West Sussex Health and Adult Social Care Scrutiny Committee

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Improving mental health services for adults and older people in West Sussex

Report by:

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1. Summary

- 1.1 In January 2018, the NHS Coastal West Sussex, NHS Crawley and NHS Horsham and Mid-Sussex Clinical Commissioning Groups (CCGs) (now the NHS West Sussex Clinical Commissioning Group), in partnership with the Sussex Partnership NHS Foundation Trust (Sussex Partnership), began developing a preferred option to improve mental health services in West Sussex for adults and older people, including those with dementia.
- 1.2 The original preferred option focused on moving old, poor-quality and standalone wards with some dormitory accommodation in Chichester and Horsham to more modern, safer wards in Worthing and Crawley. It also gave the opportunity to create single-sex wards across West Sussex to meet national guidelines and to develop a Centre of Excellence for Dementia Care in Worthing.
- 1.3 The option supported our plans to strengthen community services to care for people in their own homes where possible by providing greater access to crisis and urgent care and home treatment services. We want our community services to keep the service user at the centre of everything we do. We will bring in specialist care to support the individual as needed, minimising duplication of information gathering. This will also help maintain continuity of staffing wherever possible, provide treatment as close to home as possible and ensure collaborative care plans set out a clear road map for the recovery journey.
- 1.4 As part of the vision and ambitions for the Mental Health Long Term Plan and our aspirations for the local system, we are proposing to set up a Centre of Excellence at the Swandean site in Worthing for people living with dementia. This would have a significant positive impact on the outcomes for people with dementia who have physical health needs as well as people with long-term physical health conditions who have cognitive and/or behavioural difficulties. It could also help streamline referral and assessment processes and smooth the pathway between services.
- 1.5 The CCGs and Sussex Partnership formally consulted on the preferred option for 12 weeks between July and October 2019, engaging with more than 500 people during this period, including members of the West Sussex Health & Adult Social Care Scrutiny Committee. A particular focus was on engaging with service

users, carers and their families, charities and interested parties such as MPs and individual members of the public.

- 1.6 Informed by an Equality and Health Inequality Impact Assessment, there was also a focus on engaging with representative groups from communities that can sometimes be less well heard, including people from the LGBTQ+, Black, Asian and Minority Ethnic and rural communities.
- 1.7 A Communications, Engagement and Equalities Steering Group was established with fortnightly meetings scheduled to oversee the public consultation and respond to questions from the public and media during this period. This included representation from West Sussex Healthwatch. Before consultation began, our documents and plans were independently reviewed and endorsed by the Consultation Institute.
- 1.8 Public Perspectives Ltd., a consultancy which specialises in research and community engagement in the public and third sectors, was commissioned to carry out an independent analysis of the feedback to the consultation.
- 1.9 All responses were independently analysed by Public Perspectives who presented a final report, which provided us with valuable feedback and input. This report, together with all other evidence and information, was used to inform a refined and revised preferred option which we believe better represents the needs of people in West Sussex.
- 1.10 One of the critical outcomes of the refined option has been a revised approach to single-sex wards, resulting in the retention of some mixed-sex wards with areas that are segregated between men and women. We also propose to retain mixed communal lounges alongside segregated female lounges to acknowledge individual choice. All wards for people with dementia will remain single-sex. These proposals remain compliant with all appropriate guidance.
- 1.11 In response to feedback around transport issues, we have proposals to support people who may be most adversely affected by the travel implications of our proposals, such as travel costs where needed for families visiting patients at the time of transfer and overnight stay facilities for relatives of patients.
- 1.12 The revised option also means making use of, earlier than planned, inpatient beds in the north of the county currently accessed by Surrey and Borders Partnership NHS Foundation Trust. This will provide three extra beds for adults of working age to support any increased demand.
- 1.13 Our revised option has been set out in a final Decision Making Business Case document which has been reviewed and agreed by NHS England and Improvement. An executive summary of this document is attached as Appendix 1.
- 1.14 Also accompanying this document is the independent analysis report on the findings of the consultation (Appendix 2) and the Equality Health and Impact Assessment (Appendix 3) which was reviewed throughout the consultation process and updated to reflect the revised proposal.

1.15 The finalisation of these proposals paused temporarily during the initial system response to Covid-19. The revised proposal was reviewed by Sussex Partnership Board in December 2020, recommending this to the West Sussex CCG Governing Body who approved the proposals at its meeting in February 2021, prior to submitting the outcome of this to the West Sussex Health & Adult Social Care Scrutiny Committee.

2. Focus for scrutiny

- 2.1 The Committee is asked to scrutinise the contents of this report. Key areas for scrutiny include:
 - Changes made to the original preferred option presented to the Health & Adult Social Care Scrutiny Committee at its formal meeting on Wednesday 12 June 2019.
 - (2) Details of the activity undertaken during the public consultation, the issues raised and how they have been addressed in the final revised proposals.
 - (3) A proposed implementation timetable.

3. Details

3.1 Changes to the original preferred option presented to the HASC at its formal meeting on Wednesday 12 June 2019.

3.1.1 The original preferred option has been revised following consultation in order to ensure the feedback informed the proposal. The table below compares the revised option, post-consultation, with the original pre-consultation preferred option.

Patient group:	Pre- consultation configuration	Preferred option - Patients were to move to	Post- consultation proposed action:	Patients to move to:
Older people with mental health problems	Move 12-bed mixed-sex ward at Harold Kidd Unit, Chichester (Orchard)	Single-sex wards at Meadowfield Hospital, Worthing and Langley Green Hospital, Crawley	Move 12-bed mixed-sex ward at Harold Kidd Unit, Chichester (Orchard Ward)	Mixed-sex wards at Meadowfield Hospital, Worthing, and Langley Green Hospital, Crawley
Male patients with dementia	Move 10-bed single-sex ward at Harold Kidd Unit (Grove)	Refurbished single-sex ward at Salvington Lodge (The Burrowes), Worthing	Move 10-bed single-sex ward at Harold Kidd Unit, Chichester (Grove Ward)	No change from Pre- Consultation Preferred option

Female patients with dementia	Move 12-bed single-sex ward at Horsham Hospital (Iris Ward)	New single-sex ward at 1 st Floor, Salvington Lodge	Move 12-bed single-sex ward at Horsham Hospital (Iris Ward)	No change from Pre- Consultation Preferred option
Male and female adults with mental health problems	16-bed Oaklands Ward, Chichester, to become 16-bed male only ward. All other wards at Meadowfield, Worthing, and Langley Green, Crawley, to become single- sex	Single-sex wards at Meadowfield Hospital, Worthing and Langley Green Hospital, Crawley	16-bed Oaklands Ward, Chichester, remains male and female. All adult wards at Langley Green, Crawley, and Meadowfield Hospital, Worthing, remain mixed- sex wards	Wards will remain mixed- sex rather than become single- sex.

3.2 Details of the activity undertaken during the public consultation, the issues raised and how they have been addressed in the revised option.

- 3.2.1 The public consultation ran for a 12-week period from Wednesday 17 July to Friday 11 October 2019. This was preceded by a lengthy period of preconsultation engagement with a range of stakeholders including service users and carers, their representative bodies, charities, staff and other interested people. This helped inform our proposals before, during and after the formal consultation was complete. The outcome of the consultation and feedback is detailed in the independent analysis report on the findings of the consultation (Appendix 2)
- 3.2.2 Throughout the design and consultation phase, we continually tested our proposals and consultation approaches against an Equality and Health Inequalities Impact Assessment (EHIA) which was reviewed and updated throughout the process, in line with good practice.
- 3.2.3 The final EHIA is attached as Appendix 3.

3.2.4 Public consultation – main themes

Transport and Travel			
Feedback Received	How we responded and how the feedback informed the final proposals		
There was a general view that moving services from certain areas would increase the amount of travel for some service users, staff, carers and families. This presented a particular	• We decided to maintain the 16-bed Oaklands Ward in Chichester as a mixed-sex ward which means that there will still be inpatient facilities for women in the area.		

issue for residents of Chichester where access to public transport is already challenging. Having to manage travel inconveniences while a family member is unwell created more anxiety for people.		We have also decided to keep mixed-sex wards across the county for adults of working age and older people which means that service users based at Chichester will now only have to move to existing wards in Worthing, subject to bed availability and patient choice.
	•	Those most affected by the need to travel further will receive help in the form of mileage and public transport allowances and possible community transport/minibus shuttles between relevant locations. There will also be provision for families to have overnight stay with the patients on hospital sites.

Single Sex Wards

Feedback Received	How we responded and how the feedback informed the final proposals		
Concerns around the proposed changes to make all inpatient wards into single-sex wards. Feedback indicated that the proposals did not accurately reflect a real life environment for people while some felt that creating single-sex environments might inadvertently reinforce negative gender stereotypes. How to meet the needs of trans or non-binary patients was also raised as a concern. Most staff expressed a view that mixed sex wards can offer a more stable environment. Although there was considerable negative feedback for single sex wards, there was strong support for the need to have single-sex wards for those patients with dementia in order to ensure these patients the privacy and dignity they deserve.	 Following advice from the Care Quality Commission (CQC) and further support from Healthwatch West Sussex and Healthwatch England, we determined that we could keep all adult and older people wards as mixed- sex, although bedrooms, bathrooms and female lounges will be segregated and there will also be mixed-sex communal areas. There will also be flexibility to accommodate the needs of any transgender or non-binary inpatients so they can maintain their dignity, privacy and safety. All our dementia wards will remain single- sex. 		
Increased Bed Numbers			
Feedback Received	How we responded and how the feedback informed the final proposals		
Concerns were raised, that increasing the ward sizes, as set out in the preferred option, might have implications for the therapeutic environment and for staff morale and	We have reviewed the arrangement with Surrey and Borders partners to release 9 beds occupied at Langley Green Hospital from April 2021 (earlier than originally planned). Surrey and Borders have secured alternative provision locally for their patients in line with their		

any subsequent impact on recruitment	strategy for hospital improvements. This will
and retention.	provide a net increase of three beds for West
	Sussex over and above the original proposal.

Strengthening Community Services			
Feedback Received	How we responded and how the feedback informed the final proposals		
Almost 80 per cent of people who responded to the survey believe that people should be cared for in their own home wherever possible. They said that there should be investment and improvements in community provision to help mitigate against any negative aspects the final preferred option.	In our DMBC we have set out how we intend to improve and strengthen community services in future, including investment in these services.		
Parking & Traffic Concerns			
Feedback Received	How we responded and how the feedback informed the final proposals		
Some people living near Sussex Partnership's Swandean site in Worthing said the site is at more than full capacity. The increase in cars due to the plans will make matters worse and cause road safety problems.	Sussex Partnership is developing a parking strategy to identify potential solutions and create more parking provision on the Swandean site to alleviate the pressure on surrounding roads. This will include engagement with local people. It will also enable staff to make use of any potential transport provision which is organised between the affected sites.		
Continuing Involvement			
Feedback Received	How we responded and how the feedback informed the final proposals		
Some service users, carers and staff said they wanted continuing involvement in refining the plans and influencing how they are implemented to reduce any negative impacts	Both West Sussex CCG and Sussex Partnership are committed to making sure service user, carers, staff and governors' engagement will continue throughout any redesign of services and this will be reflected in the implementation plan for these proposals. We will carry out a post-project evaluation which will involve service users, carers and staff and a full range of wider stakeholders.		

3.3 Proposed implementation timetable is set out below.

3.3.1 Implementation February 2021 - July 2022:

Action	Date
Phase One	
Staff consultation	February/March 2021
Close Grove and Iris wards and transfer to newly refurbished unit at Swandean	March/April 2021
Implement agreed transport solutions	March/April 2021
Project/Programme evaluation review	April 2021
Start environmental/estates upgrades for 1 st Floor, Salvington Lodge, Worthing.	April 2021
Additional nine adult working age beds provided through termination of Surrey and Borders contract	April 2021
Start environmental/estates upgrades for adult mixed gender wards	April 2021
Clinical and HR evaluation review of Dementia ward (Grove and Iris) moves	May 2021
Single gender zones created within adult mixed gender wards (following completion of environmental upgrades)	May 2021
Completion of environmental/estates upgrades for adult mixed gender wards	August 2021
Close Harold Kidd Unit and transfer Orchard ward to Opal ward, Langley Green Hospital	October 2021
Clinical and HR evaluation review of Opal ward move	November 2021
Project/Programme evaluation review	December 2021

Phase Two	
Completion of environmental/estates upgrades for 1 st Floor, Salvington Lodge	April 2022
Transfer back any Worthing patients from Brunswick Ward, Mill View to dementia beds on Swandean Hospital site	May 2022
Create new West Sussex specialist dementia Centre of Excellence, Swandean Hospital site	June 2022
Final Project/Programme evaluation review	July 2022

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Appendices

- 1. Decision Making Business Case Executive Summary
- **2.** Improving mental health services in West Sussex: independent report of consultation results October 2019.
- **3.** Equality and Health Inequalities Impact Assessment.

Background papers

Delivering safe, effective, quality care: Improving mental health services for adults and older people in West Sussex - Decision Making Business Case (available on request).

The following documents regarding the public consultation can be found here: <u>https://www.sussexpartnership.nhs.uk/west-sussex-consultation</u>

- Pre-consultation business case
- Report on pre-engagement activity
- Quality impact assessment
- Transport analysis
- Transport review group response
- Equality and Health Inequalities Impact Assessment.
- Data protection impact assessment
- Communications and engagement plan
- Community services overview
- Consultation Frequently Asked Questions
- Supporting Transgender Service Users policy.