PAPER H



COMMITTEE: POLICY AND SCRUTINY COMMITTEE HEALTH AND SOCIAL CARE - 16 MARCH 2020

REPORT TITLE: FUTURE OF SHACKLETON WARD

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Purpose of Report

This report has been provided at the request of the Policy and Scrutiny Committee to update the Committee on the current position and future plans for the Shackleton ward service.

Background

Shackleton ward was a 4 bed unit providing dementia mental health inpatient beds within the acute hospital at the St. Mary's Hospital site. The CQC identified concerns regarding the safety and quality of care on the ward and issued a warning notice when they inspected the ward on 28th June 2019. The Trust took the decision to close the ward to admissions at this time. The ward was re-inspected by the CQC on 7th August and was still non-compliant. This was due in large part to the ongoing difficulties we have found in recruiting and retaining the people with the right skills to support our patients in Shackleton Ward. The Chief Executive Officer took a decision to transfer or discharge the two patients who were in the ward at that time. Both were able to be discharged.

At the following Isle of Wight Trust Board, on 5th September 2019, the Board considered a number of options for the ward, including reopening, serving notice to commissioners of the service, and working with commissioners to retain and redesign the service. The Board took the view that there was a high risk that the safety and quality concerns identified, including the high staff vacancy rate, would persist, and may take many months and external support, to address. In addition, the CQC had indicated in the letter setting out their re-inspection findings that they would take enforcement action if the ward was opened without immediate improvements to care quality. On this basis the Board decided that reopening the ward was not possible. Commissioners indicated that their preferred approach would be to work in collaboration with the Trust to redesign the service, and the Board agreed this was the preferred option.

Current Service Provision

The Trust and CCG have been working to establish a community based mental health dementia outreach service that can support individuals who might have previously required admission to Shackleton ward in their own home. This model is more in line

with national mental health dementia services than the Shackleton ward service, and aims to reduce the need for admission to mental health dementia beds.

It is clear that even with this form of community service in place there will still be an occasional requirement for admission to a mental health dementia bed, and in these current circumstances admission is to a mainland bed. We anticipate that as the community service develops there will be an incremental increase in community service delivery and reduction in use of mainland beds.

Transformation resource has been identified by NHSE/I and the CCG, and clinical expertise by Solent NHS Trust to support this work. We have received pump priming funds from NHSI/E to support the establishment of the community dementia outreach team. We are currently recruiting staff to this service, and in this period have been able to offer a limited outreach service to support people in the community. Once fully recruited, the team will also begin to offer a care home liaison service.

I am pleased to report that to date use of mainland beds has been very low, with no patients in mainland beds between 16th December 2019 and 27th February 2020, and one person in a mainland bed currently.

When admissions are required in this interim period we make every effort to identify a bed that is close to the Isle of Wight, and we have good relationships with services in Portsmouth and Southampton that will support us with this. The Dementia Outreach team maintain regular contact with any individual admitted to a mainland bed throughout their admission and liaise closely with adult social care in order to support early discharge back to the island. The team also provide support to the family, and ensure they are able to visit their loved one during the mainland admission, including assistance with travel costs.

The Dementia Outreach service will provide the first building block of developing a service more focused on early diagnosis, intervention and support and a move away on reliance on traditional, inpatient reliant services. This service will continue to be developed to provide a more comprehensive community-based service and to provide in-reach support to patients admitted to acute medical wards with physical health conditions with co-existing dementia issues to move through and out of the acute hospital environment more effectively.

The Outreach service will reduce the number of people with dementia who need to be admitted to hospital by working with individuals in their own homes, care homes and residential care settings so that they can be supported in an environment that is familiar to them in order to mitigate worsening symptoms associated with moving to an unfamiliar environment. This means that that only people with the most acute needs will need to access inpatient support. In the short-term, it is unlikely that this reduced requirement for dementia inpatient provision can safely be provided on the island so we will continue to rely on a minimum level of mainland provision to meet these requirements.

Future of Shackleton Ward

There are a number of connected workstreams in progress currently that will contribute to the medium and long term decision making regarding the future of the Shackleton ward service model. These include:

- The IOW NHS Trust is currently developing a strategy for the whole organisation, of which mental health services will be a key part and more staff, patient and public engagement is planned as that strategy develops and once it is published.
- Through the partnership with Solent NHS Trust we are engaging with staff, service users, carers, commissioners, social care, primary care and other stakeholders to design a resilient and person-centred model of mental health and learning disability care. The design work is currently in progress, and we expect the final design and implementation plan to be in place by the end of May 2020. The model will include mental health dementia provision in hospital and the community.
- The Isle of Wight Local Care Board has established a system-wide programme to deliver transformation of dementia services on the island. The Trust, CCG, local authority, Healthwatch, third sector and private sector partners have all engaged in this work, which will establish and implement a dementia strategy for the island, including the provision of specialist mental health dementia services in hospital and the community. The first task of this workstream has been to complete a 'stocktake', and there has been public, service user, family and carer and staff engagement in this work. Currently we are engaging with people across the system to build on the 'stocktake' and develop the strategy for consultation. When this is complete–we will develop a business case for delivery of dementia services. Public consultation will be undertaken as required before any enduring and substantial changes are implemented, as outlined in the Duty to Consult guidance. The Local Care Board will provide oversight of the implementation of the business case.

We have sought advice from NHS England regarding the need to consult following the closure of Shackleton ward. Their advice is that as the decision to close the ward was made on grounds of safety no public consultation was required at that time, but consultation is required to determine the long term future of the service, and they are in agreement that the approach to develop and deliver a strategy described above will satisfy the requirements for consultation.