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**Appendix 'A'**

**Briefing Paper to Overview and Scrutiny Committee**

**Mental Health Inpatient Re-configuration and Transitional Arrangements**

**Introduction**

The purpose of this paper is to update members on the Trust’s transitional arrangements. Specifically, it relates to changes that have been made to the original plan that was presented to Overview and Scrutiny Committees in January 2012 that will slow the pace of the transition plan.

LCFT will be in the process of transition for the next four years, until 2016. This involves the de-commissioning of existing mental health inpatient facilities, which are being replaced with alternative community provision and a superior standard of accommodation to be provided from four specialist sites across Lancashire as follows:

* A re-development of the Oaklands Unit in Lancaster for North Lancashire **(Autumn 2013)**
* A new development, The Harbour, at Whyndyke Farm in Blackpool **(2015)**
* A re-development of the existing Blackburn site for East Lancashire **(estimated timescale 2016)**
* A new unit in Central Lancashire **(location and timescale to be confirmed – estimated 2016)**

Preferred configuration by 2016 – bed numbers are estimates/planning assumptions:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Inpatient service** | **The Harbour** **Blackpool**  | **Royal** **Blackburn**  | **Oaklands****Lancaster** | **Central** **Lancashire** | **Total**  |
| Advanced care  | 36 | 36 |  |  | 72 |
| Functional  | 72 | 36 | 18 | 18 | 144 |
| PICU\* | 16 |  |  |  | 16 |
| Dementia  | 30 |  |  |  | 30 |
|  | **154** | **72** | **18** | **18** | **262** |

\*PICU – Psychiatric Intensive Care Unit.

In **Phase 1** of the transition plan the following inpatient services closed:

|  |  |  |
| --- | --- | --- |
| **Ward Name** | **Client Group** | **Location** |
| L2 Hillview | Older Adult Dementia | Royal Blackburn Hospital |
| Bickerstaffe | Functional High Needs and Older Adult Dementia | OrmskirkWest Lancashire |
| Stirling | Adult Functional Female | Parkwood Hospital Blackpool |
| L3 Hillview | Older Adult- High Needs Functional | Royal Blackburn Hospital |
| Warwick Ward  | Functional Male  | Parkwood Hospital Blackpool  |

The Trust would like to give assurance to members that the de-commissioning of these facilities was managed to ensure a safe level of care was maintained. Extra capacity has been provided by community teams and services. There is a large amount of evidence which shows that people have better mental health outcomes when they are supported outside of a hospital and should only be admitted when it is appropriate and necessary for their needs.

People who still required inpatient services were placed appropriately with the full involvement of their relatives/carers.

**Phase Two** of the transition plan(January 2012 – March 2013)

The Trust has developed a high level plan to describe how its transitional plans will be managed. This plan details the sequencing of when existing facilities will close as new accommodation becomes operational. It describes the process that the Trust will follow to achieve the new needs led model of care for adults of all ages.

Key milestones:

* Autumn 2012. Beds from the Oaklands Unit in Lancaster merge with the Lancaster Unit at Ridge Lea Hospital. This is to enable the Oaklands Unit to close for re-development into the inpatient service for North Lancashire. The new service at Oaklands will be operational by Autumn 2013.
* March 2013: Wards 18 and 19 at Burnley General Hospital close.
* Spring 2013: Development of The Harbour as the inpatient service for the Fylde Coast commences.

These are indicative timescales and could change in response to the needs of the service. The Trust will report any significant changes to its plan to Overview and Scrutiny Committees and will provide detailed information at key milestones.

**Transitional arrangements for 2012- March 2013**

This section sets out the detailed arrangements for the units that will be de-commissioned or re-provided between 2012 and March 2013. It is important to note that the following principles underpin all of the proposals:

* Delivering safe, effective and high quality healthcare
* Supporting the movement to the new needs led model of care for adults of all ages, comprising both community and inpatient services
* Ensuring quality and consistency across the Lancashire footprint
* Ensuring best value in the use of public sector resources

Between January 2012 – March 2013 the inpatient facilities listed below will be de-commissioned or re-provided from another location or by community services. This information was presented to OSCs in January 2012. The reason for this update is due to a revision to the transition timeline that will slow the pace of bed reductions in East Lancashire to assure sufficient capacity, safety and quality. Specifically this means that Ward 19 and Ward 18 remain planned to close in March 13 but the female functional ward (ward 20) and PICU will remain open. Ward 22 was always planned to remain open on the Burnley site and that is unchanged. Wards 20, 22 and PICU will continue to operate on the Burnley site. A closure date has not been set and it has been agreed that this will be determined by the measured reduction in in-patient demand rather than by a pre-determined date.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Locality**  | **Ward Name** | **Client Group** | **Location** | **Closure Date**  |
| North Lancashire  | Oaklands Unit will close for refurbishment. Service to be merged with Lancaster Unit at Ridge Lea Hospital to provide 17 beds.  | Functional and advanced care  | Lancaster  | November 2012 |
| East Lancashire | Wards 18 (female)Ward 19 | Functional Dementia | Burnley General Hospital  | March 2013  |

**Development of Mental Health Services in North Lancashire**

**Merging of Oaklands and Lancaster Unit**

A public consultation was undertaken in 2009 regarding the future of mental health inpatient services for North Lancashire (Lancaster.) The consultation recommended that the Trust’s existing facility for older people, the Oaklands Unit on Pathfinders Drive in Lancaster should be re-developed as an inpatient service for adults aged 18 and over with a functional mental health need in North Lancashire. A business case for the re-development of the Oaklands Unit was produced and subsequently approved in October 2011.

The plans for the new in-patient service in Lancaster identified the need for an enabling scheme to re-locate community services from the Oaklands Unit to a new facility on Ashton Road, Lancaster. This development, De Vitre House opened in August 2012 and provides a new resource centre for older adults comprising; Memory Assessment Services, Community Mental Health Team, Intermediate Support Team and enhanced day care run jointly with the local authority. The Oaklands Unit is now being prepared for closure so that major re-development work can begin before the end of 2012.

The inpatient beds provided from the Oaklands Unit will merge with the Lancaster Unit at Ridge Lea Hospital in Lancaster. This will provide a temporary service for the North Lancashire locality that will be providing the new model of needs-based inpatient care in preparation for the move back to Oaklands. To support the transitional period, 8 additional beds for older people with functional mental health needs will be provided at Altham Meadows in Morecambe on an interim basis from October 2012 until June 2013.

This represents a reduction in beds from 37 to 25 which can be achieved safely due to the investment that has been made into community services in the area. Within the North Lancashire locality there are a range of community services for both adults of working age and older people that operate 7 days a week to provide a comprehensive package of care to support people to be cared for in their home environment or community setting.

The Trust is working closely with GPs and lead commissioners to ensure that there is sufficient capacity in community services. Investment is also being made to provide specialist skilled teams. For example, the Trust has developed a Liaison Team working in care homes in East Lancashire to inform and improve the assessment and care of people with dementia. The Trust has recently secured additional funding to roll-out this service across the county by early 2013.

It is anticipated that the re-developed Oaklands Unit will become operational in autumn 2013 and this will provide 18 beds for adults aged 18 and over with a functional mental health need in North Lancashire. At this point Ridge Lea Hospital will close.

**Development of Mental Health Services in East Lancashire – Closure of Ward 18**

Ward 18 in Burnley provides 21 beds for males with a functional mental health problem. In order to achieve the closure by 31 March 2013 it is proposed that from November 2012, two beds per week are closed so that the bed reduction can be achieved over a 20 week period.

Wards 20, 22 and the Psychiatric Intensive Care Unit at Burnley General Hospital will remain operational. Mental health wards at Royal Blackburn Hospital also remain open as an inpatient service for East Lancashire.

**Development of Mental Health Services in East Lancashire – closure of Ward 19 Burnley General Hospital**

Ward 19 at Burnley General Hospital is a 15 bed dementia ward that provides a short term assessment function and support for people with challenging behaviour associated with their dementia.

In line with best practice and national guidance there has been considerable investment into providing community services for people with dementia. This is to enable people to be cared for in their own home or usual place of residence such as nursing homes. The following community teams are available in East Lancashire to support people with dementia:

* Memory Assessment Services
* Community Mental Health Teams
* Intermediate Support Team
* Hospital and Nursing Home Liaison
* Dementia Advisors (a named contact that provides people with dementia and their carers with support and advice)
* Dementia Cafes (run in partnership with the Alzheimer’s Society to enable people with dementia, their family members or carers to meet with care-giving professionals and volunteers. The aim of the cafes is to show people that there is life after dementia. They aim to provide information, social contacts and emotional support.)

The development of these community teams over the last three years has led to a reduction in the number of people being admitted to mental health wards. The number of dementia beds has reduced from 122 beds in 2007 to 88 beds in 2011 and the average length of stay has reduced from 100 days to 48 days, with a continued downward trend. There has been an increase in referrals to dementia services which has been managed in community settings. Over 97% of activity in relation to dementia is taking place outside a hospital environment.

It is proposed that there is sufficient capacity within community services to close ward 19 whilst maintaining a high level of care for people with dementia. The further development of community dementia services across Lancashire continues and is subject to public consultation commencing in December 2012.

Once Ward 19 in Burnley closes in March 2013, specialist dementia beds for the few people assessed as needing admission will be provided in the short term from Ribbleton Hospital in Preston. From 2015, it is proposed that specialist dementia beds will be provided from The Harbour in Blackpool. In December 2012, this will be subject to a public consultation led by Lancashire PCTs, setting out proposals to further strengthen the community and hospital services available and ensure that there is consistent service provision for people with dementia and their carers across the county.

**In Summary**

* The Trust has robust arrangements in place for managing its transitional plans. This involves safely moving from old wards to new accommodation and ensuring that alternative provision is available in the community to meet people’s needs.
* The future vision of acute mental health services in Lancashire is as a network of high quality care with the following features:
	+ High quality specialist community services in Lancashire with a single point of access for people in crisis
	+ Four newly developed / re-designed inpatient units that are fit for purpose, offer high quality care, reasonable access and are affordable for the future
	+ Local intensive community treatment and therapeutic care for people with dementia supported by very specialist county-wide inpatient services
	+ Value for money and sustainable for the future
* The investment has worked. More and more people for whom going to hospital was once the only option are now being treated effectively in their own homes. Therefore the demand for inpatient beds has been reducing steadily over time.
* 93% of all contacts with service users are undertaken in community settings. Inpatient services represent only a small proportion of the overall care pathway. There is a large amount of evidence which shows that people have better mental health outcomes when they are supported outside of a hospital and should only be admitted when it is appropriate and necessary for their needs.
* It is recognised that further site specific engagement will need to be undertaken with regard to some aspects of the proposal, for example transport arrangements to and from inpatient sites require further development. The Trust and its PCT partners will take recommendations from the Health OSCs of Lancashire with regard to such issues.
* A public consultation will commence in December 2012 setting out proposals to further strengthen the community and hospital services available and ensure that there is consistent service provision for people with dementia and their carers across the county.

**In Conclusion**

* There are compelling reasons to change the current inpatient service to provide a therapeutic environment, deliver high quality care and continue the strengthening of community services. The HOSC is asked to support the proposals contained with this transition plan. It must be noted that this represents work in progress and a central part of the assurance process will be the involvement of the CCGs across Lancashire, as both decision makers and clinicians involved in the delivery of care. The Trust and its PCT partners will continue to keep the HOSCs informed at key milestones.