

## Item 8: Review of the Frank Lloyd Unit, Sittingbourne

By: Kay Goldsmith, Scrutiny Research Officer

To: Health Overview and Scrutiny Committee, 22 July 2020

Subject: Review of the Frank Lloyd Unit, Sittingbourne

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Summary: This report invites the Health Overview and Scrutiny Committee to consider the information provided by the Kent & Medway CCG and make a final determination with regard the proposals on the future of the Frank Lloyd Unit.

It provides additional background information which may prove useful to Members.

The proposed change to the Frank Lloyd Unit has been deemed a **substantial variation of service**.

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### 1) Introduction

- a) The Frank Lloyd Unit has been an inpatient unit for individuals with complex dementia needs and challenging behaviour.<sup>1</sup> It is accessed by patients across Kent and Medway.
- b) The service is provided by Kent and Medway NHS and Social Care Partnership Trust (KMPT).
- c) Due to the falling number of patients receiving care at the Unit, the Trust has deemed its operation as unviable. In April 2019, the CCG's served notice on the Frank Lloyd Unit and the site has been decommissioned since 31 March 2020.

### 2) Previous monitoring by the Kent HOSC

- a) HOSC received notification at their meeting on 21 September 2018 that the Frank Lloyd Unit was under review. The Committee received further written updates at its June and July 2019 meetings, when the CCG acknowledged that work had progressed slower than anticipated.
- b) At its 19 September 2019 meeting, HOSC deemed the proposed changes to the Unit to be a substantial variation of service.
- c) A confidential briefing was held for HOSC members in January 2020 to discuss the onward pathway for current Frank Lloyd Unit patients.
- d) At its last meeting on 5 March 2020, the Committee made the following resolution:

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<sup>1</sup> KMPT (2019) Frank Lloyd Unit, <https://www.kmpt.nhs.uk/our-services/frank-lloyd-unit/>

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*RESOLVED that this Committee considers that the decision of the Kent & Medway CCGs to de-commission the Frank Lloyd Unit will not be in the best interests of the local population for the following reasons:*

- a) The decision to close was premature without sufficient alternate provision being available in Kent and Medway.*
- b) Insufficient consultation had been carried out.*
- c) There was a lack of proper clinical evidence that the closure was in the best interests of patients.*
- d) There would be workforce implications that needed to be taken into account in light of the closure.*

*Therefore the Committee asks that the Kent & Medway CCGs consider and respond to these comments and report these back to the Committee ahead of a final determination as to whether or not to refer their decision to the Secretary of State on the grounds that the proposal is not considered to be in the best interests of the health service in the area.*

- e) Members of the Committee had the following specific concerns around the de-commissioning of the Frank Lloyd Unit:
- i. the new care model for complex dementia patients had not been fully developed nor implemented;
  - ii. it was unclear if there was suitable, alternative local provision for those with complex dementia. Whilst Members agreed care within the home was appropriate for some, they felt there would always be a small number requiring dedicated facilities;
  - iii. the proposed care model had dementia patients supported within existing care homes, but it was unclear if those care homes were ready or had the right staff to deal with complex behaviour;
  - iv. there had been a lack of openness around the closure of the Frank Lloyd unit, which Members understood had not been accepting referrals for a substantial period;
  - v. there had not been suitable clinical evidence that the closure of the Unit was in the interests of the local population; and
  - vi. it was unclear what would happen to the staff employed at Frank Lloyd, but Members felt there was a real risk their professional skills would be lost.

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### 3. The Next Steps

- a) As per the recommendation from its meeting on 5 March 2020, HOSC must decide at this meeting if they are going to refer the decommissioning of the Frank Lloyd Unit to the Secretary of State for Health and Social Care.
- b) The NHS have had an opportunity to hear Members concerns and questions and respond to them.
- c) As set out in the recommendation for this meeting, HOSC Members must consider the evidence presented by the NHS and the responses to the comments and questions made at the last meeting. The full range of legal options remains available to the HOSC as to the final decision and none is excluded by the recommendation agreed on 5 March. These options include:
  - endorsing the proposal; or
  - making a formal referral on the grounds that the proposal is not considered to be in the best interests of the health service in the area; or
  - making any other comment(s) on the proposal that the HOSC deems appropriate.
- d) If the Committee considers a motion of formal referral to the Secretary of State, Members would need to be assured that the full legal requirements could be complied with. Any referral would need to include:
  - i. An explanation of the proposal being referred.
  - ii. An explanation of the reasons for making the referral.
  - iii. Evidence in support of these reasons.
  - iv. A summary of the evidence that the proposals are not in the best interests of the health service in the area, including any evidence of the effect or potential effect of the proposal on the sustainability or otherwise of the health service in the area.
  - v. An explanation of the steps taken by the HOSC to try to reach agreement with the relevant NHS bodies.
  - vi. Evidence that the HOSC has complied with all the legal requirements of a referral.
- e) Where a formal referral under the terms of The Local Authority (Public health, Health and Wellbeing Board and Health Scrutiny) Regulations 2013 has been made, and the Department of Health and Social Care agrees it meets the legal requirements, the Secretary of State may ask for advice from the Independent Reconfiguration Panel (IRP).
- f) The IRP is an advisory non-departmental public body. Where requested by the Secretary of State, the IRP will undertake an initial assessment of the referral. In exceptional circumstances, it may advise that further evidence is required before reporting back. The IRP offers advice only. The Secretary of State makes the final decision on any contested proposal.

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- g) If the Committee feels that the NHS has adequately responded to their specific concerns, and that the above grounds no longer apply, it will still be able to monitor the implementation of the service and make comments and recommendations directly to KMPT or the CCG.
- h) The Committee has not yet made a decision whether the continuing model of care for dementia patients with complex needs is a substantial variation of service. The CCG will return to the Committee with an update as soon as further information is available.

### 4) Recommendation

The Committee is asked to consider the decision of the Kent and Medway CCGs to decommission the Frank Lloyd Unit and take one of the following actions:

- a) Endorse the decision of the Kent and Medway CCGs to decommission the Frank Lloyd Unit; or
- b) Refer the decision to the Secretary of State on the basis that it is not considered to be in the best interests of the health service of the area.
- c) Agree to make any other comments the Committee deems appropriate.

### Background Documents

Kent County Council (2018) *'Health Overview and Scrutiny Committee (21/09/18)'*,  
<https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=7921&Ver=4>

Kent County Council (2019) *'Health Overview and Scrutiny Committee (06/06/19)'*,  
<https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=8281&Ver=4>

Kent County Council (2019) *'Health Overview and Scrutiny Committee (23/07/19)'*,  
<https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=8282&Ver=4>

Kent County Council (2020) *'Health Overview and Scrutiny Committee (05/03/20)'*,  
<https://democracy.kent.gov.uk/ieListDocuments.aspx?CId=112&MId=8286&Ver=4>

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