

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

Date of meeting: 2 December 2021

By: Assistant Chief Executive

Title: Redesigning Inpatient Mental Health Services in East Sussex

Purpose: To consider whether the NHS decision on the future of inpatient mental health services is in the best interest of the health service in East Sussex

RECOMMENDATIONS

The Committee is recommended to consider whether the East Sussex Clinical Commissioning Group's decision as set out in paragraph 2.1 in relation to inpatient mental health services is in the best interest of the health service in East Sussex.

1. Background

- 1.1. On 10th June 2021 the HOSC considered a report by the East Sussex Clinical Commissioning Groups (CCG) in partnership with Sussex Partnership NHS Foundation Trust (SPFT) on the proposal to move mental health inpatient services from the Department of Psychiatry to new facilities to be built on a different site at either Bexhill or Hailsham.
- 1.2. The Department of Psychiatry is located at the Eastbourne District General Hospital and contains three wards with a total of 54 beds of which 40 are dormitory beds. Two of the wards are dormitory wards with 18 beds each and the other is a mixture of four dormitory beds and 14 single bedrooms with shared bathrooms.
- 1.3. The Government announced £400m of funding in October 2020 for the eradication of dormitory wards. SPFT, supported by the CCG, successfully applied for funding of £46.67m to replace the Department of Psychiatry by March 2024 with a new facility containing 54 single ensuite bedrooms.
- 1.4. Following an options appraisal of a number of potential sites, the CCG and Trust agreed to consult on two possible sites for the new facility: a greenfield site off Mount View Street, North East Bexhill-on-Sea; or Amberstone Hospital, near Hailsham. Bexhill is the CCG and Trust's preferred option.
- 1.5. The Committee resolved that the proposals constituted a 'substantial development or variation to services' requiring formal consultation by the CCG with HOSC in accordance with health scrutiny legislation.
- 1.6. HOSC established a Review Board to consider the evidence in relation to the proposed closure and replacement of the Department of Psychiatry and prepare a report and any recommendations as the Committee's response to the consultation. The Board comprised Cllrs Belsey, Mrs Barnes, Robinson and Turner, and Jennifer Twist; the Review Board elected Cllr Belsey as the Chair.
- 1.7. The Review Board considered a wide range of written and oral evidence from NHS and other witnesses and agreed a draft report and recommendations. The report endorsed the reasons for developing a new inpatient mental health facility to replace the Department of Psychiatry and recommended a number of actions for the CCG and SPFT to undertake at whichever site was chosen as the new inpatient mental health facility.
- 1.8. The HOSC agreed on 23rd September to endorse the draft report; agreed to allow the Review Board to finalise the report after considering the outcome of the public consultation (which

was not completed at the time of the HOSC meeting); and agreed to refer the final report to East Sussex CCG for consideration as part of their decision making process.

1.9. The Review Board submitted the final report to the CCG, with a few minor changes, ahead of its Governing Body meeting on 17th November for consideration alongside the outcome of the public consultation and the CCG's Decision Making Business Case (DMBC).

2. Supporting information

NHS Decision

2.1. The East Sussex CCG Governing Body agreed at its meeting on 17th November to:

Reprovide the inpatient services at the Department of Psychiatry, Eastbourne, to a new facility in Bexhill.

2.2. A summary of the DMBC is attached as **Appendix 1** to this report. The DMBC provides more detail of the proposed decision and sets out the reasons for taking it. The [full agenda pack of the East Sussex CCG Governing Body is available on the CCG's website](#) and includes full versions of the Equality and Health Inequalities Impact Assessment (EHIA), Quality Impact Assessment (QIA) and consultation report by ORS.

Response to HOSC's recommendations

2.3. The final HOSC report submitted to the CCG is attached as **Appendix 2** to this report. The CCG's DMBC summary includes a response to the HOSC recommendations attached as Appendix 2 (page 142 of the pack)

HOSC role in considering NHS decisions

2.4. Health regulations allow a HOSC, once the CCG has taken its decision on a substantial variation, to consider whether the decision in relation to the proposed service change is in the best interests of the health service in its area. In reaching the view, the Committee should take into account the evidence gathered during its review and the responses to its recommendations.

2.5. If a HOSC does not consider the decision to be in the best interests of the health service in its area, it has the option to refer the decision to the Secretary of State for Health for review. Any referral may not be made unless a HOSC is satisfied that reasonably practicable steps have been taken to try to reach agreement with the local NHS. Thus, should a HOSC consider that the CCG's decision is not in the best interests of the local health service, it would need to consider whether all possible steps have been taken to reach an agreement, prior to making a referral.

2.6. Any referral that HOSC makes to the Secretary of State *must* be accompanied by, amongst other things:

- an explanation of the reasons for making the referral;
- a summary of the evidence considered, including any evidence of the effect or potential effect of the proposal on the sustainability or otherwise of the health service in the area; and
- an explanation of any steps that the HOSC has taken to try to reach agreement with the CCG.

3. Conclusion and reasons for recommendations

3.1. The Committee is recommended to consider whether the East Sussex CCG's decision in relation to redesigning inpatient mental health services in East Sussex as set out in paragraph 2.1 is in the best interest of the health service in East Sussex.

3.2. If HOSC determines that the CCG's decisions are not in the best interests of the health service, the Committee will need to consider whether or not to refer the matter to the Secretary of State for Health and to agree the grounds for such a referral. The Committee must consider whether all practicable steps to reach local agreement have been taken before making a referral.

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