

Adult Social Care and Health Scrutiny Panel

**Review of 5 Boroughs Trust: Later Life and
Memory Services and Relocation of
Stewart Assessment Ward**

Councillors:

Suzanne Knight (Chairman)

Betty Lowe

Leon McGuire

Brian Spencer

February 2012

1.0 Introduction and Terms of Reference

- 1.1 During December 2011 the 5 Boroughs Trust and NHS Merseyside Commissioners presented the Council with a series of proposals relating to later life and memory services and the Stewart Assessment Unit.
- 1.2 The Council's Cabinet referred this issue to Scrutiny in the first instance to consider the details of the implication. A small Task Group made up of Scrutiny members was established to consider these issues in detail and report back to both the Scrutiny Panel and Cabinet.
- 1.3 On examining the proposals in detail it was agreed that the Task Group would consider the following:
 - Why the proposals were being considered
 - The objectives associated with the proposals
 - Any benefits which would be gained from the proposals
 - Strategic links
 - Communications with staff, partner organisations and the public in general

2.0 Method of Investigation

- 2.1 We enlisted the help of Mike Wyatt St Helens Council's Director of Adult Social Care and Health to provide us with the information and expertise that we needed.
- 2.2 The Task Group invited a number of witnesses to attend a series of meetings. In addition site visits were held at Rydal Ward at Knowsley Resource & Recovery Centre, Kingsley Ward at Hollins Park, Warrington and Stewart Assessment at Peasley Cross. A number of documents/reports prepared by 5 Boroughs Trust were also submitted to the Task Group for their consideration (Proposals for a New Model of Care – Later Life Memory Services and Relocation Plan – Later Life Memory Services)
- 2.3 A set of questions were submitted to LINKs and their response was fed back to the task group and amalgamated into the final report.
- 2.4 Task Group Meetings were held on the following dates:
 - **Friday 6th January 2012**

Witnesses

Therese Patten – Chief Operating Officer 5 BT

Dr Ashley Baldwin – Consultant Psychiatric and Strategic Lead for Older Peoples Services

Pauline McGrath – Acting Assistant Director, Older Peoples Services 5 BT

- **Thursday 12th January 2012**

Witnesses

Dr Omar Shaikh ULC Board Member and GP Partner

Dr Jackie Bussin Consultant in Medicine for Older People and Janet Sumner
Directorate Manager, Dept of Care of Older People

- **Thursday 19th January 2012**

Witnesses

Dr Joe Banat (GP Commissioning Group)

Colin Vose – Clinical Commissioner for Merseyside

Hazel Bayley – Alzheimers Society Cheshire North and St Helens

- **Friday 3rd February 2012**

Site Visits to Rydal Ward, Kingsley Ward and Stewart Assessment. The Task Group were met by Pauline McGrath, Bernard Pilkington (Chair of 5BT) and Therese Patten.

3.0 Background

- 3.1 The Stewart Assessment Unit is an Older People's unit that cares for people with a diagnosis of dementia, Alzheimer's, or complex mental health problems associated with the ageing. The unit currently operates on 12 beds.
- 3.2 5BT state that the unit cannot deliver effective personalised care within the current environment because it uses traditional 4-bedded dormitories. Modern single room accommodation is available at both Rydal Ward on the Whiston Hospital site and Kingsley Ward at the Hollins Park Site. The Trust's desire is to deliver care within the highest quality environment and Stewart Assessment Unit struggles in this regard. Therefore, the Trust proposes to relocate the 12 beds currently at Stewart Assessment Unit to Rydal ward and Kingsley ward respectively.
- 3.3 The unit has been well maintained in terms of décor and furniture however the structure and layout of the unit is no longer fit for purpose. To make the unit fit for purpose a large investment would be required because it would need a full refurbishment including a new roof.
- 3.4 The review of the overall Later Life and Memory Services has resulted in the development of a model which focuses on early intervention and home/community based support and treatment promoting independence and personalised care. The proposed re-provision of the St Helens inpatient facilities fits with the model intentions to provide high quality inpatient units, for the occasions when admission for assessment is required.
- 3.5 The proposed wider model was presented to the Technical Appraisal Group meeting on the 28 October 2011, and was agreed in principle. The Trust is now implementing a pilot (in the Wigan Borough) of the new Community Care Pathway and includes an out of hour's service.

- 3.6 In St Helens, a Dementia Action Plan has been developed by a multi-agency group, arising from the work of the shadow Health and Well-being Board, to ensure that as services are developed they truly reflect the needs of the local population.
- 3.7 The Trust has developed a service strategy for the Older People's service which is also part of the Trust's Integrated Business Plan (IBP). The IBP is driven by the Trust's aspiration to deliver a clinical model that is high quality, efficient and safe. This will be supported by the consolidation of in-patient sites and a greater focus on the use of community resources.
- 3.8 The proposal, if implemented, will support the Trust's Corporate High level Objectives of:
- Service Delivery and Patient Experience
 - Effective and Efficient Organisation
- 3.9 The success of this relocation will improve services to Older People and their carers and demonstrate more efficient use of resources.
- 3.10 The implementation of the proposed relocation plan is not dependant on any other work under way within the organisation, as alternative inpatient accommodation is readily available with the Rydal and Kingsley wards, which provide higher quality facilities. Once the Stewart ward has been vacated, the Trust will undertake some remedial works to allow the building to be utilised for the provision of community mental health services.
- 3.11 The National Dementia Strategy sets out 17 objectives with an emphasis on increasing community resources to maintain people in their own homes and support carers. Work is underway to develop an assessment and treatment service for St Helens borough and the implementation of this will enhance community services, provide timely assessment and diagnosis. The development of the ATC services in St Helens is integral to the implementation of the Trust's new Community pathway, which will provide:
- Single point of access
 - Same Day Screening by Senior Nurse
 - Same day Face to Face Assessment for Urgent referrals
 - Single Assessment
 - Crisis Intervention and Rapid Response
 - Face to Face Assessment (for non urgent) within 10 working days
 - Needs Led Care Framework/Supporting people to live independently
 - Direct to Appropriate Path of Service
 - Improved Access to Psychological Interventions
 - Offers a comprehensive and appropriate range of interventions
- 3.12 This will ensure that people can be maintained in the community in an environment that is familiar for as long as possible.
- 3.13 The objective of the relocation of beds from the Stewart Assessment Unit is to enable the Trust to provide inpatient care for St Helens residents in an environment that is personalised and fit for purpose.

- 3.14 The relocation will enable the Trust to proceed with the implementation of their wider Model of Care for Later Life and Memory Service, which has already been agreed and supported by clinical, and PCT commissioners.
- 3.15 The existing users of the Stewart Assessment Unit inpatient facility are primarily from St Helens and Knowsley boroughs. There are also residents from out of area who have been admitted from A&E at Whiston or they have been temporarily living with relatives locally.
- 3.16 The long-term plan for the Peasley Cross site is for it to continue to provide adult acute beds. The rest of the site will be used to accommodate the Later Life and Memory Services community teams, the Assessment Care and Treatment Team and the adult community teams. To get the current buildings to the required standard to accommodate these services the Trust Board has pledged to invest £7.6m of capital monies on the site.

4.0 Findings/Conclusions

4.1 Distinguishing between immediate and longer term proposals

- 4.2 The Panel considered issues which related to short term or immediate changes to services and felt that in their present form they did not represent a substantial variation to services and should be seen as a development of existing services. In broad terms alongside the recommendations contained in this report, the Panel support the proposals.
- 4.3 The Panel noted that the documentation and presentations did reference the creation of a Centre of Excellence and future changes to Later Life and Memory Services. The timescales for these proposals were unclear and the Panel received reassurances that developments would not take place without clear evidence of the effectiveness of the more immediate proposals and an effective consultation engagement.
- 4.4 The Panel would wish to note that the proposal for a Centre of Excellence and other long term proposals would, on the information available at this time, constitute a substantial variation in Later Life and Memory Services which would require a separate consultation exercise and a separate formal scrutiny process. As the Centre of Excellence would be likely to impact on a number of Local Authorities, it is likely that this would be dealt with as a statutory joint scrutiny exercise..

4.5 Stewart Assessment Unit

- 4.6 The Panel carefully considered the supporting documentation relating to the proposal to close Stewart Assessment Unit and relocate inpatient beds for people requiring Later Life and Memory Services at Kingsley Ward at Hollins Park and Rydal Ward at Whiston Hospital. The Panel also sought the views of a number of witnesses in relation to these and undertook site visits to all three units.

- 4.7 Having carefully considered these issues, the Panel formed the view that subject to a number of recommendations referred later in the report they supported the proposal on the basis of: -

The Quality of Accommodation

- The proximity of Acute Hospital services at Rydal Ward offers some advantages to patients.
- The fact that all services at Kingsley and Rydal ward are offered an individual room, most with en-suite, offers significantly better physical environment for the patients.
- New units have rooms suitable for shared use if this is required.
- Communal areas also seem to be of a better design and quality than Stewart Assessment Unit.

Over Capacity in the System

- 4.8 The Panel were persuaded that there is some over capacity in the system and understood the rationale for a shift in investment to community based resources away from bed based inpatient resources. The Panel did hear some concerns in relation to delays about identifying beds, particularly from the Acute Trust and would ask that the situation in relation to bed capacity is carefully monitored and that St Helens residents are not disadvantaged in any way by the change of the bed location.

Quality of Care

- 4.9 The quality of the care provided by staff on Stewart Assessment Unit (Treatment Regime) was complimented by all the witnesses to the Panel and during their visit the Panel were impressed by the expertise that staff displayed and the sensitive way that they went about their duties.
- 4.10 The Panel were anxious to ensure that as outlined in the proposals, the permanent staff, with the exception of those who were retiring, should transfer with patients to Rydal and Kingsley wards.
- 4.11 The original submission received by the 5 Boroughs Trust contained proposals that staff should be deployed on a temporary basis to the new wards. The Panel were anxious about this and during their later contact with the 5 Boroughs Trust, were reassured that the members of staff would transfer on a permanent basis to their new work locations. The Panel trusts that this commitment will be honoured and believes it will represent a significantly more positive way forward for the service.

Additional Services offered from Stewart Assessment Unit

- 4.12 During their visit to Stewart Assessment Unit, the Panel became aware that a number of associated services are offered from the location, e.g. drop in sessions for carers facilitated by experienced carers. The Panel would recommend that these services should transfer and carry on at Kingsley and

Rydal wards and where carers or others need support with location and transport, this should be delivered.

Transfer of Patient Records

- 4.13 In their feedback LINKs envisaged that the proposals could also present new challenges for additional services being involved and the records of patients being forwarded to the relevant trust in time could present unforeseen barriers to treatments and wasted appointments.

Future of Peasley Cross Site

- 4.14 The Panel were pleased to hear assurances in relation to the importance of Peasley Cross as a Centre for Community Based Services, both for older people and younger adults.

Transport

- 4.15 The Panel do have some concerns in relation to the transport to Kingsley and Rydal ward, particularly for relatives and carers wishing to visit patients at the new units and would recommend that the 5 Boroughs Trust should make particular arrangements for transporting/or facilitating visits to patients on a 7 day a week basis at both venues.
- 4.16 These concerns were also highlighted in the feedback from LINKs and service users particularly for residents with relatives to be placed in the Kingsley wards at Hollins Park. The bus service available on a weekday changes in the early evening and people travelling from St Helens (without their own car) trying to see their relatives in 'visiting hours' after work would find this difficult. On a Sunday, throughout the day, the only route available was the 2 x bus services plus a 14 minute walk. This is a traditional day for visiting family in our area and may start to impact negatively on people who do not have their own transport.

4.17 Patient Pathway

- 4.18 The Panel welcomes the intention of the Later Life and Memory Services proposals to improve access to services for people with dementia, ensuring at an early stage appropriate diagnosis to help ensure that they receive the most beneficial treatment.
- 4.19 The Panel also welcomes the proposed reductions in the time that assessment processes take, however the Panel is mindful that the improvement in diagnosis and/or speed of assessment will not deliver the expected positive outcomes unless there are effective services in place to support patients and carers at all stages of the Dementia Pathway.
- 4.20 The St Helens Shadow Health and Well being Board have created a Dementia Project Group which is presently developing an action plan and considering issues in relation to the 6 phases of dementia as outlined by the Department of Health in relation to commissioning Dementia Services: -

Phase 1 – When memory problems have prompted me and all my carers/family to approach my GP with concerns.

Phase 2 – Learning that the condition is dementia.

Phase 3 – Learning more about the disease, options for treatment and care, self management and support for me and my carers/family.

Phase 4 – Getting the right help at the right time to live well with dementia, prevent crisis and manage together.

Phase 5 – Getting help if it is not possible to stay at home or if hospital care is# needed.

Phase 6 – Receiving care, compassion and support at the end of life.

4.21 The Panel endorses this approach and recommends the implementation of the proposals relating to Later Life and Memory Services are carefully coordinated with all other dementia developments in the Borough.

4.22 The Panel were also pleased to hear about the development of Old Age Psychiatric Liaison Service at Whiston Hospital and proposals to both increase the staffing level of this service and also to extend it to operate at evenings and weekends.

4.23 The Panel feel that although this development is in its early stages, close working between the 5 Borough Trust and St Helens and Knowsley Teaching Hospitals NHS Trust will help to ensure that this improves the services for people being admitted to hospital.

4.24 Crisis Services

4.25 The Panel, through previous work relating to Crisis Services for younger people with mental health problems, is very familiar with the importance of Crisis Services for both patients and their family/carers. The Panel recognise the importance of these services for people with dementia and their carers.

4.26 The Alzheimer's Society stressed that putting in place a number of key elements of information and support to family/carers and patients in advance, will often help to avoid crisis and The Panel were pleased to note a willingness of all partners to engage in developing services in this way.

4.27 The Panel noted the Pilot of Crisis Services in Wigan and would support a faster development of Crisis Services for people with dementia and their family/carers in St Helens. It was felt that cover from Saturday afternoon to Sunday evening would be very beneficial for those in crisis as weekends was more likely to be the point which they present at services.

4.28 Residential and Nursing Care Homes

4.29 The Panel heard consistently from a number of witnesses from all disciplines the importance of effective Dementia care in Nursing and Residential Care Homes, both to improve the quality of care and maintain a focus on dignity. The Panel were pleased to note the support to care homes offered by the 5 Boroughs Trust and the proposals to strengthen this.

4.30 Through its recent review of Dignity in care homes, the Panel is aware of many of the issues which face care homes and believe that it is vitally important that the work being undertaken by the 5 Boroughs Trust is coordinated with other developments and work relating to care homes in the Borough. This will help to ensure that there is effective coordination of a range of initiatives e.g. Dementia, Dignity, End of Life Care and Physical Care. The Panel also believes that work should be prioritised and focus on those homes most needing support, and not just focussed on those homes that come forward or ask for support. The Panel believes that this is important to ensure that those residents most in need receive the necessary support.

4.31 Functional Mental Health

4.32 The Panel heard consistently from witnesses that older people with functional mental health problems require specialist in-patient facilities. At present they are normally placed on in-patient wards with younger adults and/or in some cases on in-patient wards for those people with Dementia. The Panel welcomed the proposals to develop a specialist in-patient facility for people with functional mental health needs.

4.33 Communication and Engagement

4.34 Whilst The Panel received assurances from officers of the 5 Boroughs Trust in relation to consultation and engagement, and indeed the support of a number of clinical and non-clinical groups, the evidence presented to the Panel from other sources was not consistent with this view. Key witnesses felt that there had been some limited engagement in relation to the principles of the proposals, but the important details had not been fully shared. It was confirmed that there had been little service user engagement via LINK to be able to state if service users agree with the proposals. On hearing the feedback, the Panel consistently felt that the approach of the Trust could be further refined by: -

- Ensuring that all key partners had full access to detailed information at an appropriate stage in proceedings.
- Creating the opportunity to comment on these and for the documentation to be refined.
- That they should received feedback on any comments or issues made.

4.35 The Panel is aware of the difficulties of consulting and engaging on a wide geographical footprint, but have raised this point in their report as there appears to be some disconnection between the views of officers of the 5 Boroughs Partnership NHS Trust and the evidence presented to the panel.

5.0 Recommendations

Distinguishing between immediate and longer term proposals

1. The further developments referred to in the reports such as the development of a Centre of Excellence be subject to separate consultation and scrutiny appropriate exercises.

Stewart Assessment Unit

2. Having carefully considered the information available, the Panel support the proposals to relocate subject to the implementation of the following points:
 - (a) That St Helens residents are not denied access to inpatient beds and that the situation in relation to capacity is carefully monitored to ensure no undue delays.
 - (b) That the 5 Boroughs Trust maintains the facility in both Rydal and Kinsley wards for shared bedroom facilities for family members who may wish to share.
 - (c) That capital investment is identified and those single rooms without en-suite facilities at Kingsley ward are upgraded to the same standards as other wards.
 - (d) That the 5 Boroughs Trust make particular arrangements for transporting/or facilitating visits to patients on a 7 day a week basis at both venues.
 - (e) That staffing from Stewart Assessment Unit is transferred to the 2 wards on a permanent bases ensuring appropriate skill levels and skill mix to support service users.
 - (f) That St Helens based initiatives presently based at Stewart Assessment Unit are carried on either as part of the community based services at Peasley Cross or within the new wards.
 - (g) That the Adult Social Care and Health Scrutiny Panel be kept informed of changes to the use of the facilities at Peasley Cross

Patient Pathway

3. That developments relating to Later Life and Memory Services in the Borough, carried out by the 5 Boroughs Partnership NHS Trust are integrated and consistent with developments being led by the Dementia Project Group of the St Helens Shadow Health and Well-being Board.
4. That the 5 Boroughs Trust and the St Helens and Knowsley Teaching Hospitals NHS Trust work together to ensure that the maximum benefits are accrued from the increase in resource in the Old Age and Psychiatric Liaison Services.

Crisis Service

- 5 That a clear development plan be implemented to ensure the effective development of Crisis/Out of Hours Services for people with Dementia and their family carers in St Helens. This should be supported by learning from any relevant pilot.

Residential and Nursing Care Homes

- 6 That any work undertaken by the 5 Boroughs Trust in relation to Residential and Nursing Home be effectively coordinated with other initiatives relating to Residential and Nursing Care Homes within the Borough.

Functional Mental Health

7. The proposal to create a specialist in-patient ward for older people with functional mental health problems be further developed with a view to implementation as soon as possible.

Communication and Engagement

8. The 5 Boroughs Trust review their engagement and consultation processes for the future in partnership with the commissioners of Mental Health services.