HAMPSHIRE COUNTY COUNCIL

Report

| Committee: | Health and Adult Social Care Select Committee |
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| Date of Meeting: | 15 March 2017 |
| Report Title: | Proposals to Develop or Vary Services |
| Reference: | 8186 |
| Report From: | Director of Transformation & Governance |

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1. Summary and Purpose

- 1.1. The purpose of this report is to alert Members to proposals from the NHS or providers of health services to vary or develop health services provided to people living in the area of the Committee.
- 1.2. Proposals that are considered to be substantial in nature will be subject to formal public consultation. The nature and scope of this consultation should be discussed with the Committee at the earliest opportunity.
- 1.3. The response of the Committee will take account of the Framework for Assessing Substantial Change and Variation in Health Services agreed by the Hampshire, Isle of Wight, Portsmouth and Southampton Joint Committee in November 2010, last updated in July 2016. This places particular emphasis on the duties imposed on the NHS by Sections 242 and 244 of the Health and Social Care Act 2006, includes new responsibilities set out under the Health and Social Care Act 2012, and takes account of key criteria for service reconfiguration identified by the Department of Health. The 'Framework' can be found on the website through the link below:

http://www3.hants.gov.uk/councilmeetings/advsearchmeetings/meetingsitemdocuments.htm?sta=&pref=Y&item_ID=7682&tab=2&co=&confidential=

- 1.4. This Report is presented to the Committee in 3 parts:
 - 1. *Items for action:* these set out the actions required by the Committee to respond to proposals from the NHS or providers of health services to substantially change or vary health services.

- 2. *Items for monitoring:* these allow for the monitoring of outcomes from substantial changes proposed to the local health service agreed by the Committee.
- 3. *Items for information:* these alert the Committee to forthcoming proposals from the NHS to vary or change services. This provides the Committee with an opportunity to determine if the proposal would be considered substantial and assess the need to establish formal joint arrangements
- 1.5. This report and recommendations provide members with an opportunity to influence and improve the delivery of health services in Hampshire, and to support health and social care integration, and therefore assist in the delivery of the Joint Health and Wellbeing Strategy and Corporate Strategy aim of maximising well being.

Items for Action

2. Solent NHS Trust: Move of the Kite Unit from St James' Hospital, Portsmouth, to Western Hospital, Southampton

Context

2.1 The NHS, or any provider of NHS services, is required to consult the health scrutiny committee on any substantial or temporary variations to the provision of the health service, and to provide any information that the committee may require to enable them to carry out scrutiny of the planning, provision and operation of this service.

Background

- 2.2 Solent NHS Trust currently provides neuropsychiatric and neuro behavioural services from the Kite Unit, located on the St James' Hospital site in Portsmouth, to patients from across Hampshire, Portsmouth, Southampton and outside of the County.
- 2.3 The Unit has 10 beds, with the length of stay on average being between six and nine months, reflecting the rehabilitation focus of the service.
- 2.4 Solent NHS Trust have highlighted that the building containing the Kite Unit is no longer fit-for-purpose, owing to:
 - A Care Quality Commission inspection from 2014 highlighting that the Unit did not meet all of the requirements to ensure privacy and dignity of service users, and there being ligature point risks.
 - The building layout not enabling clear lines of sight, and the low roof being a risk to patient safety.

- It not being possible for more than two females to stay in the unit and have access to single sex accommodation at any one time due to the inflexibility of the building.
- 2.5 Solent NHS Trust also provides Snowden, a 14 bed neuro-rehabilitation unit in Western Community Hospital, Southampton, which offers a purpose-built environment, with access to supporting facilities such as a gym, café and gardens. The Unit meets the guidance on single sex accommodation, and has anti-ligature features in place.
- 2.6 The co-location of the Kite and Snowden Units would enable Solent to strategically develop the service as a specialist regional neurological rehabilitation hub.

Proposal

- 2.7 A detailed paper from Solent NHS Trust is attached as Appendix One.
- 2.8 Following an options appraisal undertaken by the Trust, the preferred proposal is to relocate the Kite Unit from St James' Hospital, Portsmouth, to the Western Community Hospital in Millbrook, Southampton.
- 2.9 The Trust plans to relocate the Unit between July and August 2017, following the engagement and communication phase, works being completed to accommodate the Kite Unit, and support from key stakeholders.
- 2.10 The HASC will wish to consider the cohort of patients from Hampshire which will be affected by this move; in 2016 (up to October), eight patients from across Hampshire were admitted to the Kite Unit. The report sets out that travel time to the Kite Unit for patients and their families will be shorter on average if the Unit is re-sited in Southampton.
- 2.11 Members will wish to review the proposals to ensure that the following tests of service change have been met:
 - That appropriate engagement and consultation has been undertaken with service users (where possible), their representatives and staff.
 - That there is a clear clinical case for change, and support from clinicians leading the service.
 - That commissioners are supportive of the proposal.
 - That the proposals will extend choice or improve the quality of service provided to patients.
 - That the service can be sustainably staffed and financed.
- 2.12 The proposals have been considered by the Portsmouth and Southampton HOSPs, who were both supportive of the move. The local HealthWatch have

been involved in the proposals, and have assisted Solent NHS Trust with its engagement activities.

Recommendations

2.13 That Members:

- a. Support the proposal to move the Kite Unit from St James' Hospital, Portsmouth, to the Western Community Hospital, Southampton.
- b. Request an update on the move of this service once the move has been completed.
- c. Request any further information required on this issue.

CORPORATE OR LEGAL INFORMATION:

Links to the Corporate Strategy

| A. Hampshire safer and more secure for all: | yes | |
|--|-----|--|
| Corporate Improvement plan link number (if appropriate): | | |
| B. Maximising well-being: | yes | |
| Corporate Improvement plan link number (if appropriate): | | |
| C. Enhancing our quality of place: | yes | |
| Corporate Improvement plan link number (if appropriate): | | |

Section 100 D – Local Government Act 1972 – background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

<u>Document</u> <u>Location</u> None

IMPACT ASSESSMENTS:

1. Equalities Impact Assessment:

1.1 This is a covering report which appends reports under consideration by the Committee, therefore this section is not applicable to this covering report. The Committee will request appropriate impact assessments to be undertaken should this be relevant for any topic that the Committee is reviewing.

2. Impact on Crime and Disorder:

2.1 This is a covering report which appends reports under consideration by the Committee, therefore this section is not applicable to this covering report. The Committee will request appropriate impact assessments to be undertaken should this be relevant for any topic that the Committee is reviewing.

3. Climate Change:

3.1 How does what is being proposed impact on our carbon footprint / energy consumption?

This is a covering report which appends reports under consideration by the Committee; therefore this section is not applicable to this work report. The Committee will consider climate change when approaching topics that impact upon our carbon footprint / energy consumption.

3.2 How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?

This is a covering report which appends reports under consideration by the Committee, therefore this section is not applicable to this work report. The Committee will consider climate change when approaching topics that impact upon our carbon footprint / energy consumption.



Relocating Kite Unit Summary

The Kite Unit, situated on the St James' Hospital site in Portsmouth, provides specialist neuropsychiatric and neuro behavioural services to people from a very wide area.

The unit currently caters for level 1c acuity Neuro rehabilitation patients. This includes individuals with a brain injury whose impairments are largely in the cognitive, behavioural or mental health spectrum. A typical patient is recovering from a brain injury. They are mobile but unable to be responsible for their own safety. They are very forgetful, disorientated and impulsive. They may be angry when frustrated. They are likely to have abused drugs and alcohol. These patients are very challenging in the acute setting. Kite is rightly proud of the service they provide to rehabilitate such individuals.

The facility consists of 10 beds and the average length of stay is between 6 and 9 months. Over time, it has become apparent that the current building which houses the Kite Unit is no longer fit-for-purpose. To ensure we can continue to deliver the very best possible care to our service users, we have considered alternative accommodation for the unit.

Following an options appraisal the proposal, which provides the maximum benefit to service users and staff, is to relocate the unit to the Western Community Hospital in Millbrook, Southampton. Relocation is scheduled for July-August 2017, following the engagement and communication phase and support from key stakeholders.

Case for change

Whilst staff at the Kite Unit always maintain a high level of care for their patients, a previous inspection by the Care Quality Commission (2014) highlighted that the building, which currently houses the unit, is not fit for purpose.

The presence of potential ligature points, the inhibited lines of sight within the facility and ensuring compliance with single sex guidance has been the subject of on-going remedial works. More recently the MHA team commented on the low roof also being a risk to patient safety. Providing safe, quality services is our highest priority.

Whilst we have done everything we can to ensure a safe and equitable environment for our patients, the extent of works required, and the physical layout of the building, makes addressing these issues any further challenging.

In addition, whilst steps have been taken to ensure provision of compliant single sex accommodation, the layout of the building is inflexible and does not allow clinicians to maximise their estate resource, resulting in the inability to take more than two female patients at any time.

Benefits of the proposal

It is our intention to be at the forefront of neurological rehabilitation provision across the Wessex region.

- The co-location of the Kite Unit with Snowdon, Solent's 14-bedded neuro rehab unit, will facilitate improved efficiency, productivity and enhance clinical expertise and skills through improved supervision, training and operational cover.
- The estate will allow greater capacity and flexibility of access. The service will no longer need to limit the number of female patients being admitted to two and future development means we could accommodate up to 12 patients at a time.
- The Western Community Hospital offers a better environment for the rehabilitation of service users. The proposed ward for relocation has been used for older people with behavioural concerns and so is an ideal environment for the client group as many anti-ligature features required are already in place. Patients will also have access to rehab gymnasiums, café facilities and garden areas on the WCH site. The patients will have access to a purpose built environment which complies with single sex legislation and is conducive to safe and effective rehabilitation care.

 The co-location would enable Solent to strategically develop the service as a specialist regional neurological rehabilitation hub. The creation of such a platform gives a concentration of significant clinical weight. This will allow Solent to develop other service collaborations as well as further develop the skill set of existing clinical teams.

Extending choice

We are currently working with commissioners to review the neuropsychiatric out-patient provision which works alongside the Kite Unit. This will remain in Portsmouth and Gosport as per the patient need but timings and days will be reviewed.

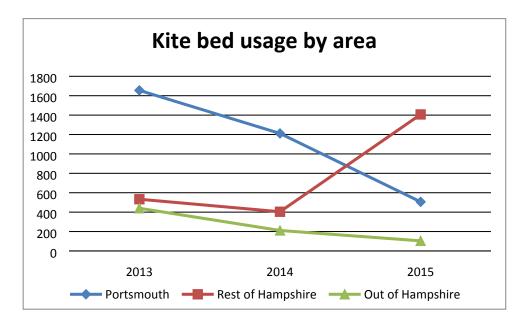
Impact on service users', carers and the public

We have engaged with patients and families, along with other key stakeholders and reviewed geographical areas of our patient cohort. The relocation of the unit will ultimately benefit patients as they will be housed in the right premises and will have easier access to a range of health professionals.

There is a proven need for additional acute complex and specialist rehabilitation beds in Wessex and the region requires more musculoskeletal rehabilitation facilities, as well as viable neurological psychiatric facilities.

We already deliver some of this provision and have the optimum clinical skills to develop a comprehensive regional neurological rehabilitation facility. Further work is underway to progress the strategic longer term requirements.

To establish such a service requires the centralisation of existing services to create a specialist hub on which to develop and build further capacity. The proposed Kite unit relocation is the first step.



The graph above highlights the reduction in number of patients from Portsmouth accessing the service over time.

The relocation of the unit to Southampton will be beneficial to the patients' families who currently travel a considerable distance to the unit.

We are also not serving the needs of the female population, which we serve. Only being able to take two female patients means that on numerous occasions females that we cannot admit are being sent to out of area placements.

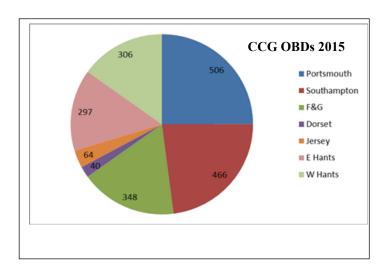
The proposed new site will allow greater flexibility to accommodate female patients.

Occupied bed days

The relocation affects approximately 30 patients per year.

The pie chart below outlines the occupied bed days (OBD) of the unit by respective CCGs for 2015.

Patients are referred from across Hampshire, with a minority from Dorset and Jersey for specialist treatment.



| | 2015 number of patients by CCG | 2016 to date (end Oct) number | |
|---------------------|--------------------------------|-------------------------------|--|
| | | of patients by CCG | |
| Southampton | 4 | 3 (166 OBD) | |
| East Hampshire | 5 | 1 (305 OBD) | |
| Portsmouth | 7 | 3 (499 OBD) | |
| West Hants | 4 | 4 (642 OBD) | |
| Jersey | 1 | 0 | |
| Fareham and Gosport | 3 | 1 (167 OBD) | |
| Dorset | 1 | 2 (276 OBD) | |
| North East Hants | 1 | 1 (32 OBD) | |
| North Hants | 0 | 1 (61 OBD) | |
| Surrey Downs | 0 | 1 (34 OBD) | |

Risks for continuing to run Kite Unit out of current premises

The presence of potential ligature points, the inhibited lines of sight within the facility and ensuring compliance with single sex guidance were risks we needed to address.

Recently the MHA team also expressed concerns with the low roof on the building.

Current facilities are no longer fit for purpose. Solent intends to create a dynamic Neurological Rehabilitation Hub at the Western Community Hospital (WCH).

WCH already houses core neurological rehabilitation services including Snowdon Ward, a 14 bedded neurological rehabilitation unit and specialist community and early supported discharge services.

Rehabilitation, botulinum, orthotic and spasticity clinics also run from this site.

Creation of the hub will allow for effective cross fertilisation of ideas amongst professionals to improve patient care.

Other considerations

Waiting times

We will be able to take an increased number of female patients so waiting times will be reduced for this group. An improved environment will mean that new patients can be admitted in a more timely manner. In our current ward the lack of de-escalation space means that admissions have to be carefully planned and often delayed until previous patient is settled.

Travel time

For Portsmouth patients and their families travel time will be longer but for all other patients it will be shorter. As shown above the demand for Portsmouth patients using the service is reducing.

We have started exploring options and support available for families who require assistance to travel to the unit. Headway have some financial provision accessible for families who fulfil their criteria.

Public transport links to the Western show a similar level of provision as those to St James Hospital.

Environment, including housing

The unit is relocating to an existing hospital site, with existing facilities so will not impact negatively on the environment.

There shouldn't be any relatable/additional impact on housing, transport as the unit will be benefitting from existing infrastructure and services.

The utilisation of the current Kite unit in Portsmouth once vacated will be subject to review as to the best possible plan moving forwards.

Catchment area

The services that Kite provide are predominantly commissioned by the following clinical commissioning groups (CCGs): Portsmouth, Fareham and Gosport and South East Hampshire, Southampton, Dorset and West Hampshire.

Finance

There are some initial costs to Solent to ensure the new building is fully fit for purpose. There will also be removal fees and some protection of travel costs for staff. After this it is anticipated that the move will be cost neutral.

Most patients coming to the unit are funded on a cost per case basis already and thus it is expected that the service will be financially sustainable.

Communication and engagement

We have developed a communications and engagement plan. To date our proposals have been welcomed and fully supported. We have not received any objections from key stakeholders we have contacted in line with our communications and engagement plan.

Key stakeholders supporting the proposal:

Commissioners

To date, we have had full support from all stakeholders and no opposition to the proposal. We made contact made with Commissioners regarding proposed changes in September 2016. Commissioners contacted were Portsmouth CCG; Southampton CCG; West Hampshire CCG; Fareham and Gosport and South East Hants CCG. Following on from Portsmouth HOSC, we have scoped options available for families to support travel costs from Portsmouth to Southampton.

Patients and families

It is fair to state that many current patients are cognitively unable to engage meaningfully with the concept of the relocation. However, we have engaged as much as we can with our patients directly and their families. Families and carers are supportive of the move. Starting in September 2016, we engaged with patients and their relatives/carers through verbal conversations on a 1:1 basis, letters, engagement events and by phone calls.

Staff/clinicians

In the majority of cases, clinicians consulted were positive about the proposed relocation and felt it was the correct strategic direction of travel. Travel protection will be in place for staff as per Solent policy.

Other staff are learning to drive and considering relocating to the new area. Some staff are looking for alternative employment where the move impacts significantly on their personal circumstances. However all remain committed to the relocation being the correct strategic move for the service. Engagement with staff has included one to one meetings and group meetings.

Some members of the team will decide that whilst the move of the service is in the interests of the patients, they will not move cities themselves and will look for new jobs. We are monitoring the situation, and managing this to ensure that people take up the best opportunity for them whilst keeping the unit safely staffed. New employees hired in recent months are informed of the possible move and we have agreed from now to support staff with travel costs in the interim.

Healthwatch (Portsmouth; Southampton and Hampshire)

We met with Healthwatch representatives in October and discussed with them the relocation plans as well as how we intended to engage and communicate the changes with our stakeholders. We have received support from them in managing this process. Southampton Healthwatch have put out information on the proposal via their social media channels while Southampton Healthwatch have added onto their website.

HOSPs (Southampton and Portsmouth)

We engaged with LA health overview scrutiny panels from October 2016. Southampton were happy to support and did not require anything additional from us. Representatives

from Solent NHS Trust attended a Portsmouth HOSP panel in December. The panel was supportive of the proposal.

Other communications channels

We have also shared information around the proposal through a range of channels including:

- Press releases and briefing to local media
- Uploaded information on Solent NHS Trust website
- Letters to GPs