

Report to: **East Sussex Health Overview and Scrutiny Committee (HOSC)**

Date: **20th November 2009**

By: **Director of Law and Personnel**

Title of report: **Building Better Secure and Forensic Services in East Sussex – capital development programme**

Purpose of report: **To present HOSC with Building Better Secure and Forensic Services in Sussex setting out a proposals for new and converted facilities at Hellingly, East Sussex**

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## **RECOMMENDATIONS**

**HOSC is recommended to:**

- 1. Consider and comment on the proposals for Secure and Forensic Services and the impact they will have on East Sussex service users and residents**
  - 2. Determine how the committee wishes to monitor the development of the proposals and associated public consultation**
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### **1. Background**

1.1 Sussex Partnership NHS Foundation Trust (SPT) had put forward proposals on developing the Trust's Secure and Forensic Services for the residents of East Sussex.

1.2 The proposals have been informed by national standards and drivers, such as optimum ward sizes, the increased mental health treatment of offenders in hospital rather than prison, and providing services 'closer to home'. Local issues include increasing demand, increased lengths of stay, high occupancy levels and the number of people who are placed with other, often out-of-county, providers.

1.3 These proposals are part of the Trust's long term service improvement programme, *Better by Design* which aims to improve upon existing standards for mental health provision across Sussex and develop a range of services that will meet people's mental health needs in the future, whilst meeting financial responsibilities in a difficult economic climate.

### **2. Secure and Forensic Service proposals**

2.1 *Building Better Secure and Forensic Services in Sussex* (attached at Appendix 1) sets out the case for the redevelopment of services provided at Hellingly, East Sussex to:

- Bring the existing facility up to national quality and security standards
- Increase the number of low and medium secure beds available in Sussex from the current 68 to 120 beds. Including the 38 beds SPT commissions from other providers, the total bed numbers currently available in Sussex is 114.

2.2 Bed numbers at Hellingly, East Sussex would increase from the current 46 to 75. Within East Sussex the proposals state that increasing bed numbers at Hellingly would reflect current levels of demand and enable the Trust to bring the majority of out-of-county placements back in-county, and closer to their families.

2.3 Current levels of demand, future projections and research into levels of provision has been used to inform proposals on bed numbers and security levels. National drivers, such as improved care provision for women, have informed proposals on ward configurations.

2.4 The proposed expansion will be achieved by constructing a building on open space adjacent to and linked by new shared facilities to an existing building (Ashen Hill), and the conversion of another existing building (Southview). It is currently envisaged that construction will take approximately 89 weeks.

2.5 Total estimated investment for the programme is £15.3 million. As well as developing modern facilities, SPT state that the proposals will support growth in the local economy in the short term (through construction) and longer term (through increased workforce).

2.5 SPT has suggested an approach to pre-consultation, public consultation and consultation feedback on proposals. Public consultation would run for 8 weeks from December 2009 to January 2010. Some consultation has already taken place including discussions with service users and meetings with Wealden District Council planning officers and local councillors.

2.6 HOSC is being asked to comment on the development and consultation plans.

### **3. Issues to consider**

3.1 *Building Better Secure and Forensic Services in Sussex* is anticipated to result in changes to secure and forensic mental health provision within East Sussex, and may impact on provision in other parts of Sussex.

3.2 Christine Bowman, Deputy Director - Strategic Development & Capital Projects Sussex Partnership NHS Foundation Trust will give an overview of the redevelopment of Secure and Forensic Services based at Hellingly in East Sussex. Russell Hackett, Director of Business Development, Andrew Dean, Service Director Secure and Forensic Services and Maggie Gardner, Project Development, Hellingly site, Sussex Partnership NHS Foundation Trust will be in attendance.

3.3 HOSC may wish to consider:

- Whether *Building Better Secure and Forensic Services in Sussex* represents a change to services and/or service delivery within East Sussex and for East Sussex residents
- What impact will the proposed capital developments have on quality of care
- How does HOSC wish to be consulted on the development and implementation of the proposals in the context of the timeframes set out
- The status on planning permission
- What are HOSCs views on the plans for public consultation including:
  - Outcomes of discussions with Wealden District Council
  - How many service users will be affected
  - Whether all appropriate groups and audiences are included in the consultation plan
  - How users of services are being involved in the development of the service model
  - How front-line staff are being involved
  - Whether appropriate methods are being used to inform the public of developments
  - How groups who may be harder to reach are being informed and engaged
  - Whether the proposed 8 week consultation period is adequate
- How does HOSC want to consider the results of public consultations and subsequent responses

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# **BUILDING BETTER SECURE AND FORENSIC SERVICES IN SUSSEX**

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## **FOREWORD**

Sussex Partnership is delighted to be able to introduce the Trust's proposals on developing the Secure and Forensic Services for the residents of Sussex. These proposals are part of the Trust's long term service improvement programme called Better by Design.

The focus of this paper is to provide an overview and case for change on the redevelopment of Secure and Forensic Services based at Hellingly in East Sussex.

Mental wellbeing is as important as physical health for the population of Sussex. As many as one in four of us will have a mental health problem at some point in our lives and the demand for our services continues to grow.

We know from listening to the people who use mental health services that where possible they would like to be treated in their own homes.

Sometimes however this is not possible, especially where people who are mentally unwell are required to be kept in safe and secure settings to help them get better in a safe environment and improve their opportunities for enhancing the quality of their lives.

This document sets out our proposals to improve and expand the successful mental health services already based at Hellingly in East Sussex.

The proposals, as set out in this paper are to:

Bring the existing facility up to national standards by improving quality and security by investing approximately £2.3m

Second, to invest an estimate £13m to improve capacity for the people needing these specialist services in Sussex by increasing the number of beds available

As well as ensuring patients can be supported in modern facilities, the proposals highlighted in this paper will support growth in the local economy by providing more jobs, not just during the construction phases, but well into the longer term.

## 1.0 INTRODUCTION

Sussex Partnership NHS Foundation Trust is a major provider of Secure and Forensic Services to the population of Sussex. These services include medium and low secure inpatient wards, step-down rehabilitation units, forensic in-reach and partnership services, and community support services. In addition to providing in-house inpatient services, the Trust also commissions a large number of individual placements from other, mainly private sector, providers.

Demand for all these services has grown over the past 25 years, as government policy has supported the mental health treatment of offenders in hospitals instead of prisons. This trend looks to continue as the prison population grows alongside a policy of moving people from high secure hospitals, into medium/low secure rehabilitation facilities like those currently based at Ashen Hill, Hellingly.

Quality and service standards are, at the same time, becoming increasingly exacting with clear national standards for medium and low secure wards – including a recommendation that wards are optimally sized at 15 beds and provide more stringent physical and procedural security.

Together with our partners in Hastings and Rother PCT and East Sussex Downs and Weald PCT, we recognise that Secure and Forensic services is one of the top priorities for the Trust's investment and development programme, as demand is increasing and there is an opportunity to provide high quality NHS inpatient care for people currently placed with other providers, often outside of Sussex.

To meet this growing demand for services and improve the inpatient environment along with introducing national recommendations on safety we are proposing to:

1. Expand Ashen Hill at Hellingly into a 4 ward (15 beds each, 3 male wards and 1 female) medium secure unit (currently 20 male and 6 female medium secure beds),
2. Convert Southview at Hellingly into a 15 bedded low secure ward (it currently provides 20 beds).
3. Ensure all medium and low secure inpatient wards meet and where possible exceed current and expected national standards

## 2.0 SECURE AND FORENSIC SERVICES ACROSS SUSSEX

Sussex Partnership NHS Foundation Trust is a major provider of Secure and Forensic services to the population of Sussex.

Robust demand projections (see section 3.1) show that overall there is a need to improve quality and security standards within this service across Sussex. This includes expanding the number of Secure and Forensic inpatients beds from 68 beds currently to a proposed 120 beds in total across Sussex.

This paper address the redevelopment of Secure and Forensic services based at Hellingly in East Sussex.

### 2.1 CURRENT SECURE AND FORENSIC SERVICES IN CONTEXT

This service currently runs at 95%+ occupancy levels, with an average length of stay at 1-12 months for high dependency patients, 3-5 years for treatment resistant patients and 5-10 years for long stay patients. In addition, Sussex Partnership commissions 38 beds from other providers through the secondary commissioning budget (with a further 8 on the waiting list), making a total of 114 beds.

The current standard for medium secure facilities is that wards should have 15 beds. National minimal standards are also increasingly stringent in terms of requirement for airlocks, window security, fencing height and anti-climbing provisions. Similar standards are expected imminently for low secure units.

Whilst the standard of the physical environment in these units has improved over recent years with medium secure facilities at Ashen Hill and Amber Lodge being accredited at the national standard, low secure standards are in development nationally and services may struggle to meet these when they are published. In particular, the current facilities lack adequate perimeter fences. None of the low or medium secure facilities operate at the optimum number of 15 beds.

#### Current provision

Unit	Location	Type of Provision	Bed No's	Occupancy Levels
Ashen Hill	Hellingly site	Medium Secure services for assessment, treatment and longer term care provision	20 Male	95%
Amber Lodge	Hellingly site	Medium Secure services for assessment, treatment and longer term care provision	6 Female	95%
Southview	Hellingly site	Low Secure services for assessment, treatment and longer term care provision	20 Male	95%

### 3.0 SECURE AND FORENSIC SERVICES - THE CASE FOR CHANGE

Forecasts show that demand for Secure and Forensic services in Sussex are going to increase. This is based on projections for the prison population to increase by 25% in the next 10 years. HMP Lewes is currently looking to increase its number of inmates from 570 to 720-900 (without plans to increase its hospital wing). Mental health problems are highly prevalent in prison settings (90% of all prisoners having at least one mental health problem and 50% having two or more, including substance misuse problems).

Our services are also finding that lengths of stay are increasing due to the changing legal process and the more safety conscious views of courts and the Ministry for Justice.

To meet projected demand as detailed in section 3.1 Sussex Partnership now needs to expand its bed numbers from 46 to 75\* in East Sussex (allocating 45 for medium secure male use, 15 for medium secure female, and 15 for low secure male).

These numbers reflect the current levels of overall demand for the inpatient services across both genders and security levels and will enable Sussex Partnership to bring the majority of out of area placements back in-house and closer to their families. The existing Hellingly site provides an ideal location for this expansion.

Hellingly has a long and important history of providing mental health services to the people of East Sussex. The extensive grounds provide an ideal and secure location on which to further develop the successful services that already exist on the site. Hellingly also benefits from clear and easy access both by car and public transport, making it easily accessible for patients, their carers and staff alike.

Redevelopment on this site will mean more than just inpatients beds. It will create more long term employment opportunities for local people.

Initial costing work of this development plan suggests that the expanded estate can be built to national standards within a capital investment envelope of £15.3 million (present day value).

#### Proposed provision

Unit	Location	Type of Provision	Bed No's	Occupancy Levels
Ashen Hill	Hellingly site	Medium Secure services for assessment, treatment and longer term care provision	60 Male	100%
Amber Lodge	Hellingly site	Medium Secure services for assessment, treatment and longer term care provision	6 Female	100%
Southview	Hellingly site	Low Secure services for assessment, treatment and longer term care provision	15 Male	100%

\* These figures account for the Hellingly, East Sussex Secure and Forensic developments and are not inclusive of the proposed developments in West Sussex.



### 3.1 SECURE AND FORENSIC DEMAND PROJECTIONS

When looking to establish the projected demand forecasts for Secure and Forensic inpatient services as outlined in this paper we have taken a number of important factors in to consideration.

Accelerated levels of discharge from high secure units leading to pressure on medium secure beds and overspill from high secure units – due to lack of beds at this level.

- This has been driven in part by the creation of the Dangerous and Severe Personality Disorder Service, which is actively rehabilitating patients in the hope of transferring them on to local medium secure units.
- The planned development of a Women's Enhanced Medium Secure Service is likely to have the same effect for this client group.

Increased use of section 37 and 41 of the Mental Health Act by courts as a public safety measure - meaning that more patients need secure services.

- Amendments in the Mental Health Act and the Criminal Justice Act 2003 look only to compound this trend

Increased referral levels from prisons into medium secure inpatient care (current expectation is that prisoners with severe mental health needs must be transferred within 14 days).

- Kent, Surrey and Sussex have a high concentration of local prisons
- HMP Lewes is looking to dramatically increase its prison population from 570 to between 720-900
- A new 450 bed detention centre for former prisoners is due to open at Gatwick
- The on-going development of prison mental health in-reach services means that Sussex Partnership is identifying more and more patients with mental health issues
- The Ministry of Justice is disputing a number of referrals into general adult mental health services, advising that they need to be handled within a Secure and Forensic setting
- Nationally, it is expected that prison numbers are likely to increase by 25% in the next 10 years with discharge criteria becoming more and more exacting. (Singleton et al study in 1998 suggested that 90% of all prisoners had at least one mental health diagnosis)

It is estimated that the prison population will increase sharply over the medium term. The vast majority of prisoners have some form of personality disorder; about half have a mental health problem and a similar proportion have substance misuse problems. It seems likely that an increase in the prison population will see a similar rise in demand for medium and low secure mental health facilities.

Benchmarking against national levels of actual and proposed provision is difficult as need varies considerably across the country with many reports showing a 10 fold variation. Two reports have proposed 13 (National Beds Inquiry) and 21 (Laing & Busson 2006) medium secure beds per 250,000 population. This proposal would give Sussex 10 medium secure beds per 250,000 provided by Sussex Partnership.

### **3.2 SECURE AND FORENSIC NATIONAL SERVICE GUIDELINES**

Meeting the needs of offenders has been the subject of many national policy initiatives over the last 25 years and more.

The common themes throughout these policies and guidelines are to provide an offender with mental health problems a better standard of care through setting higher standards and moving people out of the criminal justice system into the mental health system. This often entails mental health services having to be concerned about levels of security because of the serious nature of the offence committed and not just because an individual's mental health need requires a secure environment.

Listed below are the key national drivers for change which provide the policy framework for the redevelopment of secure and forensic services at Hellingly and set out in this in paper.

#### **The Reed Report (1992)**

Key recommendation(s): To provide services in the least restrictive environment for patients, which balance the need for protection for patients and public. These services should also be as close to home as possible.

#### **The Accelerated Discharge Programme – linked to Sir Richard Tilt's Review of Security at High Secure Hospitals Report (2000)**

Key recommendation(s): To prioritise the need for high secure hospitals to transfer patients who no longer require conditions of high security into local medium secure provision.

#### **Changing the Outlook: A Strategy for Developing and Modernising Mental Health Services in Prison (2001)**

Key recommendation(s): To address the inadequacy within prison healthcare services nationally and provide capacity to meet the latent demand for secure beds not fully addressed by local needs analysis.

#### **The House of Commons Select Committee on Health Fourth Report (2001)**

Key recommendation(s): To manage levels of patients within the special hospitals by improving demand forecasting and local service planning.

#### **Mainstreaming Gender and Women's Mental Health – Implementation Guide (2003)**

Key recommendation(s): To improve care provision for women in secure care as well as mainstream mental health services.

#### **The Mental Health of Prisoners – A Thematic Review of Care and Support of Prisoners with Mental Health Needs (2007)**

Key recommendation(s): To address the many gaps in the healthcare provision within prison in terms of need – whilst also addressing the issue of demand being higher than the capacity of mental health services through better community services.

**Best Practice Guidance: Specification for Adult Medium Secure Services (2007)**

Key recommendation(s): To meet standards against safety and security, clinical and cost effectiveness, governance, patient focus, accessible and responsive care, care environment and amenities and public health.

**Additional Guidance (2009) to National Minimum Standards for General Adult Services in Psychiatric Intensive Care Units (PICU) and Low Secure Environments (2002)**

Key recommendation(s): To improve the physical, procedural and relational security standards.

**Bradley Report (2009)**

Key recommendation(s): To re-emphasise the need to divert people from the criminal justice system to mental health services at every stage of the offender pathway from police arrest, courts, through to prisons and aftercare.

## **4.0 SECURE AND FORENSIC SERVICES – OUR PROPOSALS**

Sussex Partnership's current Secure and Forensic services provide a combination of inpatient, in-reach, forensic partnership and community support services for individuals with an offending history or recognised risk in this respect. The service is based on a strong personalised recovery ethos, robust safety and containment ways of working and a highly skilled set of bio-psycho-social therapeutic options.

It is proposed that 45 medium secure beds (3 x 15 bed wards) are built on current open space adjacent to and linked by shared facilities to the south of Ashen Hill. Southview, a low secure unit will be converted into a 15 bed low secure unit (currently 20 beds). The proposed development will enable a secure campus to be built where all the wards will be contained within a single perimeter fence of 5.2m. The wards will be able to specialise in the needs of people who require assessment and active treatment for their mental health problems, short stay treatment and long stay treatment. Experience shows that wards that specialise in the treatment of a well-defined client group achieve better outcomes. The proposal will also increase the overall size of the workforce and give further scope for specialist skills development, research and teaching.

The visual impact of the buildings on neighbours will be kept to a minimum, by their positioning, screening and use of low level lighting. Access will continue to be from The Drive. An Ecological survey will be undertaken to ensure that the environment, e.g. protection of badgers and bats, is protected.

It is currently envisaged that the construction work will take approximately 89 weeks (72 weeks for the new build and Southview followed by 17 weeks for Ashen Hill). It is hoped to reduce this time period as the scheme is developed. Noise and disruption during the building work will be kept to a minimum and neighbours will be kept fully informed.

During the consultation period there will be opportunities to view the proposed outline plans and meet the architects.

## **5.0 SERVICE USER IMPACT**

The programme of change highlighted in this document is the culmination of many years of progressive change in close working partnership with service users, their carers and representative groups.

Service users from Sussex Partnership have actively been involved in consultations and workshops organised to help develop national policies such as the Lord Darzi's NHS Next Stage Review Final Report "High Quality Care For All" and "New Horizons: towards a shared vision for mental health". These documents provide the underlying principles of this change programme.

Our commitment to develop high quality mental health services, improve service standards and the buildings we provide care from are views shared by the people who use our service users.

We recognise that positive strides have been made in involving service users, their families or carers in decision making, but we also fully acknowledge that there is more work to be done.

We will be using our innovate peer support groups, formed of people who have successfully recovered from mental illness and now act as mentors, to lead on service user involvement.

## **6.0 SECURE AND FORENSICS SERVICES – SUGGESTED CONSULTATION APPROACH**

Consultation is an essential part of an open and honest approach to decision making. It is not merely telling people what is happening or a public relations exercise. Consultation helps us to understand local needs as well as plan, prioritise and deliver better services.

This means when we consult we need to listen to what people have to say and we need to act upon it.

Consultation is the only way to ensure our services are user-focused.

By carrying out consultation, we intend to ensure that the decisions made are the right ones for the people who use our services. Putting local people at the heart of the decision making process helps create a working partnership with our users so that they have an interest in better services.

The consultation framework Sussex Partnership is proposing to use for the development of the Secure and Forensic Services is as follows:

This is intended to enable the benefits of change to be realised in a timely and proactive fashion.

### Stage 1 – Pre-Consultation (October – December 2009)

Pre-consultation and involvement work has already been taking place over the last few months. This includes:

- Over 20 workshops and briefings organised for staff with over 500 attendees to outline the Trust Strategy
- Discussions held with the people who use our services
- Initial exploratory meetings held with the planning department at Wealden District Council
- Hellingly planning meetings with local councillors

During this time, stakeholders will also be approached for their input on the options being developed for public consultation.

### Stage 2 – Public Consultation (December 2009 – January 2010)

We are proposing that for the formal consultation document will be distributed to a range of people and organisations in East Sussex and that the consultation phase should be for a period of 8 weeks commencing on 1 December until 29 January 2010. During the month of January '*Secure and Forensic Services – Have Your Say*' meetings will be held throughout January at public venues in East Sussex.

This will involve the following stakeholders:

- User, carer and advocacy groups, who support individuals who have emotional or mental health difficulties
- East Sussex County Council including Adult Services and Health and Social Care Scrutiny Panel

- South East Coast Strategic Health Authority
- Parish Councils
- Key non-statutory and voluntary organisations
- Libraries
- Local media
- GPs and Local Medical Committee
- MPs and local councillors
- Local Involvement Networks (LINK)
- Neighbouring Primary Care Trusts and NHS Foundation Trusts
- Trade Unions and Joint Staff Consultation and Negotiation Committee
- South East Coast Ambulance Service
- NHS Staff
- All NHS PCTS in the South East Coast region

### Stage 3 - Consultation Feedback (March 2010 – April 2010)

We will wish to feedback the findings from the consultation to HOSC and other stakeholders to ensure that all those who contributed are aware of the process outcome.

It is our plan to provide HOSC with an update on consultation findings at the March 2010 forum.

## **7.0 REQUEST FOR HOSC GUIDANCE AND SUPPORT**

Due to the timelines assigned to this piece of improvement work, a more detailed consultation plan currently being finalised as is the consultation paper itself. The aim is to have these complete by the 16 November 2009.

This paper is therefore asking for the HOSC to advise on:

- Whether the Secure and Forensic Services development are a substantial variation that requires public consultation.