

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

Date: **10 January 2014**

By: **Assistant Chief Executive**

Title of report: **Provision of NHS beds in East Sussex for the admission and assessment of people with dementia**

Purpose of report: **To consider the decisions made by the East Sussex Clinical Commissioning Groups in relation to the future provision of NHS beds for the admissions and assessment of people with dementia in East Sussex.**

RECOMMENDATIONS

HOSC is recommended to consider whether the decisions made by NHS Sussex are in the best interests of the health service for residents of East Sussex.

1. Background

1.1 Within East Sussex there are currently two acute psychiatric assessment wards for older people with dementia. These are St Gabriel's ward within the St Anne's Centre on the Conquest Hospital site in Hastings and the Beechwood Unit at Uckfield Community Hospital. The wards are provided by Sussex Partnership NHS Foundation Trust and they contain 34 beds in total (18 at St Gabriel's and 16 at Beechwood).

1.2 The intended role of the wards is to provide a specialist dementia assessment service for people (either diagnosed or undiagnosed) with acute or challenging needs which mean they are not able to be assessed at home (which is the preferred approach). The intention is for them to be relatively short stay wards, assessing the person's needs and designing a plan for their future care which could be at home with additional support, or in a residential setting.

1.3 In June 2013 HOSC received a report from the East Sussex Clinical Commissioning Groups (CCGs) which outlined a planned review of these beds to determine whether the currently commissioned services remain appropriate for meeting the needs of the population. HOSC determined that proposed options for the future included some which would constitute 'substantial variation or development to the provision of services' which would require formal consultation with the Committee under health scrutiny legislation.

1.4 A HOSC Mental Health Task Group was established to review the options and deliver a report and recommendations for consideration by HOSC. The Task Group's report was endorsed by the full HOSC on 21 November 2013 and a response to the Committee's recommendations was sought from the CCGs.

1.5 A decision on the preferred future service model was taken by CCG governing bodies on 11 December 2013, taking into account a range of evidence which included HOSC's report and a wider consultation. The proposed way forward is presented to HOSC in **Appendix 1** and the Committee is requested to consider whether the proposals are in the best interests of the local health service, based on the evidence gathered by the Task Group.

2. NHS decisions

2.1 All three governing bodies of the respective CCGs met on 11 December 2013. They agreed unanimously that Option 4, to close both sites and create a wholly new model of bed-based dementia services, was the preferred option for implementation. High Weald Lewes Havens

CCG Governing Body recommended a specific caveat that the model of care was subject to a full business case process, including Governing Body sign off prior to the closure of the existing sites, and that neither of the existing sites was precluded from consideration when identifying the future location for the new model of care.

2.2 Links to the papers for the governing body meetings can be found on the East Sussex CCG websites as follows:

www.eastbournehailshamandseafordccg.nhs.uk

www.hastingsandrotherccg.nhs.uk

www.highwealdleweshavensccg.nhs.uk

2.3 The CCGs intend to establish a working group to develop the new model of care, options for delivery and a business case that will be reviewed by the three CCGs during 2014. Clinicians and stakeholders will play an integral part in this process of designing safe and sustainable services which reflect the needs of those people who require bed-based dementia assessment, both now and in the future. It is anticipated that the business case will be complete within six months.

3. HOSC role

3.1 HOSC is now invited to consider whether the CCG decisions are in the best interests of the health service for the residents of East Sussex.

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APPENDIX 1

**Eastbourne, Hailsham and Seaford CCG
Hastings and Rother CCG
High Weald Lewes Havens CCG**

Title of report	The future provision of NHS beds in East Sussex for the admission and assessment of people with dementia
Purpose	To provide the East Sussex HOSC with an update on the decisions made by the three CCGs with regard to the future provision of NHS beds for the assessment of people with dementia
Author	Catherine Ashton, Associate Director of Strategy and Whole Systems, Eastbourne, Hailsham and Seaford CCG and Hastings and Rother CCG
Date	For discussion at the East Sussex Health Overview and Scrutiny Committee on 10th January 2014

Summary:

In July 2013 the Governing Bodies of all three East Sussex CCGs gave approval for consultation on a number of options for the future configuration of dementia assessment beds in East Sussex. This was undertaken and yielded a great deal of evidence and views concerning the strengths and weaknesses of the different options.

The options were:

- Option 1. No change to the service
- Option 2. Reduce the number of beds at both sites
- Option 3. Consolidate beds on one site
 - (3a) Beechwood ward, Uckfield;
 - (3b) St Gabriel's ward, Hastings;
 - (3c) An alternative site / facility.
- Option 4. Close both sites and create a new model of bed-based dementia services
- Option 5. Combination of options three and four
 - (5a) As Option Five but with pilot of 4 step-down beds.

Each of these options was described in detail in the consultation document previously presented to the HOSC.

During the consultation period it became clear that there have been a number of changes in both activity and the buildings themselves, including bed occupancy, standards of existing wards / services, and current and future costs. This included opinion from clinical leads who raised concerns that in terms of existing standards for dementia wards and care, the 'no change' option is unlikely to continue to provide a safe, caring clinical environment even if the current locations are supportive to carers in particular.

Evidence from various sources was gathered and made available to an Options Appraisal Panel comprising CCG clinical leads and commissioners. The panel scored each of the options against weighted criteria. The results identified a grouping of poorly performing options associated with retaining existing facilities (Options 1, 2, 3a and 3b), and a smaller number of more highly performing options which all anticipate a more extensive reconfiguration of bed-based services, involving the introduction of step-down beds either directly or as part of a phased approach (Options 4, 5a and 5b).

2. Decisions by the CCGs

The three Clinical Commissioning Groups at their respective Governing Body meetings on the 11th December 2013 reviewed the responses to the consultation, the outcome of the options appraisal panel and the final report of the East Sussex HOSC.

All three Governing Bodies agreed unanimously that Option 4, to close both sites and create a wholly new model of bed-based dementia services, was the preferred option for implementation. High Weald Lewes Havens CCG Governing Body recommended a specific caveat that the model of care was subject to a full business case process, including Governing Body sign off prior to the closure of the existing sites, and that neither of the existing sites was precluded from consideration when identifying the future location for the new model of care.

3. Next Steps

A small working group will be set up to develop the new model of care, options for delivery and a business case that will be reviewed by the three CCGs during 2014. Clinicians and stakeholders will play an integral part in this process of designing safe and sustainable services which reflect the needs of those people who require bed-based dementia assessment, both now and in the future.

It is anticipated that the business case will be complete within six months.

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Also on behalf of High Weald Lewes Havens CCG

30 December 2013