

Health Scrutiny Committee Briefing October 2021

Better Mental Health for Bassetlaw Transforming mental health services: including a focus on adults and older people's inpatient services

1 Background

NHS Bassetlaw Clinical Commissioning Group (CCG) and Nottinghamshire Healthcare NHS Foundation Trust (Trust) have been fully committed to regularly involving the Health Scrutiny Committee (HSC) on their proposed significant transformation programme for mental health services delivering high quality inpatient mental health services for people in Bassetlaw.

At the Health Scrutiny Committee meeting on 7 September 2021, NHS Bassetlaw CCG reported that following a period of engagement around mental health inpatient services, their Governing Body had approved in principle to move specialist inpatient care services to new 'state of the art' mental health units in Millbrook and Sherwood Oaks but that this was predicated on further work to address transport concerns for Bassetlaw patients raised during the engagement period.

To achieve this, the Governing Body agreed that a Task and Finish Group be set up to ensure a fully considered and engaged approach is undertaken to develop a Bassetlaw Mental Health Travel Plan for visitors of patients receiving inpatient care. The intention of Governing Body is to help families and carers of patients who need it to have access to appropriate travel-related advice and support when mental health services provided on B1 ward (for older people and those with dementia) and services provided on B2 ward (for adults) are relocated to Millbrook Mental Health Unit and Sherwood Oaks Hospital respectively.

The work of the Task and Finish Group was completed in September. The Travel Plan has been fully informed by the feedback received from those with mental health needs, patients, carers, families, clinicians and other partners as part of this engagement. The Plan also builds on the extensive engagement already undertaken across our community in January to April 2021.

This paper outlines the approach used to develop the Bassetlaw Mental Health Travel Plan for inpatient visitors and includes an initial DRAFT version of the Plan. HSC has been invited by NHS Bassetlaw Governing Body to comment on the DRAFT Plan. The views of HSC members as well as the final version of the Travel Plan will be considered by NHS Bassetlaw CCG Governing Body on 19th October 2021.

Input from Nottinghamshire County Council travel officers has been sought to support the development of this Plan but remains outstanding.

2 Developing the Bassetlaw mental health inpatient visitors' travel plan

A Task and Finish (T&F) group was set up to design a process by which inequalities in access can be avoided for those most impacted by the proposed relocation of inpatient services. As part of this work, the T&F group built on the extensive engagement already undertaken across the Bassetlaw community and sought to further involve service users of Bassetlaw and Mansfield based inpatient services. This additional engagement ensured co-design of any recommendations for a Travel Plan.

Over a three week period in September, intensive engagement was undertaken with feedback gained from the following:

- Bassetlaw Carers Support Group (10 present at meeting)
- Sherwood Oaks Steering Involvement Group (SOSIG) (14 present at meeting including patients, carers and volunteers on inpatient wards)
- Four Chairs of Bassetlaw GP practice Patient and Public Participation Groups
- One-to-one telephone interviews with 27 patients, carers and family members familiar with mental health inpatient service provision at Bassetlaw Hospital
- Desk top review of existing feedback from survey respondents, self-identifying as patients, carers and volunteers with experience of inpatient services at Bassetlaw, who took part in the "Transforming Mental Health Services in Bassetlaw" engagement earlier this year (@ 80 responses).

The engagement and research aimed to gain the following insight that would inform the co-production of a Bassetlaw Mental Health Travel Plan for visitors of patients receiving inpatient care:

- A guide to the principles that should underpin a Travel Plan for visitors
- The type of support that would be most helpful to patients, carers and families and how it might work in practice
- The type of criteria that should be applied to allow access to specific support in a way that ensures fairness and equity

A summary of the key findings from the work of the T&F Group are outlined below.

Summary of Key Principles

Key principles to underpin the final Travel Plan were developed using issues consistently raised during the engagement exercise. These are:

- Maintaining fairness and equity for all patients, carers and families, including across mental health and physical health needs
- Ease and simplicity of application of any support offer both financial and non-financial

- Criteria for application of support is flexible and adaptable to meet individual needs of patients, their carers and families

Summary of Findings

Some common themes emerged throughout the insight-gathering process:

- There was a high level of support for the idea of individual family Travel Plans since this recognised that there is not a “one-size fits all” solution to supporting patient and carers travel needs. Patients have different support needs, some of which are dependent on which stage of their treatment they are at. Carers also have access to different modes of travel, different time and external constraints (e.g. work, childcare commitments, etc) so maintaining flexibility is essential in determining what type of travel assistance and support is required and how it is applied.
- There is consensus that patients should be given autonomy in terms of how travel support is utilised while recognising that for some patients (e.g. patients with dementia), an advocate may be needed to agree the terms of an individual family Travel Plan with them. Travel support needs were identified as non-financial as well as financial for those in most impacted.
- Non-financial support would be an important part of a carer’s needs if inpatient services were to be relocated to Sherwood Oaks and Millbrook. This includes information and advice about how to get there for all types of users (private car and public transport and timetables for the latter); what types of alternative travel modes are available including community transport; taxi firm details and any available buddying schemes); site maps for each mental health unit including car parking; local attractions to take patients out on their “day releases” as part of their discharge treatment; local facilities (including food and retail outlets).
- There was no consensus about what criteria ought to be applied for access to specific financial travel assistance and support. Many thought that people who did not have access to their own private transport should be prioritised. Others recognised that while they themselves may not access this support, this provision should be offered to Bassetlaw families who would be impacted. Some also felt that this should be offered during a transition period, with a clear termination date, to current and recent inpatients and their families. There was a clear concern that offering additional financial support to patient families/carers would in effect create inequity with the wider patient population who are not offered support to access specialist services (mental or physical needs). Interviewees (including staff) also raised concerns that in the long-term there may be perceived, as well as actual, unfairness between patients attending Millbrook and Sherwood Oaks from Bassetlaw and those attending these units from other parts of the County. It was also raised in the context that there may be expectations from patients in Bassetlaw who were attending specialist non-mental health inpatient services outside the district that they should also be able to access this type of travel assistance and support (e.g. cancer care). It has also

been noted that the CCG does not have any statutory role in providing funding for patient family/carer access or for patients outside the national Patient Transport Services eligibility criteria. This is currently under national consultation and the CCG will be obliged to take the results of this and the national policy that will be produced into account when determining entitlement and levels of allowance for visitors. The need to balance support for those impacted and the additional cost burden on local NHS funding was also raised.

The principles and findings have been used to inform the content of the draft Travel Plan.

3 Draft Bassetlaw Mental Health Travel Plan for Visitors of people using inpatient services at Millbrook and Sherwood Oaks

Introduction

NHS Bassetlaw CCG has developed this Travel Plan for Bassetlaw for visitors of patients accessing specialist mental health inpatient services. This Plan has been introduced following the decision by NHS Bassetlaw CCG to support the relocation of inpatient services in new state of the art premises located at Mansfield for Adults and Older People. This decision has been taken alongside an agreement to invest £4m in community based services to support all patients with mental health needs to access the support and care they need as close to home as possible.

Services currently provided in Bassetlaw for people with mental health needs will remain in Bassetlaw. This includes crisis and urgent responses to mental health needs which will remain based at Bassetlaw Hospital. The exception to this is the provision of specialist mental health inpatient services.

In making this decision NHS Bassetlaw has engaged extensively with our wider community including service users, carers and families, staff and representative organisations. The CCG has also taken into account the improved access and facilities it will provide for the majority of patients that use the service who live in Nottingham and elsewhere in the County. We have also undertaken an additional specific engagement exercise dedicated to the development of this Travel Plan. This work was undertaken following concerns expressed by patients, families and carers about the impact on the patients from Bassetlaw as a result of this relocation. NHS Bassetlaw Governing Body has listened to these concerns and undertook more detailed work to develop this Travel Plan in order to minimise the negative impact for those most affected by the relocation.

This Plan sets out the principles that were agreed through this focussed engagement work. It then outlines what action we intend to take, based on these principles, to support Bassetlaw carers, families and 'significant others' to visit patients whilst undergoing inpatient treatment at the Mansfield sites at Millbrook and Sherwood Oaks.

All patients requiring elective or non-urgent inpatient services will continue to be offered transport support under the terms of the national Healthcare Travel Cost Scheme (HTCS)

(see <https://www.nhs.uk/nhs-services/help-with-health-costs/healthcare-travel-costs-scheme-htcs/>.)

All patients requiring urgent access to services will continue to be offered ambulance or emergency transport arrangements to access these services.

Travel Plan Principles

Principles emerging from our engagement with patients, carers and families that underpin this Travel Plan are:

- Maintaining fairness and equity for all patients, carers and families, including across mental health and physical health needs
- Ensure that support offered, both financial and non-financial, is simple and easy to apply
- Criteria for accessing support is flexible and adaptable to meet individual needs of patients, their carers and families

Each of these principles have been considered in relation to Travel Plan proposals.

The NHS does not have a statutory responsibility to provide financial travel support for visitors of inpatients. NHS Bassetlaw CCG does however fully appreciate that the transition period for relocation of specialist mental health inpatient services for patients currently under the care of the Bassetlaw District General Hospital team may cause significant challenge for some visitors.

The current estimated need for inpatient beds is 85 Bassetlaw patients per year. This need is expected to decline further as more community based services become established as a result of the £4m investment by Bassetlaw CCG in community and crisis response services. These services will remain based in Bassetlaw. Further work to develop access to urgent facilities at the Bassetlaw Hospital is also underway. This will create an enhanced space for future crisis mental health responses.

As a result of our engagement exercise we estimate that the majority of patients and their carers/families would benefit from assistance with travel planning in relation to information and support from a Peer Support Worker. It is also estimated that a maximum, approximately 20-25% of patients (and their families), would request support for financial assistance.

Whilst it is not the statutory responsibility of the CCG to provide assistance to carers and families to visit patients the CCG has agreed that on an EXCEPTIONAL basis consideration ought to be given to offering enhanced support for those most affected by the relocation of inpatient mental health beds from Bassetlaw to Millbrook and Sherwood Oaks.

This Travel Plan identifies two main forms of enhanced support to meet the needs of visitors: non-financial support and financial support. The Plan has been developed in a way that is consistent with the principles outlined above.

The scope of this Plan is intended to consider the specific impact of the relocation of inpatient beds from Bassetlaw Hospital to Mansfield. Further work will continue to be undertaken by Bassetlaw CCG and partners to address wider issues relating to

overall access to services for our community to improve patient outcomes and reduce health inequalities.

Non-financial Support for Visitors

- Non-financial support will be provided in the form of **a comprehensive “Visitors Guide” pack** to help carers and families navigate travel to the mental health units in Mansfield and familiarise themselves with local facilities. This responds to concerns expressed relating to easily accessible information about options for travel. The Guide pack will therefore include as a minimum:
 - Ways of getting to Millbrook Mental Health Unit and Sherwood Oaks Hospital by car and public transport
 - Details of community transport schemes; local taxi services; car-sharing and buddy schemes to access the specialist mental health services in Mansfield
 - Site maps of Millbrook Mental Health Unit and Sherwood Oaks Hospital and their visiting policy
 - Details of local facilities and local parks and attractions for visitors to use and also patients as part of their discharge treatment
 - Local facilities (including food and retail outlets)
- The Visitors Guide pack will be maintained by Nottinghamshire Healthcare Trust (NHCT) and made available in hard copy as well as electronically for access via its website for all visitors.
- Families/carers will be offered individual support by the NHCT Carer Support Worker at a Ward level to understand the information available and work with the family to identify the most appropriate arrangements to suit their individual circumstances
- Local Carer’s groups will be encouraged to support peer transport arrangements, offering the opportunity for peer support for families and carers of those with serious mental ill health as well as transport solutions and reducing travel carbon footprint. Bassetlaw CCG will consider proposals for such arrangements as part of its Small Grants Scheme processes.
- When a person is admitted to hospital with mental health needs, maintenance of family relationships is likely to be of benefit to the adult and face-to-face visits are to be encouraged. However, this does not stop patients and carers / families using digital technology to support virtual contact to supplement these visits.
- Where a family wishes to make contact with a patient using virtual means NHCT will facilitate this via the provision of ward based tablets/devices.
- Advice and guidance on the availability of virtual means of patient contact will also be made available as part of the Visitors Guide. NHCT will also offer

support in the form of loaned equipment where requested by relatives and carers who may be digitally deprived should they wish to use this form of contact.

- Families/carers wishing to receive support to gain confidence in the use of tablets/devices to remain in contact with patients will be signposted into local available community/voluntary based services. This will be facilitated by the Peer Support Worker. Further information on local support will also be provided within the Travel Pack. NHS Bassetlaw CCG is seeking to build community digital confidence and competence as part of its work with Place partners to reduce health inequalities and improve access to services. Initiatives to promote this are already underway supported through our grant funding arrangements.
- Further work will be undertaken by NHCT to support virtual visiting arrangements in 2021/22 informed by patient and visitor feedback.

Financial Support for Visitors

- **Financial support** in the form of a **Personal Visitors Allowance (PVA)** for carers and family members will be provided on an exceptional basis and without precedent.
- This arrangement will be reviewed in 2 years unless the current consultation on the national Patient Transport Services eligibility criteria provides greater benefits for visitors. The review must take into account the outcome of the national consultation and any new national NHS policy in this area.
- The Personal Visitors Allowance will be accessible to those meeting the following criteria:
 - Access to financial travel support will be provided for patients registered with a Bassetlaw GP practice
 - Patients will be under the care of NHCT and receiving treatment as an inpatient at Millbrook or Sherwood Oaks.
 - Relatives and carers must incur greater expenditure than a visit to Bassetlaw Hospital would have incurred and will receive funding for the 'excess mileage'.
 - Travel planning, including any access to funding, would be undertaken between the patient (or a representative) and the NHCT Carer Support Worker at the point of admission as an inpatient or as soon as possible thereafter.
 - Where visitors are able to make their own journey, have access to their own transport or transport from their family/friends then they should continue to do so. Patients with access to private transport are not expected to access financial support through this scheme.

- Funding support will only be used for the travel needs of visitors nominated by the patient
- Any travel costs incurred and where reimbursement is sought will be demonstrated through receipts or other reasonable forms of evidence provided to the ward based Carer Support Worker. No reimbursement will be made without such receipts or reasonable evidence of expenditure
- Reasonable costs will be assessed in relation to the benefit to the patient's recovery and the personal circumstances of the carer/family member
- The person using the inpatient services will always be fully consulted regarding their preference for visiting and will identify the person(s) most significant to them who will aid their recovery and may also support their safe and timely discharge
- Costs reimbursed under this arrangement are expected to represent the most cost efficient form of travel. This will enable each visitor to adapt their travel plan according to their personal circumstances (e.g. age, medical condition, travel distance). It is likely that the most cost efficient form of transport for visitors will be by car.
- All travel planning will be developed with each patient/visitor supported by the Peer Support Worker so that each patient has a clear, bespoke, Visitor Travel Plan.
- Funding will not be provided for overnight stays. This may only be considered for funding where there has been prior agreement by the NHCT Peer Support Worker as part of the individual travel plan discussions AND this is regarded to be a cost effective use of NHS resources AND is in the best interests of the recovery of the patient i.e. an intense period of daily visiting is indicated.

Claims

Travel by Car

- Claims made should be submitted to the Carer Support Worker on an official Patient's Visitor Travelling Claim Form
- For visitors who travel by private motor car 100% of the excess mileage travelled (using the most economic route) will be reimbursed at the HMRC transport rate.
- Excess mileage will be assessed as the distance from the nominated visitor's residence to either the Sherwood Oaks or Millbrook site minus the distance that would have been incurred by a visit to Bassetlaw District Hospital.
- Reimbursement of expenses for taxis will remain consistent with travel by car rates. All claims must include a receipt for the taxi fare.
- There are no car parking charges at either Mansfield site which represents a significant cost reduction for visitors compared with

current arrangements at Bassetlaw Hospital site. Therefore it is not expected any claims for car parking will be supported.

Travel by Public Transport

- Visitors who use public transport may use either train or bus (or a combination of both). The cost reimbursed will be 100% of the fares paid. Tickets and receipts must be presented with the travel claim form.
- It is recognised that for older persons travelling off peak their older persons travel pass will permit free travel. The Nottinghamshire concessionary bus pass is valid for travel within England between 9:30am to 11pm, Monday to Friday and all day weekends and Bank holidays. Visitors will be supported to access this means of travel as part of the individual travel plan discussion with the Peer Support Worker

Travel by Community Transport

- In special circumstances, travel by community transport may be the most cost efficient for some visitors. Reimbursement rates for this form of transport will be reimbursed at 'carer' rates. Claims will require a receipt from the community Transport provider.

4 Next steps

Feedback from the HSC's deliberations on 12 October 2021 will be fed back to NHS Bassetlaw's Governing Body for final consideration on 19 October 2021.

APPENDIX 1: Responses to HSC clarification questions

At its meeting on 7 September 2021, the HSC raised a number of points on which they sought clarification. These are outlined below.

1 Timeline for proposed changes

The timeline below will take effect if the proposals to relocate specialist mental health inpatient services from Bassetlaw to Mansfield are agreed by the CCG Governing Body on 19 October 2021.

	Period
Travel Plan proposals developed and reviewed by HSC and CCG Governing Body	01/09/21 – 19/10/21
Pending the outcome of the above, confirmation of timetable for transfer of Bassetlaw B1 and B2	30/11/21
Leaflets/information sheets developed for patients and carers notifying them of the changes, and providing information on how to get help where necessary.	01/12/21 – 31/03/22
Communication to all GP practices in Bassetlaw.	01/04/22 – 26/05/22
Communication to all current patients notifying them of plans.	01/04/22 – 26/05/22
Support provided to current inpatients, relatives and carers around continued travel arrangements post transfer. Completion of the Travel Plan documents/information available in hard copy on wards and virtually	01/04/22 – 26/05/22
Inpatient care transferred from Bassetlaw to Mansfield.	26/05/22 – 31/05/22
Patients admitted from 1 June 2022 will be admitted directly to Mansfield.	01/06/22
Information leaflets/signposting to Travel Plan documents available to all referred patients and patients on LMHT/ CMHT/CRHT caseload.	01/06/22 onwards

2 Provision for staff

Staff working within wards B1 and B2 at Bassetlaw have all been involved in a full organisational change process with appropriate engagement and consultation.

Every member of staff affected by the transfer to Mansfield has been individually interviewed to obtain their personal circumstances around changing their base to Mansfield and appropriate support offered to those who are reliant upon public transport. This is in line with the Trust's organisational change policy and national HR policies around employee rights regarding change of base. Staff wishing to remain working in Bassetlaw are being retained in services provided in Worksop – others are choosing to work at Sherwood Oaks Hospital.

3 Enhanced local crisis services

Consideration has been given to the request to explore 'Crash Pad' provision within Bassetlaw. For those older people with an organic mental illness this is already available through provision of respite services. For adults with functional mental health needs, crisis accommodation is currently commissioned and provided by Turning Point in Nottingham. Current data indicates that seven Bassetlaw residents have used this provision since 2019. NHS Bassetlaw CCG also currently commissions roaming sanctuaries and Bassetlaw Safe Space for patients in need of support in a crisis. Bassetlaw has the lowest uptake across Nottinghamshire for this service provision.

In addition to this, the additional investments in Community Mental Health services has the overall aim to ensure that there is 'no wrong door' and no one falls between 'gaps' in care. The community Mental Health Transformation investments will enable more people to be supported within their own home through either intensive community mental health service provision or the Step Two mental health services that have been commissioned for delivery within peoples own communities. In addition it is envisaged that this expansion in community MH services will facilitate earlier discharge from inpatient settings with discharge planning commencing at the point of admission.

NHS Bassetlaw remains committed to ensuring that mental health services across the Bassetlaw Place meet local needs and are provided in a coherent and planned approach. The CCGs is therefore eager to continue to work with all our partners and particularly those who use services and their carers to achieve this.