



Clinical Services Reconfiguration (CSR Programme)

Progress Briefing to Slough Health Overview and Scrutiny Committee

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1. Introduction

The purpose of this report is to provide the Slough Health Overview and Scrutiny Committee with an update report on the progress in transferring the mental health inpatient services from the three East Berkshire Wards (one each at Wexham Park Hospital in Slough, St Marks Hospital in Maidenhead and Heatherwood Hospital in Ascot). These sites were recognised as not fit for purpose for the provision of specialist inpatient services and following a great deal of work to consider the best way of meeting the needs of patients within available resources, NHS Berkshire Primary Care Trust approved the transfer of these services to Prospect Park Hospital with the support of the GP Commissioners and specialist mental health clinicians in January 2012.

This report supplements the previous reports presented to the Slough Overview and Scrutiny Committee in January 2013 and May 2013. Progress against the work

Prospect Park Transition

This work is focused on the preparation of Prospect Park Hospital to provide refurbished wards, ensuite bedrooms and the additional beds required, and includes reconfiguration of the existing services and necessary changes to the buildings on site.

East Community Services Transition

This work to vacate the accommodation at Wexham Park and Heatherwood Hospitals is almost complete and will enable a number of community services to remain in East Berkshire when the inpatient services moves to Reading are complete. These services include the Therapeutic Day Unit, Complex Needs and Eating Disorders services Outpatient services and medical records, memory clinics and community mental health services for older people.

National Dementia Bid Funding

In the summer of 2013 BHFT were successful in bidding for £1m of capital funds under the Dementia Friendly Environments National Pilot Capital Improvement Initiative. The money is being used to provide extensive improvements to two wards at Prospect Park. Rowan Ward has been transformed into a state of the art Dementia ward with a vastly improved environment for patients suffering from dementia including sensory gardens and lighting, specialist flooring to prevent and reduce the impact of falls. Dementia friendly décor, fixtures and fittings and artwork to stimulate memory and discussion are also part of the investment. This work has resulted in a slight delay to the relocation of Charles Ward from Maidenhead but will result in improvements to the environment that is greatly above those originally planned under the CSR Programme. The new ward will be complete on the 6th January 2014.

The remaining money is being spent on providing similar improvements to the Oakwood Community Ward which also caters for patients with dementia. This work will be complete by the end of March 2014.

Completion Business Case Conditions

Approval of the CSR programme included a number of business case conditions:

1. The completion of an implementation plan with clear gateways to mark achievement of key targets prior to progression to the next stage.

- **2.** The establishment of appropriate community services to minimise the need for admission to hospital prior to the closure of East Berkshire Inpatient beds.
- **3.** The phasing of closure of East Berkshire facilities to prioritise Ward 10.
- **4.** The establishment of transport support, prior to transfer of any inpatient services, in line with the outlines provided to date.
- 5. Completion of feedback to CCGs on patient experience at Prospect Park Hospital, Ward 10 at Wexham Park Hospital, Ward 12 at Heatherwood Hospital and Charles Ward at St Marks Hospital
- **6.** The inclusion of required quality improvement of inpatient services in contractual arrangements, either through CQUIN or quality schedules. The provision of transport support will also be included in the contractual arrangements with Berkshire Healthcare Trust, ensuring a transparent approach to use of funding, patient and carer satisfaction with the support and an understanding of the level of need.

Programme Management

BHFTs Chief Operating Officer (David Townsend) is the Senior Responsible Officer for the programme and is supported by a dedicated Programme Manager (Karen Watkins). A project Team and Programme Board are in place to manage and oversee delivery of the programme. A Commissioner Monitoring Group is in place to ensure that the programme is progressing and that the business case conditions are being met.

The Commissioner Monitoring Group monitors overall delivery of the programme and the conditions above. The group includes the commissioning leads from the Berkshire Commissioning Support Unit, GP commissioning leads for Mental Health in East Berkshire and Programme Leads from Berkshire Healthcare NHS Foundation Trust. Key programme milestones and agreed measures of service performance are monitored by the group.

A Communications Strategy is in place and a communications lead identified for the programme. Periodic newsletters and stakeholder updates are regularly circulated across the health system and to various user and carer groups.

2. Programme Status

A summary of the status of the remaining workstreams and business case conditions is as follows:

Workstream / Business Case	RAG	Comments
Condition	Status	
Workstreams		
Prospect Park Transition		Transition works is almost complete. Work to create a
		new state of the art dementia ward is complete and
		Charles Ward is due to relocate to Prospect Park on the
		9 th January. The work to transform Hazelwood Ward for
		the move of Ward 12 from Heatherwood has started,
		but the major 14 week build programme cannot start till
		a new Deed of Variation with the Prospect park PFI
		Provider is completed. This work is currently expected to

	be complete by May
East Community Services	All Mental Health services at Wexham Park hospital have
Transition	been relocated, apart from the A&E liaison team which
	remain on site to provide support for people entering
	the A&E department with mental health needs. Vacation
	of community services based at Heatherwood Hospital is
	in progress and will be complete by the end of January
	2014. The inpatient ward (Ward 12) will remain on site
	until works on the new ward (to be called Snowdrop) at
	Prospect Park are complete.
Dementia Bid	Works on Rowan Ward are due to be complete by the
	6th January when an official opening day is planned.
	Jasmine Ward (the existing dementia ward at Prospect
	Park) will relocate into Rowan on the 7 th January with
	remaining dementia patients form Charles ward
	relocating on the 9 th Jan (non-dementia patients will
	transfer to Orchid ward). Works on Oakwood are
	commencing and are planned to be complete by the end
	of March 2014.
Business Case Conditions	
 Implementation plan 	Complete – programme monitoring systems and a
	Commissioner Monitoring Group is in place to ensure
	delivery of the programme.
2. Community Services	East Berkshire Assertive Stabilisation Team for people
	with Emotional Intensity and instability (ASSiST) has
	been operational since June 2013, to minimise the need
	for hospital admissions for east Berkshire residents.
Phased closure of	The ward moves were phased across 2013/early 2014
Wards with Ward 10	with ward 10 being the first ward moved on the 4 th June
prioritised.	2013. Charles ward will move on the 9 th Jan 2014 and
	Ward 12 is planned to be complete in the spring 2014
4. Transport support	Transport scheme is in operation with further roll out
	currently being undertaken.
5. Patient experience	A survey was carried out by the RAISE organisation in
	January 2014. PCT/CCG colleagues are in receipt of the
	report.
6. Quality schedules	These were included in the 2013/14 contract.
Overall Project Status	The programme remains a green/amber due to
	continued delays with the Deed of Variation for the
	Hazelwood /Ward 12 move.

The overall status of the CSR programme is **GREEN/AMBER** due to:

Issue	Mitigating actions
Continued delays in completion of the legal	The Trust has worked with legal teams, the
aspects of the Deed of Variation for works to	building contractors and Prospect Healthcare
commence have led to a delay in	management company to address all issues

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commencement of the works to provide new	agree legal terms and approval of the Deed is
facilities for the transfer of ward 12 from	now in the hands of the PFI funders.
Heatherwood Hospital.	In anticipation of the Deed being approved
	preliminary drainage works were undertaken at
	risk in September to enable commencement of
	main works immediately on approval of the
	Deed.

3. Areas for more detailed update to the Health Overview and Scrutiny Committee

The Slough Health Overview and Scrutiny Committee have previously requested more detailed feedback on two key elements of the programme, Visitor Transport Assistance and the establishment of additional community services. Both of these elements are now in operation and progress reports on them are presented below.

Visitor Transport Assistance Scheme

The proposal to provide:

- Mileage reimbursement for additional mileage from existing hospitals to Prospect Park
- A private hire taxi service for visitors who are elderly or disabled, medically unfit, on benefits, reliant on public transport or who otherwise would not be able to visit.

was endorsed by all stakeholders in December 2012, implemented and available to visitors from the 4th June 2013.

Criteria for accessing the scheme is as follows:

- a) Have a disability or medical condition that would make it difficult travel the additional miles to Prospect Park Or;
- b) Are over 65 years of age Or;
- c) Are in receipt of state benefits Or;
- d) Are otherwise in need of assistance BHFT understands that there will be occasions where a visitor is not of pensionable age, disabled or on benefits but has difficulty in getting to Prospect Park. These visitors will be assisted wherever possible.

The Trust took a decision to implement the scheme in a phased way to co-ordinate with the ward transfers. The current programme is as follows:

- Phase 1 assistance available to visitors of patients who would have previously been admitted to Ward 10 (Implemented from 4th June 2013)
- Phase 2 scheme to be extended to provide assistance to visitors of patients who would have previously been admitted to Charles Ward St Marks following the ward transfer.

Phase 3 – scheme to be extended to provide assistance to visitors of patients who would
have previously been admitted to ward 12 at Heatherwood Hospital following the ward
transfer.

a. Phase 1 - Transfer of Ward 10 from Wexham Park Hospital

Phase 1 of the scheme went live in conjunction with the transfer of ward 10. In preparation for the move letters and information leaflets were sent to all patients on Ward 10 and patients that were currently in the system.

Posters were also placed on and around Ward 10 at Wexham Park and on the new ward (Rose) at Prospect Park. Information leaflets were placed in new patient admission packs on Rose Ward.

A Cashier was appointed to administer the scheme. Following transfer to Prospect Park the cashier phoned relatives of patients on the ward to ensure that they were fully aware of the scheme and leaflets were re-distributed.

b. Post Ward 10 Transfer Review

When the Transport scheme was developed and implemented there was no way of anticipating what the take up of the scheme was likely to be. Consensus of opinion was that the scheme should be available to those most in need and the criteria for accessing the scheme were set accordingly for move of ward 10. There was agreement that the scheme would be monitored and fully reviewed prior to the next planned ward move and adjustments made if required. The second ward move (Charles Ward) is scheduled for the 9th January 2014 and so a review of the scheme was carried out in November 2013.

The Prospect Park Clinical Operational Steering Group monitor the uptake of the scheme to assess the performance of the scheme and how it could be improved and developed.

Due to the low uptake a meeting was held with the Inpatient Service and Slough CMHT in July 2013 to see what might help to both promote the scheme and assist both patients and families. It was agreed that the scheme should be extended and used for patients going on or coming back from leave as well as attending day passes to home address which could prove more difficult if reliant on Care Managers or public transport to facilitate the journeys.

Up to 31st October 2013 only £260 had been paid back to visitors using the scheme. However a further £1,060 has been used in providing taxis for patients undertaking these types of journeys.

Review of the scheme by the Prospect Park Clinical Operational Steering Group has resulted in the following additional actions being agreed:

- Open the scheme up visitors of any patient admitted to PPH from east Berkshire Posters and information leaflets have been updated to reflect this (see appendices) and are currently being distributed.
- Survey of numbers of visitors to patients from east Berkshire to be carried out in December.

- Updating of new patient information booklets (given to patients on admittance) to include information about the Transport Scheme and how to access it new booklets will be available shortly.
- Focused communication with patients and carers from the east during the admission process to ensure that they are fully aware that they can get help with transport if required this will be implemented during December.
- Additional communications to specifically highlight the fact that the scheme is not just available for visitors that are elderly or on benefits or disabled but for anyone that requires assistance (access criteria D as specified above) visitors will be encouraged to talk to staff if they are having problems this will be implemented during December.
- Every CMHT and CMHTE in East Berkshire to be provided with the new posters and leaflets
 to display in their reception areas All DSNs/Managers have been updated about the
 scheme being extended to all from East Berks and the CMHTs/CMHTEs in East Berkshire
 have been sent posters and leaflets advising/reminding them about their localities eligibility
 to use the scheme.
- Individual letters with information about the scheme (see appendices) to be sent to each relative of patients that will transfer from Charles Ward.
- Communications Team to publicise the scheme on the public website highlighting the fact that the scheme is open to anyone in need not just those that are elderly, disabled or on benefits.
- Consideration as to whether the scheme should be opened up to more than two visitors per patient the Trust will review this in January following the move of Charles Ward.
- Letters have now been sent to all relatives on Charles Ward about the move date of 9th January and have also been sent info on the Transport Scheme.

Review of the scheme will be continued over the next few months during the moves of Charles ward and ward 12.

Establishment of Community Services to minimise the need for admission

The Trust identified a budget of £225K per annum for investment in east Berkshire community mental health services, to minimise the requirement for hospital admission. Various options were considered. Evidence collected from previous patterns of admissions, indicated that the greatest impact in reducing hospital admissions could be made by providing a service specifically for people with personality disorder, and similar presentations, many of whom may have had lengthy previous hospital admissions. Evidence shows that hospital admission for these patients frequently does not result in the best outcomes, and can lead to lengthy in-patient stays and frequent readmissions. The ASSiST service was designed to provide an 'Assertive Stabilisation' team for people with Emotional Intensity and Instability, and by providing intensive, tailored support in the community, to produce better outcomes and reduce the use of in-patient beds. It is intended that this service will support people who can be amongst the most vulnerable, and can present the greatest challenge to primary and secondary care services

The ASSiST service commenced on the 4th June 2013. The approach is to provide intensive community support including stabilisation of symptoms, risk management and crisis planning, alongside development of coping strategies through therapeutic programmes of individual sessions

and group work. These sessions are aimed at enabling individuals to manage their emotions, symptoms and impulsive behaviors, including self- harm and substance misuse.

ASSIST also collaborates closely with other services, including substance misuse services, social care and mainstream employment, education and leisure facilities, with the objective to support service users to develop productive roles and routines, and thus promote sustained recovery.

The service is provided for residents of east Berkshire, with diagnosis of personality disorder, or with emotional intensity difficulties, and with a pattern of high use of in patent mental health services, and/ or high reliance on urgent care or emergency services.

ASSiST has an office base and clinical space at Upton Hospital, and operates on a 'hub and satellite' model. There are facilities for group and individual therapy on site at Upton, and therapy sessions are also held at locations convenient to the patients across east Berkshire, including the patients' homes or other preferred location.

The team is now fully staffed and includes a core team of four full time clinicians (clinical psychologist, community psychiatric nurse, social worker, Support Time and Recovery- STR- worker) as well as sessional psychiatrist, psychology and administration support. The service operates Monday – Friday, and interfaces with the existing Crisis Resolution Home Treatment team, which provides support out of hours.

In the initial phase, the service has focussed on engaging with services users who are currently or recently admitted to hospital, in order to provide immediate interventions on discharge, with the objective of providing intervention to maintain successful discharge. It is expected that numbers accessing the service will be small with intensive support packages offered.

The expectation is that patients will be supported by ASSiST for a time limited period to allow stabilisation of symptoms and creation of a clear on going care pathway to sustain mental health within the community.

During the first 5 months of operations, the service has worked with 11 individuals: 6 from Slough; 2 from Bracknell and 3 from Windsor/Ascot/Maidenhead (WAM). In total, these 11 patients have a combined total of almost 1,200 inpatient bed days in the 12 months preceding the ASSiST intervention. This number has reduced to a combined total of 30 bed days in the 5 months since ASSiST go live.

Service user feedback has been positive. Outcome measures are being collected and a monitoring review of the service will take place in January 2014.

Conclusion

This report has been presented to provide the Slough Health Overview and Scrutiny Committee with and update on progress of the relevant areas of the CSR Programme. If you require any further information please contact the Programme Manager: Karen.watkins@berkshire.nhs.uk