

OXLEAS NHS FOUNDATION TRUST

Proposed changes to older people's mental health inpatient services

Briefing for Bexley OSC, June 2011

1. Introduction

Over the last eighteen months, South London Healthcare Trust (SLHT) have refocused service provision on the Queen Mary's Hospital site to include a range of non-emergency services for the care of older adults. At the same time, national requirements have strengthened the separation of inpatient care for men and women and the need to ensure high quality care in a time of constrained resources in the NHS, has never been higher.

During this period, the use of older adult mental health inpatient beds has reduced considerably. This is due to increased resource in our older people's community mental health services and the introduction of more effective ways of supporting people in their own homes. Our older people inpatient wards now always have empty beds – the average occupancy rate across the Trust is around 70% and on any day, we have the equivalent of a ward of empty beds across our three units. In Bexley, average bed occupancy over the last 12 months was 71% (ranging from 54% - 84%/month).

In order to improve the quality of inpatient care, meet the new national privacy and dignity requirements and support the emerging vision for the QMS site, the Trust is proposing to reconfigure older people's mental health inpatient services in Bexley, Bromley and Greenwich.

Current mental health inpatient provision is as follows:

	Dementia beds	Other mental health beds
Bexley: Woodlands Unit	14	17
Bromley: Green Parks House	22	22
Greenwich: Oxleas House	Shepherdleas ward: 19	

2. Quality Improvements

The reduced occupancy gives us an opportunity to improve the quality of care and make more effective use of our resources. We are proposing to reorganise our services to create a centre of excellence in the care of people with dementia at the Woodlands Unit, QMS, and two further specialist wards for older people with other mental health problems at Green Parks House, PRUH, Bromley and at Oxleas House, QEH, Greenwich. In this process, the overall number of beds will be reduced to meet the lower level of demand.

The changes will mean that some patients and carers have to travel further to receive inpatient care; however, there will be the following benefits:

- Inpatient services will be more specialised and deliver better outcomes and patient satisfaction;
- Men and women will be cared for in separate accommodation to ensure safety, privacy and dignity;
- The staff skill mix will be enhanced to ensure full multi disciplinary input;
- We will improve the provision of therapeutic groups and activities on the wards;
- A new post will take responsibility for ensuring a smooth pathway for patients from admission through to discharge;
- All patients will have a private bedroom, many with ensuite facilities;
- The Trust will make capital investment where necessary to ensure that all older adult wards offer a high quality environment.

3. Mitigating the impact of increased travel

For Bexley residents with dementia, there will be no change. Bexley residents with functional mental illness requiring an admission will have to travel to our wards at either Oxleas House (QEH) or Green Parks House (PRUH).

SLHT already have moved to service delivery over three sites and many Oxleas patients will be using Queen Elizabeth's Hospital or the PRUH to receive treatment for physical health conditions and will be familiar with travel arrangements. However, we have reconfigured our volunteer service in anticipation of these changes, and will extend our volunteer driver service so that carers who do not drive can be offered a volunteer driver (if possible).

4. Impact on staff

We have begun the process of talking to staff about the changes and will be launching a formal staff consultation process in due course. We are hopeful that all affected staff will be found suitable roles within the trust, as we know their skills and experience will assist the development of the new model.

5. Involvement of patients, carers and other stakeholders

We will be working with patients and their families, our governors and partner organisations to ensure that this development takes place smoothly and that the changes deliver inpatient services in the way patients want.

We have set up a stakeholder reference group open to any partner organisation, to provide regular feedback and to incorporate a wide range of views in our planning.

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