

Report to Nottinghamshire Health Scrutiny Committee: 29 September 2020

Improving Acute Mental Health Inpatient Care Environments in Mid Nottinghamshire

Introduction

- 1. The Committee received a paper in February 2020 on the Trust's intention to purchase a hospital site in the Mansfield area from St Andrew's Healthcare. The purchase is part of the Trust's plan to improve inpatient care environments for mental health services. The purchase represents a significant investment by the Trust, with the overriding aim of improving the quality of care.
- 2. This paper provides an update to the Committee and includes our plan for involving local stakeholders in mobilising the new site.
- 3. The Trust has recently named the site as 'Sherwood Oak', using the naming selection process as an early opportunity for local engagement.
- 4. At the meeting on 25 February, the Committee requested information about any Nottinghamshire patients currently receiving care at the St Andrew's site and what their transfer plans were. This information is also included in the report.

Update on Hospital Purchase

- 5. The acquisition of the site is progressing well. The Trust has exchanged contracts with St Andrew's Healthcare and is anticipating completion by November / December 2020, at which point we will take ownership of the vacant site.
- 6. We are developing plans for configuring the site to ensure it is suitable for acute mental health care (the site is currently a low and medium secure hospital). The site will provide four inpatient wards and a Section 136 Suite.
- 7. Our plan is to start to transfer adult mental health services to the site in May 2021, however the timing will be dependent on the scale of capital works required at the site.
- 8. The Committee may recall that mental health services for older people will remain at the Millbrook Unit. We are developing plans to also upgrade that site so that it can provide single sex, ensuite accommodation that meets high quality standards.

Nottinghamshire Patients at the St Andrew's site

- 9. St Andrew's have been working with patients, carers and commissioners to develop onward care packages to support the transfer of their patients from the Mansfield site. This is in line with the Government's Transforming Care programme, which aims to reduce the number of people with autism and learning disabilities who are living in secure care and increasing the number who are supported within the community, in less restrictive settings.
- 10. St Andrew's Healthcare have provided the following update to us for the Committee regarding Nottinghamshire patients at their Mansfield site. All care plans have been developed in collaboration with patients, their carers, and commissioners.
 - There were four patients from the Nottinghamshire area at the point when the Trust agreed to purchase the site:
 - o One patient has transferred to another secure hospital within area
 - One patient will step down from medium to low secure inpatient care within the area
 - One patient will step down to locked rehab within the area
 - One patient will step down to residential care within the area.

Involving Local Stakeholders

- 11. The Trust developed an engagement plan earlier in the year to ensure local stakeholders are involved in the mobilisation of the new site. A copy of the plan is attached at Appendix 1. Though there are some constraints due to Covid-19 and social distancing, the Trust is deploying online ways of engaging, including social media.
- 12. Recent involvement has included the naming of the new site, where we engaged with staff, service users, carers and the local community online, gathering suggestions for the site name. Over 150 suggestions were submitted and a judging panel consisting of service users, carers, front line staff and the Trust's Chief Executive identified Sherwood Oaks as the name.

Next Steps

13. A summary of the key milestones is set out below:

Milestone	Timeframe	Interdependencies
Transfer of existing patients by	By October 2020	St Andrew's plan to transfer
St Andrew's from the Mansfield		all patients by the end of
site		September
Contract completion with St	December 2020	Aiming for contract
Andrew's and handover of		completion by end of
vacant site to the Trust		November
Trust modifications to the site –	From December	Subject to scale and scope of
to change from secure to acute	2020 to May 2021	works required at the
setting		Sherwood Oaks site
Commence transfer of adult	From May 2021	
mental health services from		
Millbrook Unit to the new		
Sherwood Oaks site		

14. Once the adult mental health services have moved from the Millbrook Unit, the second phase of programme can commence, with modifications to that Unit to improve the care environment for older people. The plan for this second phase is currently being developed and will also require significant additional capital investment.

Conclusion

- 15. The purchase of the St Andrew's site, to be known as 'Sherwood Oaks', is progressing well and according to plan with the aim of transferring services in Spring 2021. This will deliver significant quality improvements for local patients, their carers/visitors and our staff.
- 16. The Trust has developed an engagement plan to ensure local stakeholders are involved in key decisions regarding the new site and how we adapt it for our patient cohorts. This plan is ensuring we take account of constraints in place due to Covid-19.
- 17. A second phase of the programme is being developed regarding the improvements required at the Millbrook Unit for mental health services for older people.
- 18. The Health Scrutiny Committee is asked to:
 - NOTE this update.



Appendix 1

Summary for Health Scrutiny Committee

Communications and Engagement Plan:

Improving Inpatient Care Environments

Purchase of St Andrew's Mansfield Site and Transfer of the Trust's Services

June 2020

(Updated September 2020)

1. Introduction

- 1.1 Nottinghamshire Healthcare has recently agreed to purchase an additional hospital site in Mansfield from St Andrew's Healthcare. The site is a 64-bed hospital. The Trust is expecting to be able to take full ownership of the site during late Autumn this year and to complete any modifications to the site during the early part of 2021 ready for the transfer of services.
- 1.2 The Trust is fully committed to involving patient and carer representatives, and other key stakeholders in the co-design of how we adapt the new site and if there are any concerns, how we might address those.
- 1.3 The site purchase marks a very significant investment by the Trust in improving the quality of care we provide.
- 1.4 The Trust is planning to transfer Adult Mental Health (AMH) Inpatient Services from their existing location at the Trust's Millbrook Unit, to the new site. Purchase of the site will also offer the opportunity for co-location of other AMH teams, which will enhance the ability to manage crisis care pathways.
- 1.5 Mental Health Services for Older People (MHSOP) will remain at the Millbrook site but will benefit from being able to move into the Lucy Wade ward, once vacated by AMH. That ward is on the ground floor of the Millbrook Unit and was recently refurbished to provide 16 single ensuite beds. By remaining at the Millbrook Unit, MHSOP services will continue to be co-located with acute medical services that are provided at the King's Mill Centre, which is a real benefit from a clinical perspective due to the complex needs of many of the MHSOP patients.
- 1.6 In time, we will also look at further developments at the Millbrook Unit to ensure all MHSOP accommodation there meets good practice guidelines.

2. Our Overall Ambition

- Improving quality has been the single most important driver for this acquisition.
- The transfer of AMH services to the St Andrew's site will ensure that essential quality improvements can be made and sustained.
- To ensure meaningful engagement with staff, service users and other key stakeholders during the development of our transfer plans. Through this we can ensure that their opinions directly influence the development of the four key areas: clinical model, the care environments; to truly understand the impact on people; and developing partnerships
- To understand and explore the Trust's role in the community and be responsible stewards of the building and services we provide, working closely with local communities and valuable partners.
- In retaining MHSOP services at the Millbrook site, we can make the necessary quality improvements to care within these services.

3. Key Messages

- 3.1 The key messages the Trust wishes to share as part of the communication and engagement process are:
 - The need for change is compelling.
 - The quality improvements achievable through the transfer of AMH inpatient services are significant. The associated co-location of other relevant AMH teams will provide a fantastic opportunity to really make a difference to the quality of care we provide to patients and the everyday experience of our staff. The benefits of this acquisition and the transfer of services will include:
 - single room, ensuite accommodation
 - direct access to dedicated outdoor space
 - development of space and facilities for therapeutic activities
 - o improved lines of sight for observations and safer ward environments
 - wards with appropriate numbers of beds
 - improvements in the experience for visitors
 - improved working environment for staff
 - improved seclusion areas
 - improved S136 accommodation
 - ability to meet CQC recommendations and health building standards
 - increased collaboration and integrated working across co-located teams
- 3.2 Noted in national standards and health building guidance, such improvements will significantly enhance patients' safety, privacy, dignity, behaviour and well-being. Improvements in care environments have a direct and positive impact on service delivery and patient outcomes.
- 3.3 MHSOP services will remain at the Millbrook site and thus will retain co-location with acute medical services. MHSOP services will be able to achieve quality improvements by utilising the Lucy Wade ward, and the Trust will look to make further improvements.

4. Aims of this Communication and Engagement Plan

- Identify key stakeholders
- Identify potential areas of concern arising from the transfer of services
- Identify the four key areas for engagement to take place across
- Plan and coordinate a range of engagement activities across an identified framework
- Ensure communication and engagement with stakeholders is timely and effective and meaningful
- Utilisation of virtual means of communication and engagement whilst restrictions are in place during the Covid-19 pandemic, and into the near and mid future.

5. Key Stakeholders

- 5.1 There is a wide range of stakeholders and we have identified the key ones in terms of mobilising the new site and the transfer of services. The key stakeholders include:
 - Patients
 - Carers and visitors
 - Staff

- The local community
- Local commissioners
- Partner organisations such as social care

6. Potential Areas of Concern

- 6.1 The developments are likely to receive high levels of support Though the investment in the new site and the transfer of services is overwhelmingly a positive development and will enable a very significant improvement in the quality of care, we nevertheless recognise there may be some concerns and we are committed to hearing what they are and how we might address them.
- 6.2 Concerns may potentially be raised in relation to:
 - Change of location the possibility that the new site might present difficulties for a small minority of people. The new site is only 4 miles from the Millbrook Unit and is on a public transport route. Nevertheless, the Trust will work closely with stakeholders and those potentially affected.
 - Affordability and related investment decisions.
 - Ability to proceed unhindered due to the restrictions being imposed by the Government during the Covid-19 pandemic.
 - Similarly, the inability to use conventional forms of communication and engagement.

7. Engagement Approach

- 7.1 The approach Nottinghamshire Healthcare wishes to take around communication and engagement builds on the work the Trust has continued to develop around collaborative working since developing a collaborative <u>model</u> with the Kings Fund in 2017.
- 7.2 This Communications and Engagement Plan will be concerned with <u>four key areas of work</u> <u>which can be influenced</u>:
 - The Clinical Model
 - The Environment
 - The Impact on People
 - The Development of Partnerships
- 7.3 The guiding principle is to work as collaboratively as possible throughout the process, however it is acknowledged that a blended approach to communication and engagement will need to take place. There are four identified approaches to these levels of engagement.
 - **Informing** providing communities and individuals with balanced and objective information to assist them in understanding problems, alternatives, opportunities and solutions.

This will be achieved by ensuring a transparent process. Communications in relation to the transfer will be shared in a co-ordinated and contemporaneous manner so stakeholders are aware of conversations as they happen.

• **Consulting** – obtaining community and individual feedback on analysis, alternatives, and/or

decisions e.g. virtual surveys and focus groups

We will gather views and encourage questions from all stakeholders via social media platforms and online surveys.

 Involving – working with communities and patients to ensure that concerns and aspirations are consistently understood and considered e.g. service users and carers being involved in project plans

The identification of key organisations, stakeholders and individuals who may like to be part of a collaborative group to be involved in all stages of the transition process.

• **Collaborating** – working in partnership with communities and patients in each aspect of the decision, including the development of alternatives and the identification of preferred solutions.

For instance, the development of a service user/carer oversight groups to input into specific pieces of work, such as development of the clinical model and input into environmental aspects of the site.

7.4 The plan will ensure that meaningful engagement takes place across the four key areas elements. As much as possible Nottinghamshire Healthcare will work towards the 'collaborating' element, articulating when working in other spaces in order to maintain transparency as well as being clear on the level of influence service users, carers, staff can expect.

8. Planned Communication and Engagement Activities

- 8.1 On the following pages, we set out the range of activities we are planning across the framework of Informing, Consulting, Involving and Collaborating.
- 8.2 Some activities have already commenced, and the plan will be fully activated between June 2020 and the transfer of services in Early / Spring 2021.

INFORMING

- We have set up a dedicated webpage on the Trust website, which explains the reasons for change and informs about the purchase of the site. The page has a link for people interested in contributing to the co-design. <u>https://www.nottinghamshirehealthcare.nhs.uk/improvinginpatientcare</u>
- The Trust website will share the plans to date and the progression of plans, reasons for change and any themes, feedback and conclusions from what we have heard. This will facilitate a transparent process and ensure that all people interested can be directed to the conversation so far.
- We will include on the webpages service user and carer feedback and links to further patient feedback that the Trust gathers.
- Social media channels identified as key communicators Trust's Twitter and Facebook accounts, Involvement & Experience Twitter, Instagram. We have recently used the social media platforms to announce the site name.
- Stakeholder mapping has occurred and all will be kept informed and up to date with progress, consisting of but not limited to: patients, carers, visitors, staff, local commissioners, Health Scrutiny Committee, Notts Healthwatch County, Local MP, local acute provider – Sherwood Forest Hospitals, relevant 3rd sector providers e.g. Nottinghamshire MIND, Harmless, Framework, ISAS.
- We will send regular newsletters to stakeholders containing all the key information and ways to 'join in' the conversation.
- Press releases we will engage the local media in the positive story about this development.

CONSULTING

- Focus group of service user and carer volunteers has been established and has begun to identify themes and areas of importance that will require further investigation and engagement. Questions developed by the group to be put out to current inpatients, and through online questionnaires to gather wider views from those that have used inpatient services
- The dedicated webpages on the Trust website will allow for engagement for the Improving Inpatient Care Environments (IICE) conversation, all comments and feedback will be collated and themed throughout.
- Video/YouTube updates created monthly with key questions included so service users/carers, staff and the public can respond and comment.
- Online surveys will be used in order to gain views on specific issues across the four workstreams at multiple points throughout the process.
- The use of social media platforms such as Twitter, Facebook & Instagram will continue to inform about the process but also make

invitations to be involved in the conversation both by directing people to the webpages or by active invitation to be a part of the groups looking at the four key areas of work; clinical model, environment, impact on people, development of partnerships.

• A 'frequently asked questions summary' will be developed to answer key queries and will be shared on the Trust webpages. The summary will be updated contemporaneously as the communication and engagement process develops.

INVOLVING

- Involvement group has been set up with service users and carers, and monthly meetings taking place
- The naming of the new unit went out to the public, with over 150 suggestions received online. The judging panel included service user and carer representation.
- Service user and carer volunteers have already been involved in the developing of the communications message out to the wider public eg press release on the acquisition of the site.
- We will be considering the use of new online tools that will facilitate generating and sharing of ideas. This is outside of the current digital tools we will already be using such as Microsoft Teams, YouTube, Facebook, Twitter, Instagram, Nottinghamshire Healthcare website pages, online questionnaires.
- We will have service user representation at the key decision-making committees in the Trust. Currently identifying service user and carers with lived experience of inpatient settings to join membership of the internal programme board. In addition, workstreams to either have a lived experience representative or to work closely with involvement group as plans develop.

COLLABORATING

• A collaborative group to be formed consisting of service users, carers, Trust staff and other organisation representatives providing oversight of the collaborative process across the four key areas of work; clinical model, environment, impact on people, development of partnerships.