

SUBMISSION TO COMMUNITY, HOUSING AND HEALTH (OVERVIEW AND SCRUTINY)

COMMITTEE

Date: 31st January 2012

Agenda Item: 5a

Contact Officer: Tim Matthews

Telephone Number: 01543 308755

JOINT REPORT BY THE CABINET MEMBER FOR HOUSING, HEALTH AND ENVIRONMENTAL PROTECTION AND THE DISTRICT COUNCIL'S REPRESENTATIVE ON THE STAFFORDSHIRE COUNTY COUNCIL'S HEALTH SCRUTINY COMMITTEE

CONSULTATION ON PROPOSED CHANGES TO INPATIENT MENTAL HEALTH SERVICES ACROSS SOUTH STAFFORDSHIRE

1. Purpose

- 1.1 To advise Members that the South Staffordshire Primary Care Trust and South Staffordshire and Shropshire Healthcare NHS Foundation Trust have initiated a consultation regarding the future of local inpatient services for mental health. The consultation period ends on 16th February 2012 (having been extended from 16th January 2012)
- 1.2 To outline the work undertaken to date on the consultation process.
- 1.3 To consider and comment on the District Council's proposed response to these proposals.

2. Background

- 2.1 In October 2011, the South Staffs PCT began a consultation process on these proposals, the original period for the process being from 24th October until 16th January 2012.

The Proposals

- 2.2 The Summary of the Consultation is attached at **Appendix A** and the web link to the process including access for the full document is www.southstaffordshirepct.nhs.uk/HaveYourSay/form/mental-health-inpatient-services.asp
- 2.3 The document sets out:
 - what the consultation is about
 - why mental health services need to change
 - how mental health services have been strengthened
 - how it is proposed to redesign services
- 2.4 It then sets out 5 options –
 - Option 1** Do nothing
 - Option 2** Reduce inpatient beds (18 acute and 7 older adults) across South Staffordshire
 - Option 3** Remove all beds (18 acute and 7) from the Margaret Stanhope Unit, Burton
 - Option 4** Remove all beds (20 acute and 11) at the George Bryan Unit Centre, Tamworth
 - Option 5** Close the acute ward (20 acute and 14 older adults) at St George's Hospital, Stafford
- 2.5 The preferred option stated in the consultation document is Option 3. The document suggests that this option addresses all the principles raised through the engagement and involvement of all those interested in local mental health services as part of the No Delays project. It will ensure all inpatients will have single bedrooms and increased safety and privacy and access to specialist skills and expertise. This option offers an efficient use of available resources.

- 2.6 In conclusion, the document states that the preferred option will deliver the following inpatient based quality improvements;
- Single bedrooms on all wards
 - Safest number of beds needed based on current community services
 - Improved safety and privacy
 - Better access to external space
 - Better staff back up, support and shared expertise
 - Less inequality in terms of service provision and service standards
 - Most efficient and effective use of resources

Scrutiny of the Proposals

- 2.7 The Staffordshire Health Scrutiny Committee has a statutory role in considering any proposals which would result in a substantial change or variation in local health services. This Committee deals with all issues which have an impact across several Districts (or indeed Countywide). Each of the eight District and Borough Councils nominate an elected member to represent them on this Committee; Lichfield District Council's nominee is Councillor Mrs Constable.
- 2.8 Councillor Mrs Constable attended the public consultation event about the proposed changes to inpatient mental health services which was held at Tamworth on 5th December 2011 where a comprehensive presentation of the proposals was made. She has also attended (or has been represented at) Staffordshire County Council Health Scrutiny meetings where the issue has been discussed. During their meeting in December, Members of this Committee raised issues regarding the extent to which community services were sufficiently well developed to reduce the number of inpatient beds in the context of future demand. A further meeting took place in January 2012; South Staffordshire and Shropshire Healthcare NHS Foundation Trust and the Primary Care Trust were asked to send representatives to this meeting and supply a breakdown of current bed usage and the methodology for the number of beds required.

Local consultation

- 2.9 Taking account of normal arrangements as per 2.7 above, Councillor Mrs Constable leads on health scrutiny issues for the District Council. To assist her in this process in relation to this particular consultation, a copy of the full and summarised consultation document was circulated to all Committee Members in November with a request for comments by early December.
- 2.10 Based on the information available and presented at the public meeting, a draft response to the document was prepared and circulated to Members of the Community, Housing and Health Overview and Scrutiny Committee for comments. Having taken account of the comments received, the proposed consultation response is attached at **Appendix B**.

3. Recommendation

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| 3.1 To consider and comment on the District Council's proposed response to the consultation (attached at Appendix B) |
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4. Financial Implications

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| 4.1 None which will directly impact on the District Council's budget |
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5. Strategic Plan Issues

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|---|
| 5.1 This relates to the strategic theme of " Supporting People " <i>A district where everyone shares in an improved quality of life and community wellbeing.</i> |
| 5.2 Key outcomes would include how we seek to "improve health and wellbeing of the whole population" and our actions "through community leadership". |

6. Crime and Community Safety Issues

6.1 None.

7. Risk Management Issues

Risk Description	Likelihood/Impact	Status	Countermeasure
Reduction of quality of current services to patient	Medium	Reputational/contractual	PCT to Monitor customer feedback/ provider management
Reduction in uptake from customer/cost	Medium	Customer/Citizen	PCT to monitor use of service and plan to mitigate this risk
Adverse publicity	Medium	Reputational/Citizen	PCT to keep the public informed by the issue of press releases and keeps interested parties informed prior to new services commencing

Background Documents:**Appendix A** - Summary Consultation document**Appendix B** – Draft response from the District Council

Summary of the Consultation on proposed changes to inpatient Mental Health services across South Staffordshire



Consultation Period:
24th October 2011 – 16th January 2012

This document is also available in other languages, large print and audio format upon request.

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هذه الوثيقة متاحة أيضا بلغات أخرى والأحرف الطباعية الكبيرة وبطريقة سمعية عند الطلب.

এই ডকুমেন্ট অন্য ভাষায়, বড় প্রিন্ট আকারে এবং অডিও টেপ আকারেও অনুরোধে পাওয়া যায়।

Tento dokument je na vyžádání k dispozici také v jiných jazycích, ve velkém tištěném formátu a zvukovém formátu.

این مدرک همچنین بنا به درخواست به زبانهای دیگر، در چاپ درشت و در فرمت صوتی موجود است.

Ce document est également disponible dans d'autres langues, en gros caractères et en cassette audio sur simple demande.

આ દસ્તાવેજ વિનંતી કરવાથી બીજી ભાષાઓ, મોટા છાપેલા અક્ષરો અથવા ઓડિઓ રચનામાં પણ મળી રહેશે.

ئەم بەلگەییە ھەر ھەما بە زمانەکانی کە، بە چاپی درشت و بە شریتی تەسجیل دەس دەکەوێت

本文件也可应要求，制作成其它语文或特大字体版本，也可制作成录音带。

Dokument ten jest na życzenie udostępniany także w innych wersjach językowych, w dużym druku lub w formacie audio.

ਇਹ ਦਸਤਾਵੇਜ਼ ਹੋਰ ਭਾਸ਼ਾਵਾਂ ਵਿਚ, ਵੱਡੇ ਅੱਖਰਾਂ ਵਿਚ ਅਤੇ ਆਡੀਓ ਟੇਪ 'ਤੇ ਰਿਕਾਰਡ ਹੋਇਆ ਵੀ ਮੰਗ ਕੇ ਲਿਆ ਜਾ ਸਕਦਾ ਹੈ।

Waxaa kale oo lagu heli karaa dokumentigaan luqado kale, daabacaad ballaaran, iyo cajal duuban haddii la soo waydiisto.

Hati hii vile vile inapatikana katika lugha nyingine, kwa maandishi makubwa na katika sauti kwa maombi.

நீங்கள் கேட்டுக்கொண்டால், இந்த ஆவணம் வேறு மொழிகளிலும், பெரிய எழுத்து அச்சிலும் அல்லது ஒலிநாடா வடிவிலும் அளிக்கப்படும்.

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درخواست پر یہ دستاویز دیگر زبانوں میں، بڑے حروف کی چھپائی اور سننے والے ذرائع پر بھی میسر ہے۔

Consultation Summary

What this consultation is about?

Over the past two years, the people who use, support, provide and fund mental health services in South Staffordshire have been considering how these services can best meet the needs of our local population. We have been talking and listening to staff, patients, service users, carers, local support groups, voluntary groups and local commissioners.

When my illness was at its worse my Consultant Psychiatrist suggested that I should go into hospital. This was the most awful idea, the thought of feeling so ill, being away from my home and family was too scary to think about. Fortunately I had brilliant care at home and didn't need to go into hospital. I am certain that I got better much quicker at home.

Service User

These discussions have led to developments and improvements in community services across South Staffordshire and changes to the way services are provided. Local views on the proposals are being sought by South Staffordshire Primary Care Trust in Partnership with South Staffordshire and Shropshire Healthcare NHS Foundation Trust, which runs the majority of the hospital and community-based mental health services currently available in South Staffordshire.

This consultation document is about the future direction of mental health inpatient services in South Staffordshire. It seeks views on how people would like to see inpatient

services delivered following the strengthening of community mental health services and the reduced need for inpatient beds in South Staffordshire.

Local views on the proposals will be sought by South Staffordshire Primary Care Trust in partnership with South Staffordshire and Shropshire Healthcare NHS Foundation Trust, which runs the majority of the hospital and community-based mental health services currently available in South Staffordshire, and with the Joint Commissioning Unit, who commission a wide range of mental health services for the people of South Staffordshire.

Why our mental health services need to change?

Locally we have been looking at how we can make sure that our local services are delivered in line with best practice. We want to ensure that we are delivering the safest, highest quality care in an efficient way which focuses on the recovery of our service users.

Mental health impacts on everything we do as individuals. It affects our ability to think, to work, to maintain personal relationships, to take part in social activities and generally to enjoy what life has to offer.

One in four of us will experience a mental health problem of some kind during our lives. Around half of all women and a quarter of men will be affected by depression at some point. People with a physical illness have twice the rate of mental health problems compared to the general population. People who have been abused, or have been victims of domestic violence, are also especially vulnerable.

Good mental health services are therefore vital to ensuring that those of us who are affected receive the care and support we need.

How we have strengthened community mental health services

We have invested in the following mental health services provided in Community Settings:

- Psychological therapies
- New day opportunity services.
- A short term intervention service where people can stay for up to three nights.
- An intensive rehabilitation recovery service.

All have been developed in partnership with the voluntary and third sector.

In 2010, South Staffordshire Primary Care Trust invested £792,000 to develop the Crisis Resolution and Home Treatment Team (CR/HTT).

This provides a 24 hour, 7 days a week; community based service and also acts as the gatekeeper for inpatient beds.

- The support this team provides ensures that only those people



Instead of hospital admission I chose this one, and for me it was the right choice.

Service user, feedback on CR/HTT

who really need to be in hospital are admitted.

- Specialist services have also been developed for people with dementia, including memory services and care for people with challenging behaviour. Night time, home based respite for carers also helps the cared for person to remain independent in their own home.
- We have altered the way that people access our services and changed the focus from being based on age, to being based on the need of the individual.
- We have introduced new ways of working in our hospitals which help ensure those people who need specialist inpatient care receive this quickly and are supported to return home as soon as possible.
- Because of the changes we have already made, and because all the evidence tells us that this is better for people's mental well-being, and is what service users prefer, we now need fewer inpatient beds.

In addition to the significant developments already described, a continued programme of development and improvement to community services is in place.

How we propose to re-design inpatient mental health services

Admission to hospital will be based on need, not age and working with the specialist teams each person will be looked after according to their individual needs and helped to return back home as soon as is right for them.

The options for providing in patient mental health care have been looked at very carefully. Each option has been measured against a set of criteria, or important things to consider. These criteria covered;

- Quality and safety of services.
- Effective use of resources.
- Whether the option would continue to be good for service users.
- Whether the option offered opportunities for future development of services.
- Knowledge, training, development and engagement of staff.
- How choosing this option might affect other aspects of mental health services provided.

Five options have been considered;

We have looked at a variety of evidence including the types of patients accessing services and the time they spend on the various units. We have considered the suitability of the buildings we currently use. We have piloted having fewer inpatient beds and audited whether this meant service users had any problems.

The various options which have been considered are described below;

Option One

Do nothing, inpatient services would stay as they are currently.

This option scored the lowest as it does not enable services to be modernised to ensure best practice.

Option Two

Reduce acute inpatient beds by 18 and older adult beds by 7 through closures on all mental health wards across South Staffordshire.

This option does create a safe number of inpatient beds but does not allow for the best use of resources. Every inpatient site requires significant service costs in order to run, for example access to support services and on site medical presence. The greater number of inpatient sites the more is spent on administrative and other support services and the less efficient the service is overall.

Service users and staff are also less able to benefit from the expertise and specialist skills found in larger units.

Option Three

Removal of all beds at the Margaret Stanhope Centre, Burton on Trent, resulting in a loss of 18 acute inpatient beds and 7 older adult beds and re-provide one older adult bed at George Bryan Centre, Tamworth. This option addresses all the principles raised through the engagement and involvement of all those interested in local mental health services as part of the No Delays project. It will ensure all inpatients will have single bedrooms and increased safety and privacy and access to specialist skills and expertise. This option offers an efficient use of available resources.

Traditionally whilst we have tried to offer someone an inpatient bed near to where they live it's not always been possible, either because the particular needs of that person would best be met in another hospital, or just because all the beds in their local unit were full. Now there are many more options for care and support to keep someone in their own home and out of hospital, and if they do need to be admitted, they will probably be in hospital for a much shorter time.

Dr Abid Khan, Consultant Psychiatrist

Option Four

Removal of all beds at the George Bryan Centre, Tamworth, resulting in a loss of 20 acute beds and 11 older adult beds.

This option would mean closing a higher number of beds which would result in the total number of inpatient beds across South Staffordshire being too low to provide safe services in line with national guidance and therefore would require some investment to increase the beds on other sites to ensure there are enough beds for South Staffordshire.

Option Five

Close an acute ward and older adult ward at St George's Hospital, Stafford, resulting in a loss of 20 acute beds and 14 older adult beds.

St George's Hospital is a large, mostly purpose built site and offers high quality, ensuite, single bedded accommodation. As a large unit it also has good support structures offering good access to specialist skills and expertise and allowing the delivery of services in the most efficient way. This option would also require investment to increase the bed numbers on another site or the reconfiguration of wards on this site to ensure a safe number of beds available for South Staffordshire residents.

Option Information

Site	Ward	Number of Beds
St Georges Hospital, Stafford	Chebsey Ward – Acute functional mental health	20
	Brocton Ward – Acute functional mental health	20
	Norbury Ward – Intensive Care functional mental health	10
	Bromley Ward – Older people with mental health problems	14
	Baswich Ward – Older people with organic mental health conditions	12
Margaret Stanhope Centre, Burton-on-Trent	Acute Ward – Acute functional mental health	18
	Older Adults Ward – Older people with mental health problems	8
George Bryan Centre, Tamworth	West Wing - Acute functional mental health	20
	East Wing - Older people with mental health problems	11

The Preferred Option

In response to the need for less inpatient beds the proposal is to reduce the number of sites where inpatient mental health care is provided.

The quality of the environment in the different inpatient units across South Staffordshire currently varies considerably. Each site also needs access to support services such as porters and cleaners, and an onsite medical presence. The more inpatient sites there are, the more is spent on administrative and other support services and the less efficient the service is overall. There are also benefits which come from being in larger units such as support from staff on other wards if needed, more opportunity for specialist services to be provided and more concentration of staff expertise which supports good practice and developing new ideas.

We believe that running services from two inpatient sites will allow the best balance between geographic accessibility and safety, quality and efficiency. At present, it would not be viable to run from only one site – such as St Georges Hospital – because the site is not large enough.

The preferred proposal in this document is the removal of all of beds at the Margaret Stanhope Centre in Burton and concentrate mental health inpatient services for the people of South Staffordshire in Stafford and Tamworth.

In conclusion, the preferred option will deliver the following inpatient based quality improvements;

- Single bedrooms on all wards.
- Safest number of beds needed based on current community services.
- Improved safety and privacy.
- Better access to external space.
- Better staff back up, support and shared expertise.
- Less inequality in terms of service provision and service standards.
- Most efficient and effective use of resources.

Having your say

Whilst we would especially welcome your views on the specific points of the consultation questions, you are welcome to comment on or ask questions about any part of this consultation document.

You can have your say in a number of different ways but we would prefer you to answer the consultation questions. You can either do this online at:

www.southstaffordshirepct.nhs.uk/HaveYourSay/activeConsultations.asp

or by returning the consultation questions form provided with this summary to

FREEPOST RSCL-CGYL-TURK

**South Staffordshire Primary Care Trust,
107 – 111 Anglesey Court, Towers Plaza,
Wheelhouse Road,
Rugeley, Staffordshire, WS15 1UL**

We are also holding a number of public consultation events. The planned consultation events are:

Monday 21st Nov – Arthur Findlay Centre, 96a Stone Road, Stafford, ST16 2RS – 5.30pm start

Thursday 24th Nov – Burton Albion FC, Pirelli Stadium, Princess Way, Burton, DE13 0AR – 5.30pm start

Monday 5th Dec – Main Hall, Wiggin Centre, Sir Robert Peel Hospital, Tamworth – 6pm start

If you would like to attend any of the events above please confirm your attendance. You can do this by either;

- visiting the PCT Website: **www.southstaffordshirepct.nhs.uk/HaveYourSay/activeConsultations.asp**
- contacting us by email: **consultation@southstaffordshirepct.nhs.uk**
- or by calling 0845 602 6772 ext 1529

You can also express your views and comments by writing to the freepost address above or by emailing your views to **consultation@southstaffordshirepct.nhs.uk**

We ask that your comments are received by 5pm on Monday 16th January 2012.

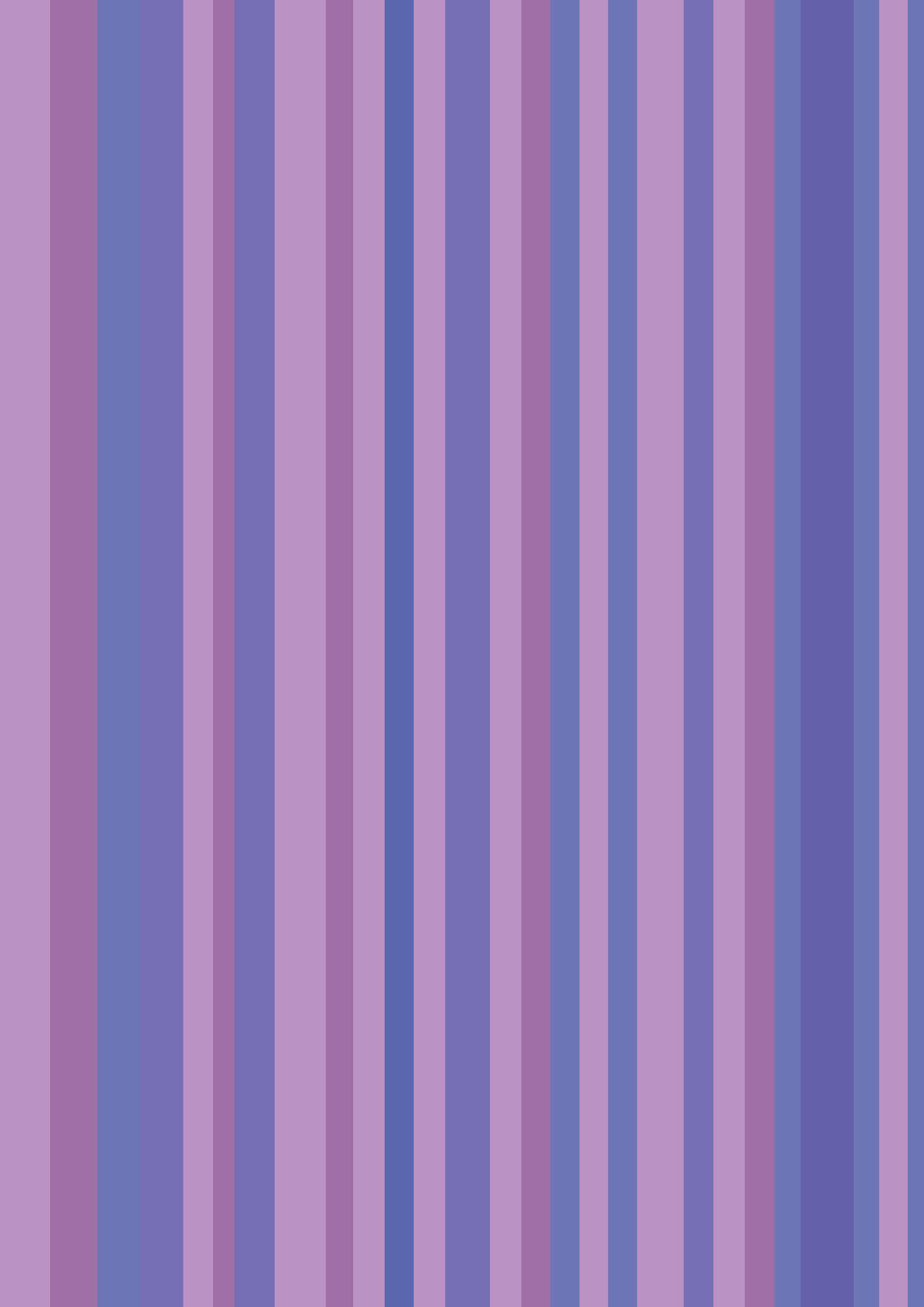
Any responses received after this time will not be included in the analysis.

It is the intention of the project team to publish a summary document of the responses received and as such we will not accept anonymous responses.

Contact details for more information or any general questions

Please call: 0845 602 6772 ext 1529

Email: consultation@southstaffordshirepct.nhs.uk



Draft response from Lichfield District Council.

Our Proposals – Consultation Questions

1. **Please tell us what you think about the proposed move of services away from hospital care to a more home/community based service.** *(Please pick one of the answers below and add your comments)*

strongly agree agree Neither agree nor disagree
 disagree strongly disagree

We agree but with the proviso that reassurance is given by the provider that adequate staff resources exist to provide for crisis intervention to patients as required. We are also concerned that the reduction in beds could compromise patient care, making it difficult for patients in need to access beds or increasing the risk of premature discharge. The impact of the changes needs to be kept under ongoing review to guard against unintended consequences.

2. **Please tell us what you think about our preferred option as outlined below**
Our preferred option is the removal of all beds at the Margaret Stanhope Centre in Burton and concentrate mental health inpatient services for the people of South Staffordshire in Stafford and Tamworth *(Please pick one of the answers below and add your comments)*

strongly agree agree Neither agree nor disagree
 disagree strongly disagree

We agree and accept the business case for the closure of the Margaret Stanhope Unit due to outmoded design facilities etc. However, we would wish that Mrs Margaret Stanhope's contribution to local health services continues to be publicly acknowledged and recognised and that Mrs Stanhope herself is properly consulted and informed about the plans for the unit.

3. **Please tell us what you think are the most important factors to deliver high quality inpatient services for the future, with one being the most important factor and five being your least important factor.** *(Please mark the corresponding circle – only one per line)*

	1	2	3	4	5
A welcoming environment for service users	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
A welcoming environment for carers and relatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
An environment which makes service users feel safe and cared for	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Being admitted quickly when needed	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Being able to go home quickly when needed	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Concerns that bed blocks are avoided

4. **Please rank the available options in order of preference, with one being your most favoured option and five being your least favoured.** *(Please mark the corresponding circle – only one per line)*

	1	2	3	4	5
Do nothing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
Reduce beds on all mental health wards in South Staffordshire	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Remove all beds from the Margaret Stanhope Centre	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- Remove all the beds from the George Bryan Centre
- Close wards at St Georges Hospital

5. **Please tell us what you think are the best ways that inpatient services should be further developed.** *(Please write your answer in the space below)*

Actively seek patient and relatives / carers feedback and respond promptly.

6. **Do you have any other ideas for improving inpatient services that you think that we should consider?** *(Please write your answer in the space below)*

Introduce a critical friend mechanism to allow for regular monitoring of current services.

About You

7. **Name:** Councillors Ian Pritchard (Cabinet Member - Housing, Health and Environmental Protection, Lichfield District Council) and Mrs Brenda Constable (the District Council's representative on the Staffordshire Health Scrutiny Committee)

8. **Contact Details (optional):** Tim Matthews, Environmental Health Manager – support officer for the Committee

9. **In what capacity are you completing the survey?** *(Please tick one of the answers below)*

- Service user Unpaid carer
 Member of the public NHS Staff Mental Health Support Organisation

Local Authority Health Scrutiny Role

10. **In what area do you live?** *(Please pick one of the answers below)*

- Burton Cannock Chase East Staffordshire Lichfield
 South Staffordshire Stafford Tamworth

11. **Are you** *(Please pick one of the answers below)*

- Male Female

12. **Please tell us your age** *(Please pick one of the answers below)*

- 16-35 36-55 56-65 65+
n/a

13. **Where did you hear about this consultation?** *(Please pick one of the answers below)*

- Sent consultation by post
 Word of mouth
 Local newspaper
 Local organisation
 Leaflet
 GP surgery / healthcare location
 Website

- E-mail
- Local media

14. To which of these ethnic groups would you say you belong? *(Please pick one of the answers below)*

- White British
- White Irish
- Any other white background
- Mixed – White Caribbean
- Mixed – White Black African
- Mixed – White and Asian
- Any other mixed background
- Asian or Asian British Indian
- Asian or Asian British Pakistani
- Any other Asian background
- Black or Black British Caribbean
- Black or British Black African
- Any other Black background
- Chinese
- Other ethnic group

Thank you for completing the Consultation Questions.

Please post the completed feedback form to the following freepost address (no stamp needed!):

**FREEPOST RSCL-CGYL-TURK
South Staffordshire Primary Care Trust
107 – 111 Anglesey Court, Towers Plaza
Wheelhouse Road, Rugeley, Staffordshire WS15 1UL**

We ask that your answers and feedback are received by 5pm on Monday 16th January 2012. Any responses received after this time will not be included in the analysis.

It is the intention of the project team to publish a summary document of the responses received and as such we will not accept anonymous responses.