

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

Date of meeting: 10 June 2021

By: Assistant Chief Executive

Title: Redesigning Inpatient Mental Health Services in East Sussex

Purpose: To consider proposals for the redesign of inpatient mental health services in East Sussex, with a focus on the services provided at the Department of Psychiatry in Eastbourne being moved on to a new site within the next three years.

RECOMMENDATIONS

The Committee is recommended to:

1. Agree that the service change proposals set out in Appendix 1 constitute a ‘substantial variation’ to health service provision requiring statutory consultation with HOSC under health scrutiny legislation.
 2. Agree that HOSC will undertake a detailed review of the proposals from June to October in order to prepare a report and recommendations.
 3. Comment on the NHS East Sussex Clinical Commissioning Group’s plan for undertaking public consultation on the proposals (Appendix 2)
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1. Background

1.1. Sussex Partnership NHS Foundation Trust (SPFT) provides inpatient mental health care to patients across four services areas – working age adults, older age adults, rehabilitation, and those living with dementia – in four locations in East Sussex – the Department of Psychiatry at Eastbourne District General Hospital (EDGH), Woodlands Centre at Conquest Hospital in Hastings, Beechwood Unit at Uckfield Hospital, and Amberstone Hospital near Hailsham. Mental health inpatient stays tend to be unplanned except in a few specific circumstances.

1.2. SPFT and the NHS East Sussex Clinical Commissioning Group (CCG) recognise that these facilities are no longer fit-for-purpose and are working in partnership to develop proposals to improve the quality of inpatient services.

1.3. The Government announced an initiative in October 2020 for all NHS mental health trusts to eradicate “dormitory” style wards and replace them with single en-suite rooms by March 2024. The Government committed more than £400 million of capital investment nationally over the next four years to achieve this goal.

1.4. In March 2021 HOSC received a summary of the progress to date in developing proposals for the future of inpatient mental health services in East Sussex. This work has now developed into a pre-consultation business case (PCBC) setting out specific proposals from the NHS which are presented in this report for the Committee’s consideration. In March, HOSC confirmed that any proposals that include a relocation of current inpatient services were likely constitute a substantial variation in services which would require a formal consultation under health scrutiny legislation.

2. Supporting information

2.1. The report from the CCG and SPFT attached as **Appendix 1** sets out their proposals for the future of inpatient mental health services in East Sussex.

2.2. The CCG and SPFT have identified an overarching goal of “*building a new state-of-the-art facility potentially provided on a single campus sufficient to service all of the mental health inpatient*”

needs of the people of East Sussex, now and in the future". They believe that the most effective way to achieve this goal is to deliver this campus in phases.

2.3. The current proposal (which constitutes a first phase towards the above goal) is to move the mental health inpatient services currently based at the Department of Psychiatry (DoP) at EDGH to new facilities to be built on a different site. The proposal aims to benefit from the national funding being made available now to remove all out-dated dormitory accommodation - which the DoP has.

2.4. The DoP at the EDGH contains the following three dormitory wards:

Location	Name	Service	Gender	Beds
Eastbourne District General Hospital, Eastbourne	Department of Psychiatry	Amberley Ward - inpatient care for adults with mental health problems	Female	18
		Bodiam Ward - inpatient care for adults with mental health problems	Male	18
		Heathfield Ward - inpatient mental health care for older people or those with additional physical and wellbeing needs	Mixed	18

2.5. The NHS proposal is that these DoP inpatient services could be relocated to either:

- a greenfield site next to Mount View Street, North East Bexhill, Bexhill-on-Sea (the preferred option); or
- a site around Amberstone Hospital, near Hailsham.

2.6 Further detail of the engagement and assurance processes which have informed the development of the proposals and PCBC, and the options considered, are included within **Appendix 1**. The full PCBC and appendices are available on the SHCP Website [Homepage | Sussex Health & Care Partnership \(sussexhealthandcare.uk\)](http://sussexhealthandcare.uk)

2.7 The CCG and SPFT have reviewed and modelled demand for mental health inpatient services over the period to 2040 and this shows fairly stable to falling demand for working age adults but larger increases in demand for services for older people and people with dementia. The capital funding currently available is only sufficient to support a re-provision of the existing 54 inpatient beds at the DoP but the proposal indicates that a site development would be able to expand in future years dependent on anticipated demand.

2.8 The PCBC will be considered by the East Sussex CCG Governing Body at its meeting on 9 June. At that meeting the Governing Body will consider whether to:

- endorse the proposals;
- agree that the CCG commences a consultation process with the East Sussex HOSC; and
- agree to commencing a formal public consultation.

2.9 If the proposals are endorsed, the public consultation is expected to run for 12 weeks between 14 June and 6 September 2021. Further detail about the CCG's communication and engagement plan is attached at **Appendix 2**. This includes at section 6 a high-level timeline and at section 8 a commentary on the Equality and Health Inequality Impact assessment.

3. HOSC role

3.1 Under health scrutiny legislation, NHS organisations are required to consult affected HOSCs about a proposed service change that would constitute a 'substantial development or variation' to services for the residents of the HOSC area.

3.2 There is no national definition of what constitutes a 'substantial' change. Factors such as the number or proportion of patients affected, the nature of the impact and the availability of

alternative services are often taken into account in coming to an agreement between the HOSC and the NHS on whether formal consultation is required.

3.3 In this case, HOSC has previously indicated that any proposals that include a relocation of current inpatient services were likely constitute a substantial variation in services which would require a formal consultation with the committee. The CCG has also indicated the intention to undertake a public consultation on the proposals.

3.4 If HOSC agrees that the confirmed proposals do constitute a substantial change the Committee will need to consider the plans in detail in order to respond to the CCG with a report and recommendations. The Committee may wish to consider how it would undertake this task, which could be through establishing a Review Board to conduct a review on behalf of the full HOSC, with the Committee agreeing any recommendations before they are submitted to the NHS.

3.5 HOSC's review would also need to consider the effectiveness of the NHS public consultation process and would take account of the consultation responses when making recommendations. The Committee is invited to comment now on the planned approach to consultation as set out in **Appendix 2**.

4. Conclusion and reasons for recommendations

4.1 This report presents HOSC with proposals for the development of inpatient mental health services in East Sussex, in particular the first phase of the redesign that will involve moving the services provided at the DoP in EDGH to a new site within the next three years.

4.2 The Committee is recommended to agree that the service change proposals set out in Appendix 1 constitute a 'substantial variation' to health service provision requiring statutory consultation with HOSC; to agree to undertake a detailed review of the proposals; and to comment on the CCG's plan for undertaking public consultation on the proposals as set out in Appendix 2.

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