

# West Kent PCT Community Hospitals Review

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# Principles

- Quality of care
- Safety & governance
- Efficiency
- Quality of environment
- Equity
- National and local policy
- Affordability and sustainability

# Process

- Stakeholder events
- Commissioners and what they wish to purchase
- Benchmarking
- Capacity planning & modelling
- Best practice review
- Estates advice

# Findings

- Unnecessary variations in average length of stay
  - Potential to improve to 18 days
- Rehabilitative focus
- Inconsistent admission and referral criteria, operational policies and service standards
- No service level agreements in the south
- Day centres not consistently optimised for health gain

# Outcomes of the Review

Potential future for all in line with White Paper  
Will be providing high quality clinical care and  
expanding this in **ALL** sites

But to be sustainable we need to:

- Modernise service models, appropriate to individual need across all sites
- Be more effective and efficient
- Develop and provide services in a different manner

# Recommendations

- Re-open closed beds in Hawkhurst & Edenbridge over next 3-6 months
- Re-open closed beds in Sevenoaks in a phased approach to allow for refurbishment
- Pursue opportunity for renal dialysis unit in Tonbridge
- Submit a capital bid to the Department of Health

# Edenbridge MIU

- Rename as a treatment clinic with immediate effect
- Consult on the future of the treatment clinic (formerly the MIU)
- Provide a redressing clinic for 1 to 2 days a week for existing patients
- Redirect new redressing patients to other services

# Livingstone Hospital

- A successful nationally recognised model of care, *but ...* the building no longer meets modern standards
- Cost benefit analysis of possible refurbishment, reprovision or rebuilding to be undertaken
- Working assumption that reprovision is most likely to be the most cost-effective option
- Retain a dedicated 'Livingstone Unit' run and managed by PCT staff on another site

# Tonbridge

- Original proposal for a renal dialysis unit fell through
- Now working up alternative options with GPs and local stakeholders
- Options paper to go to September Board
- Public consultation later in the year

# Other recommendations

- Modernise day centres to get maximum health gain
- Assess value for money of hotel services
  - 3 providers
  - Appears to be significant variance in costs
- Review model of medical cover across the hospitals
  - Work with GPs and practice based commissioners

# Capital Bid

- £6m bid supported by the SHA
- Sevenoaks
  - Outpatients
  - Ward areas
  - Rehabilitation facilities
  - MIU
- Edenbridge
  - X-ray
  - PACS
  - Equipment & Room
- Tonbridge
  - To be agreed
- Need to use funding to ensure estate is as flexible as possible – future proofing

# Summary

- Overall very good news – hospitals that were at threat of closure now have a secure future
- The PCT is committed to investing in all the hospitals to develop and expand services
- Community Hospitals will deliver a consistently high quality of care to best practice standards

“Community hospitals can act as a hub for local health and social care services providing a centre of excellence in integrated care”

*A Recipe for Care – not a single ingredient*

Department of Health, 2006