



Proposed changes to the way acute adult mental health services are delivered across Kent and Medway, with particular potential impact on the St Martin's Hospital site, Canterbury

**Update report for the Kent Health Overview and Scrutiny Committee (HOSC)
July 2019**

Situation

This paper provides a progress report by the east Kent CCGs, (on behalf of Kent and Medway commissioners) on proposed changes to the way acute adult mental services are delivered across Kent and Medway. The proposed changes are based on latest best practice and are in line with Kent and Medway Partnership Trust's (KMPT) programme of transformation, corresponding service redesign and ongoing programme of refurbishment across its estate. An overview of this work was last presented to the HOSC in March 2019. This paper also provides an update on the next steps to engage with patients and public on the new ways of delivering adult mental health services and particularly the impact that the proposed changes would have on the St Martin's Hospital site in Canterbury. The proposed changes are based on service improvements to treat and support people out of hospital unless they really need to be there. They also build on improvements to patient flow and therefore a reduction in the average 'length of stay' in a hospital bed. The proposed changes would result in a reduction of 15 acute inpatient beds across the KMPT estate, beds that are currently provided in Cranmer ward on the St Martin's Hospital site. To summarise, the main elements of the transformation programme are:

1. **Re-design of clinical care pathways**, based on clinical best practice and aimed at improving outcomes for service users and reducing the length of stay in older adult and younger adult wards. The overall objective is to ensure that individuals are cared for as close to home as possible and in the most appropriate environment to meet their needs and hence reduce reliance on inpatient beds.
2. The proposed re-location of Cranmer ward, a 15 bedded ward for older adults, currently located on the St Martin's site (west) into a **modernised existing inpatient facility** on the remaining St Martin's site.
3. This proposed relocation of Cranmer ward into Samphire ward (renamed Heather Ward as part of the upgrade) would mean that there would be a potential reduction of 15 acute inpatient beds across the KMPT total inpatient

estate (around 6 per cent of the total bed base). The proposed reduction is based on a refreshed needs assessment and patient activity and patient flow modelling which shows that, due to improvements and changes to the clinical pathway, there have been no 'out of area' acute admissions since July 2017. Therefore the capacity of acute inpatient beds that has been provided on Samphire ward is no longer needed (see appendix B).

4. Sale of the St Martin's (west) site in Canterbury to Homes England releasing a capital receipt which will be used to **reinvest in, modernise and upgrade existing KMPT estate** with tangible benefits seen in improvements in the clinical environment, patient experience and working conditions for staff.

Background

As described to the HOSC at the meeting in March 2019, KMPT has developed three enabling, clinically led projects to improve the effective and more efficient use of inpatient capacity, i.e.

1. Extension and improving the Patient Flow Team, so that it operates 24/7, supporting ward-based clinical teams in effective and clinically appropriate discharge planning
2. Development of an urgent care support and a signposting pilot, which offers alternatives to inpatient treatment where this is clinically appropriate
3. Ambitions and plans to achieve the recommended length of stay for older people (KMPT currently has double the national average length of stay).

These projects have all contributed towards a reduced reliance on inpatient beds and better patient flow (i.e. timely supported planned discharge when patients are clinically ready to leave hospital). This improvement is ongoing, but is also being regularly monitored to identify and tackle issues that arise and to ensure that this approach to managing inpatient resources is sustainable.

As part of the transformation and improvements to clinical practice across the patient pathway, and in conjunction with the ongoing programme of modernisation and refurbishment of the KMPT estate (as described above) there is a potential option to re-locate Cranmer Ward to Samphire Ward on the St Martin's site. This would potentially result in a reduction of 15 acute beds from KMPT's overall bed stock.

A Joint Programme Board has been established between the commissioners and provider of services and a Project Manager has been appointed to oversee the transformation programme. The Board is chaired by the Director of Commissioning

from the east Kent CCGs and has representation from KMPT, all Kent and Medway CCGs and Kent County Council (KCC).

As HOSC members are aware, under health scrutiny legislation, NHS organisations are required to consult health overview and scrutiny committees about a proposed service change which would constitute a 'substantial development or variation' to services for the residents of the HOSC area.

As you know, there is no national definition of what constitutes a 'substantial' change. Factors such as the number or proportion of patients affected, the nature of the impact and availability of alternative services need to be taken into account in coming to an agreement between the HOSC and the NHS on whether a consultation is required. In discussion with colleagues and our regulators at NHS England/Improvement we anticipate that the proposed reduction in bed stock would constitute 'significant variation' but we welcome HOSC members views and perspectives on this as part of our deliberations and design of next steps in our engagement and change process.

We welcome views from HOSC members as to whether they believe:

- Formal consultation with HOSC and the local authority is required over these proposals
- Formal public consultation is warranted over these proposals

Communications and engagement support has been identified to support the process and a pre-consultation communications and engagement plan, and planning for a formal public consultation (if indeed the HOSC agrees the proposed changes constitute significant variation), is currently in development.

Assessment

In addition to the requirement to consult with local authority Health Overview and Scrutiny Committees, national guidance on planning service change requires that NHS England/NHS Improvement are responsible for assuring that any service change gives due consideration to the Government's four tests of service change and the NHSE test for proposed bed closures. This assurance process must be undertaken before commencing public consultation.

A Stage 1 assurance meeting was held on 2 July 2019 with NHSE/I, the east Kent CCGs and KMPT. As indicated by the HOSC in March 2019, the recommendation

from this NHSE/I assurance meeting was that the proposal to reduce inpatient bed capacity across the KMPT estate will require public consultation.

However, there was general support for the aim of the enabling projects, i.e. to care for people as close to home as possible and in the most appropriate environment and avoid hospital admission where possible and appropriate.

NHS England's Stage 1 'gateway' process will be followed by a more detailed assurance of the pre-consultation business case and proposals (Stage 2, Assurance Checkpoint) to confirm that the tests for service change have been met i.e.

- i) Strong public and patient engagement
- ii) Consistency with current and prospective need for patient choice
- iii) Clear, clinical evidence base
- iv) Support for proposals from clinical commissioners.

And the 'beds test' –

v) That any plans to reduce hospital beds can show that either there is sufficient alternative community provision to enable the closure of beds, new therapies that will reduce admissions or a hospital has been using beds less efficiently than the national average and there is a credible, deliverable plan to improve performance.

To this end, a pre-consultation business case is in development for approval at the Stage 2, Assurance Checkpoint with NHS England.

To date, there has been engagement with patients and staff regarding the redesign of clinical pathways, but further pre-consultation engagement is now required.

It is anticipated that formal public consultation will commence in early autumn 2019, with further pre-consultation engagement taking place in August and September. The next steps in the pre-consultation activity will be focused particularly on developing the options for change and the process for assessing and evaluating the options. This engagement will be with a range of stakeholders – patients, service users, carers, staff, patient support and patient representative groups, elected representatives and other stakeholders, third sector partners, those with protected characteristics under the equalities legislation and those who are often 'seldom heard'. We will seek to engage using a variety of methods – for example, online, face-to-face meetings, display and provision of information etc.

We will seek to build the feedback from our pre-consultation activity into the design of our final proposals for consultation and into the design of the consultation activity

itself. We would welcome HOSC members' views and feedback on our consultation plans and will share these once they have been developed.

Recommendation

Kent Health Overview and Scrutiny Committee are asked to:

- Note the update in progress – including the background information at Appendix A. and Appendix B.
- Consider the proposed service change and determine whether this constitutes significant variation as required by the legal duty of commissioners to consult with the Local Authority on 'substantial development or variation' to NHS services.
- In line with the above, consider whether a joint HOSC needs to be established with Medway HASC bearing in mind KMPT provides a Kent and Medway-wide service
- In line with the above, give a view as to whether the proposals warrant formal public consultation – to inform commissioners' decision on this
- Agree a date to receive a further update.

Caroline Selkirk, Managing Director, East Kent CCGs

Vincent Badu, Executive Director of Partnership and Strategy and Deputy CEO, Kent and Medway NHS and Social Care Partnership Trust

Appendix A

KMPT clinical pathways/improvements paper – see attached.



Appendix A Clinical
Care Pathways Progr

Appendix B

Graph showing KMPT acute bed occupancy January 2016 to March 2019 – see attached.



APPENDIX B.docx