	Borderline /potential impact on parking	N	N	N	N
Harmony House	N	N	N	N	N
Medway Maritime Hospital estate	Y	N	N	Υ	N

#### **Detailed review of sites**

#### Canada House



This former servicemen and maternity hospital building was sold at auction on 28 July 2020, having been declared surplus to requirements by KMPT after informing other NHS bodies to establish if there were alternative uses for the site. No alternative use was identified. Its most recent purpose had been as a

community mental health centre, which was replaced by the new Britton House centre initiative which is run by KMPT in partnership with Medway Council. The Canada House building was approaching 120 years old and had long since passed the point of fitness for purpose, despite considerable investment over a number of years. Although the building would meet the scale criteria, it does not meet the other four key criteria – co-location with other mental health services, co-location with the general acute hospital, ownership or availability.

Canada House was not considered a viable option as part of the initial review because the building was unsuitable for conversion to inpatient use, was also considerably larger than required and would have needed a range of other activities co-located there to make the proposal viable. Multi-component developments take much longer to plan and commission than was available for this scheme, which also impacts on the availability criteria.

# **Elizabeth House**



This site, at just under 1300m2, was too small to be considered and was returned to the landlord, NHS Property Services in August 2020. The new older adults unit requires approximately 1200m2 for the building itself and approximately twice as much space again for landscaping, parking and external facilities – in total around 0.4 hectares. In addition to not meeting

the scale criteria the site did not meet any of the other four criteria at the time of the business case submission.

## **Medway Ambulance Station**



South East Coast Ambulance Service (SECAmb) has recently had approval for a business case for funding for the new Make Ready Centre in Gillingham and will vacate their current ambulance station in Star Mill Lane on completion of the new site. While the site is up for sale, full vacant possession of the site can only be given around Spring 2022. This is too late to meet the timescales for the construction of the new older adults unit

which requires construction work to start at the end of October 2021 so that it is fully operational in November 2022, thus meeting national timescales for the eradication of dormitory wards. The site does not meet the criteria for co-location with other mental health services or co-location with the general acute hospital. The site is about 2,500m2 which might be big enough but would require significant design consideration around parking or necessitate off-site parking which would bring significant challenges for both staff and visitors. The site cost of £1m is not available within the funding envelope for this proposal.

## **Harmony House**



any ensuite bathrooms.

Medway Community Healthcare owns this building, which was capital-funded by European research funding. It is currently in use as respite care accommodation. It does not meet any of the criteria, being too small, not owned by KMPT and not co-located with either of the other clinical services identified in the criteria. In addition, its design does not in any way meet the requirements of an older adult's acute mental health unit, with bedrooms being split over two floors and without

# Conclusion

We are grateful to HASC members for their recommendations and appreciated the opportunity to explore these additional sites within the context of the agreed search criteria. 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 (as outlined in the original paper to HASC in March 2021), 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.

Unfortunately, no suitable site in Medway has been identified which meets all, or indeed many, of these 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 relocation of the older adult in-patient unit to a new facility on the KMPT Maidstone site - meets all of the identified criteria and remains the recommended way forward.

The Maidstone site is KMPT's closest nearby and is the most easily accessible site for Medway residents. Whilst acknowledging that people want as short a journey time as possible to access healthcare facilities, inpatient beds are provided on a Kent and Medway-wide basis, with the current Ruby Ward facility taking patients from across the Kent and Medway area. Medway residents made up approximately 30 percent of admissions during 2019/2020, demonstrating how admissions are made on a 'needs-led' basis, rather than based on geographic locality.

# **Next steps**

As part of the wider development of proposals for the construction of a new older adults unit for the residents of Kent and Medway, we will be engaging on the range of community-based services and support that are currently available or are in development to support older adults, their families, carers and loved ones outside of a hospital or inpatient environment.

While there will always be a need for inpatient beds, a modern mental health service can and should be judged on its ability to ensure that people have access to a comprehensive range of community-based services to support the majority of mental health needs. Our plans for Medway are based on ensuring that the clinical pathway for each individual patient or service user meets their care and treatment needs.

A three-year programme to deliver transformation to community services for adults and older people with serious mental illness including rehabilitation services, complex emotional disorders and eating disorder services, underpinned by £10.5million of investment across Kent and Medway, will start in Medway in 2021. Aimed at prioritising needs that are specific to Medway residents, this work will identify and address gaps in support and will see the NHS, social services, and the voluntary and community sector integrate services and support so there is a seamless single process into the mental health pathway with a single support/care plan. Initiatives including a 'Safe Haven' in Medway and embedded mental health practitioner roles in local primary care teams, will support this community effort.

We look forward to engaging with HASC members further on the breadth of support available and demonstrating how a modern mental health service can bring significant benefits to local residents, whatever their needs, circumstances, or stage of life. We propose to update HASC members at the scheduled meeting on 15<sup>th</sup> June 2021. This will include:

- Further information on the programme timeline to meet the requirements of the capital allocations as set out by DHSC including the assurance process required by NHSEI, plans for the six week formal public consultation requested by HASC
- More detail on the process of building design for the new unit, involving service users, and their carers, in the design of the new facilities
- An outline of work to transform the wider mental health service offer across Medway including the development of community services for adults and older people.

#### **ENDS**

# **Annex A - Initial review of site options**

The process to access national funding required a bid to be submitted within five days of being notified of the available capital, not months as is usual for major programmes. It should be noted that it was made clear that capital funding would be allocated to provider trusts and the criteria also specified that any capital funding received by the Trust must be invested in their estate portfolio, owned by the Trust, and declared a Trust asset. In other words, any potential site for redevelopment with these monies either needs to be already owned or acquired by the Trust. Incidentally, there is no additional funding available from the national programme to support the acquisition of assets.

The limited number of days available meant a desktop exercise was required to consider site options and register a bid. The challenging timescale meant that KMPT – as provider of the service - was only able to engage with stakeholders in a limited way, engaging with MFT and CCG commissioners in advance of submitting the bid to ensure their support and endorsement, and with senior local authority partners immediately after submission and indication of likely success.

The criteria used for the initial search for a suitable location for a new capital build or redevelopment was for sufficiently sized KMPT owned or leased building space/land, available within the short-term, and ideally located with other mental health and general acute hospital support. The initial search was undertaken in Medway and was widened to other Trust sites across Kent and Medway when a suitable site in Medway could not be found.

Once awarded the funding, KMPT worked with health and care system partners to comprehensively re-assess the potential for local Medway solutions, to try and retain immediate access in a Medway location. The following search criteria was used:

- **Scale:** Sufficient 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.
- Availability: Given the urgency of the national timetable, driven by both COVID-19related concerns and the unacceptability of 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 is for commencement
  of construction of a new-build or major conversion by October 2021.
- Location alongside other mental health services: KMPT's strategy for locating new
  mental health inpatient units, in common with all other mental health trusts, is to
  ensure the support of other medical, psychological, therapeutic, and most importantly,
  nursing staff to the ward team. It is easier to ensure this access if a number of wards
  are located together which also provides economies of scale.

- Location alongside general acute hospitals: It is beneficial for mental health
  inpatient facilities to 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 is 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.

#### Initial assessment to meet timescales for the bid

The immediate challenge was to identify where a new-build or refurbished ward could be sited. Adaptation of the existing Ruby ward was ruled out as it is too small and did not support the strategic ambition to deliver more acute treatment on the MFT site. The only other inpatient facility owned or leased by KMPT in the Medway area, Newhaven Lodge, was also ruled out as inadequate in terms of space. The Trust's other service occupying a building on the Medway Hospital site is the Disablement Services Centre, which is fully operational, and in addition, standalone units are not considered good practice as they can be more difficult to staff and can lead to patient safety issues.

Having established that there were no KMPT estate options within Medway, the Trust reviewed whether it owned other sites on which to realistically base the bid.

The only available KMPT site meeting the criteria is the Maidstone site, which is also KMPT's closest nearby, and most easily accessible, site for Medway residents. Whilst acknowledging that people want as short a journey time as possible to access healthcare facilities, KMPT provides inpatient beds on a Kent and Medway-wide basis, with different specialist facilities and different specialist teams caring for patients in different places. There is not a concept of 'local' specialist inpatient beds designated for particular communities – all inpatient services are provided for all Kent and Medway residents. This means that patients requiring admission may not be admitted to a unit closest to their home, but they will be admitted to the most appropriate facility to meet their needs. This is demonstrated in the table above, showing that whilst Ruby Ward is located in the Medway CCG catchment area, it takes patients from across Kent and Medway.

The bid which was therefore submitted is based on the development of a new purposebuilt facility on the Maidstone site.

## Assessment undertaken following successful bid outcome

KMPT worked with health and care system partners to comprehensively assess the potential for local Medway solutions which were not owned by the Trust, to try and retain immediate access in a Medway location. The following agencies were approached to provide information and suggestions on potential sites in the Medway area which might meet the criteria set out above:

• Medway Foundation NHS Trust (MFT) The site has some very old wards which are not fully fit for purpose, many having very cramped conditions which have become even more compromised by the impact of the pandemic and the need to socially distance, which has resulted in a reduction in bed numbers. Also, the ambition of the local health system is to repatriate Medway surgical and diagnostic activity which is currently outsourced to private providers which will require access to more estate. The opportunity to have Ruby Ward back (which due to its location and comparatively modern build, compared to some of the MFT Victorian estate, is regarded as a prime asset for MFT) makes a significant contribution to tackling some of the issues above and will benefit patients using Medway Maritime Hospital.

MFT is clear that there are no facilities available or appropriate in the main building, and have plans for the various buildings sited around the periphery, including the potential for an onsite GP or healthy living centre and/or step down facility.

- Medway Community Healthcare Trust (MCH) KMPT has worked with MCH and has
  reviewed the properties it uses in Medway against the five criteria. Of these only three
  meet the scale criteria, but none are available as all are patient-facing operational
  services with no plans to change them in the short-term. They are owned by NHS
  Property Services.
- Independent nursing and care home sector The CCG has considered whether there
  might be potential within the independent nursing and care home sector. Only one site
  emerged with potential, but in discussions with the provider concerned they confirmed
  that the land they did have available is already allocated for their own purposes.
- Medway Council estates division A list of five potential sites was provided by the Council. The Trust has undertaken a review of each of these sites against the five criteria set out in the background section above, but none met the criteria, most being too small or not available within the necessary timescale and none are located alongside a mental health unit or general hospital.

A full list of the sites considered is below.

Evaluation details of sites considered were as follows:

- a) **St Marks**. This site does not meet any of the criteria, although it is very close to the Britton House community mental health unit. However, the site is:
  - not located alongside a general hospital
  - too small
  - o currently not available and unlikely to become so in the time available
  - not a KMPT asset.
- b) **57 Marlborough Road**. The site might meet scale criteria (further specialist review/survey would be required), and could potentially meet availability, but is:
  - o not located alongside either a mental health unit or general hospital
  - not a KMPT asset.

On inspection, work appears to have already started to redevelop the site.

- c) Marlborough Road Annex. The site is potentially available but:
  - does not meet the scale criteria
  - o is not located alongside a mental health unit or a general hospital
  - o is privately owned and, therefore, unlikely to be available for transfer within the successful funding allocation.
- d) **Kingsley House**. The site meets none of the criteria.
- e) **Tintagel Manor**. The site could meet the scale criteria (further specialist review/survey would be required) but:
  - o is currently not available and unlikely to be in the time available
  - o is not near a general hospital
  - is not a KMPT asset
  - it is across a busy road from Britton House and would still take staff several minutes to respond from there. Britton House is not a 24/7 facility so there would be no additional staff support/response out-of-hours.

**NHS Property Services** provided a list showing the NHS land and property which fit the scale criteria. Unfortunately, with the exception of the Clover Street land, they have

confirmed that they are all operational properties and would not be available in the short or medium term.

The Clover Street site is vacant and remains the preferred option for the Chatham Healthy Living Centre development. The site would not meet either of the co-location criteria nor the site ownership criteria. In addition, its location in a commercial part of the town is not ideal for an inpatient unit.

One property, **Darland House**, has been closely considered, given there is already a dementia care home service on site. However, to develop the new unit would result in loss of all garden/amenity space to the existing unit, as the site is not large enough. Ownership and co-location with general hospital services are two further criteria which Darland House does not meet. The Trust has also explored the land next to Darland, which is owned by the council and is part-occupied by football/hockey pitches. However, council officers confirmed this was not available.

# **Annex B: Medway Foundation Trust CEO Letter of Assurance**



OFFICE OF THE CHIEF EXECUTIVE

**Medway Maritime Hospital** 

Windmill Road Gillingham Kent ME7 5NY

01634 830000

12 April 2021

Helen Greatorex

Chief Executive

Kent & Medway NHS & Social Care Partnership Trust (KMPT)

#### Dear Helen

I am writing further to our dialogue over the past few months in relation to Ruby Ward and the cohort of service users who currently receive their care on that ward, on the Medway Maritime Hospital site.

As you will know, Ruby Ward is an old dormitory ward, and it is therefore encouraging to see capital investment across the county in upgrading the facilities to single en-suite rooms, in order to help improve care for mental health service users.

We know that the eradication of dormitories will improve individual care, reduce length of stay; it will also have benefits in respect of infection control, and reducing the risk of incidents involving staff or service users/patients. These benefits have been widely talked about by both Nadine Dorries, Minister for Mental Health & Suicide Prevention, and Claire Murdoch, Mental Health Director at NHS England.

Since our first meeting with Medway Council colleagues, our respective teams have worked together to review the options for the services to continue either on the hospital site, or in another location in Medway which satisfies the criteria. I understand that we have now exhausted these options, and I can confirm that there are no other options to explore on the hospital site. The option therefore is to invest the capital monies at the identified Maidstone location.

Whilst I appreciate it will be disappointing that we could not identify a suitable location in Medway or on the hospital site, the overriding concern must be that any location must be well placed to offer the level of support that this patient cohort require and deserve to receive.

Lastly, I would like to register my thanks to your team for the collaborative way they have worked with our estates team in robustly reviewing the options we discussed with Medway Council colleagues.

Best wishes.

James Devine

Chief Executive