

Planned Changes to Mental Health Rehabilitation Services in Cumbria

Cumbria Health Scrutiny Committee
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Joint report:

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Introduction

This briefing provides further information for Cumbria Health Scrutiny Committee on the planned changes to the provision of mental health rehabilitation inpatient services, currently delivered by Cumbria Partnership NHS Foundation Trust (CPFT) through the Acorn Unit at the Carleton Clinic in Carlisle.

Background

NHS Cumbria CCG was the commissioner of mental health services for the whole Cumbria population until the boundary change in 2017, and the split into NHS North Cumbria and NHS Morecambe Bay CCGs. NHS Cumbria CCG commissioned mental health services from Cumbria Partnership NHS Foundation Trust (CPFT) and some more specialist care from a range of specialist providers outside Cumbria.

Over the last few years there have been significant challenges being felt nationally, including workforce and increasing demand. CPFT has a Care Quality Commission (CQC) rating of Requires Improvement

In light of ongoing concerns regarding the quality and effectiveness of CPFT mental health and learning disability services both CCGs agreed to review commissioning intentions. There has been a comprehensive due diligence process and it was agreed the full transfer of all age mental health and learning disability services in North Cumbria, from Cumbria Partnership NHS Foundation Trust (CPFT) to Northumberland, Tyne and Wear NHS Foundation Trust (NTW) (becoming Cumbria, Northumberland, Tyne and Wear (CNTW) from Oct 1 2019) for North Cumbria; and Lancashire Care NHS Foundation Trust (LCFT) (becoming Lancashire and South Cumbria NHS Foundation Trust (LSCFT) from Oct 1 2019) for South Cumbria. The transfer was due to take place on the 1st October 2019. In preparation for this transfer of services, both CCGs, NTW, LCFT and CPFT have worked closely together to undertake a robust review of mental health service configuration, delivery and performance in North Cumbria, including mental health rehabilitation services.

The recommissioning of mental health services for the population of Cumbria has already seen significant improvements to services and has supported the reduction in unplanned acute out of county placements from:

- 21 on the 23rd June 2019
- 6 on the 23rd September 2019.

A Review of the Acorn Unit

Around five years ago CPFT recognised an opportunity to provide some specialist service more locally, including male inpatient rehabilitation. An offer was made in 2014/15 to NHS Cumbria CCG to pilot such a service to test the clinical model and impact.

CPFT opened the previously refurbished 16 bed Acorn Unit at the Carleton Clinic. This was established under agreement that CPFT hold responsibility for costs other than those agreed at the time the pilot was commissioned. The CCG agreed to support the pilot service on a 'cost per case' basis, up to a maximum of 10 beds.

This arrangement continued after the 2017 CCG boundary change and remained in place in the current 2019/20 contract. There was also an in year support cost agreed between the CCGs and CPFT which was paid through the contract, irrelevant of activity and bed costs.

Over the five years of the Acorn Unit being available it never went beyond its pilot status and that the unit therefore has not been formally commissioned by either CCG. It also has not reached optimum level of inpatients usually with no more than 60% of its beds filled at any one time and use across the two CCGs varied each year. For example, there has only been 1 patient from South Cumbria admitted to the ward in 2018 and again only 1 in 2019.

The Acorn Unit was initially established to facilitate rehabilitation for men with complex mental health needs detained under the Mental Health Act, identified by CPFT as a cohort they could support locally, and as such has never provided services for adult women. Women have continued to be admitted to out of area placements in order to access rehabilitation services. The male patient group has been very mixed and there is some confusion around the aims and purpose of admission, expected length of stay and clinical outcomes. These have varied from the pilot stage to present service delivery and little change has occurred to the model whilst demand and need for rehabilitation services has changed around Acorn.

The Acorn Unit has admitted men from acute mental health treatment and rehabilitation wards that have a longer length of stay as well as providing active rehabilitation for some. It has also acted as a 'step-down' for male patients returning to Cumbria from Low or Medium Secure Forensic Hospitals elsewhere in the country. The typical discharge destination from Acorn is supported living, including individual tenancies which is a pathway supported by the system and providing a positive outcome to service users.

It was agreed to review the current mental health services, including the Acorn Unit as part of a wider review of Urgent Care Pathways in Mental Health services. As both CCGs are now placed within different larger Integrated Care Systems (ICS) the design and commissioning of future service provision will sit in these footprints. As such the ICS commissioning groups are identifying a longer term bed model and rehabilitation model for each clinical system. The Acorn review will help inform those processes and also ensure that learning from the Acorn pilot, and the needs of Cumbria residents, is embedded into those new services.

As a result of the review it is also acknowledged that Cumbria does not provide an accessible, evidence-based, best practice rehabilitation pathway consistently across the two emerging systems of North East and North Cumbria, and Lancashire with South Cumbria. Such a pathway would include community rehabilitation services that facilitate care as close to the person's home as possible and deliver continuity of care and early discharge when within an in-patient setting, high dependency unit or longer term rehabilitation services.

CCG commissioning intentions

The North Cumbria System Executive Team acknowledged that the current stand-alone service has not been commissioned in the traditional sense and currently does not meet the identified population need for mental health rehabilitation. It therefore approved the temporary closure to admissions and the re-provision of high dependency and in-patient open rehabilitation services for up to approximately 8 individuals per year within the well-defined NTW rehabilitation pathway. This would include - access to short term fast track, open, high dependency and longer term and community based rehabilitation services, whilst a broader review is carried out by NTW for the longer term.

NHS Morecambe Bay CCG has also identified the need to redesign mental health rehabilitation services to meet the needs of residents from south Cumbria and include a whole Bay service offer to include residents of north Lancashire. Given that there have only been 2 admissions in 2018 and 2019 (to date) Morecambe Bay CCG intends to work with NTW while work to re-commission rehabilitation services across Morecambe Bay is aligned to a wider model within the Lancashire and South Cumbria footprint with LCFT.

LCFT is currently developing a service profile for rehabilitation beds in line with the well-established NTW offer. This pathway development will include wrap around services from all providers in the community to support service users as they step down from inpatient care. From April 2020 south Cumbria residents will be able to access rehabilitation beds within LCFT: early indications of location are that it will be more accessible for South Cumbria patients than the Carlisle unit.

Engagement

Patients

A review of the needs of all patients currently receiving services within the Acorn Unit was completed and an analysis of projected future need undertaken (based on current usage and numbers requiring step-down from secure care).

This identified that some of the current in-patients are ready for discharge and will require support into the community which could be actioned within a number of weeks and the identified that the needs of remaining individuals can be met via transfer to both NTW open rehabilitation and high dependency unit (HDU) rehabilitation services to be facilitated at the earliest opportunity. Comprehensive assessments have been undertaken in order to determine which part of NTW's Rehabilitation Service will best offer services to the remaining Cumbrian patients.

Senior clinicians from CPFT have met current service users and their families and they will be involved in the ongoing care plan of the individual service users.

Where in-patient services are required, support arrangements will be established to ensure carers and families are able to maintain contact with their loved ones should they be transferred to NTW Services via the use of technology and other support.

Staff

Staff have been briefed and are being supported by contact on site with senior managers alongside HR and union representatives. Senior clinicians and managers from both CPFT and NTW have met with staff to facilitate a smooth transition of all patient pathways and ensure that their expertise informs future pathway development and are deployed in support of a broader rehabilitation pathway in the future. Staff will continue to work in partnership with our current patients, their carers and families to support existing care pathways, for either, a transition back into their community or into NTW inpatient rehabilitation services appropriate to their assessed needs. The Acorn team is highly valued.

All of the staff aligned to the Acorn Unit are part of the transfer of services to NTW and as such there is no impact to staff in the south of the county and NHS Morecambe Bay CCG has no ongoing concerns about staff within the south profile.

Stakeholders

Stakeholders were provided with a written briefing ahead of the executive decision and had the opportunity to ask questions ahead of the information being shared more widely.

A formal briefing has been provided to the multi stakeholder North Cumbria System Leadership Team and Bay Health and Care Partners Leadership Team.

Community

Information has been shared through the media, social media and other networks. We have attempted to ensure timely and comprehensive communication with staff, service users and their carers and families.

Conclusion

The recommissioning of mental health services for the population of Cumbria has already seen significant improvements to services and has supported the reduction in unplanned acute out of county placements from 21 to just six between 23rd June and 23rd September 2019.

Our priority is to ensure that the services we provide are consistent within well-defined rehabilitation pathways for Cumbria residents.

NHS North Cumbria CCG wishes to commission services from NTW, an organisation that is rated as outstanding by the Care Quality Commission

NHS South Cumbria CCG is working with LCFT to develop safe and sustainable rehabilitation services. LCFT is working NTW as a partner to design their services to ensure consistent outcomes for all residents.

As such all current patients within the Acorn Unit will be supported along their current care pathway and either transitioned into a community placement or transferred to NTW by the end of October 2019.

The re-provision of services as outlined within this paper will allow all patients in Cumbria to access a much broader range of evidenced based rehabilitation services according to their assessed needs, within both NTW and LCFT, including an improved local community based offer.

Also provided:

Appendix 1 – Current CPFT bed numbers

Appendix 2 – CQC provider ratings.

CPFT Current Bed Configuration

Table 3. CPFT support patient pathways via the following bed configuration.

Function	Bed numbers	Site
Acute assessment and treatment	22	Hadrian, Carleton Clinic, Carlisle including assessment centre
Acute assessment and treatment	20	Dova, Furness General Hospital site, Barrow in Furness
Acute assessment and treatment	10	Kentmere, Westmoreland General Hospital site, Kendal
Acute assessment and treatment	16	Yewdale, West Cumberland General Hospital site, Whitehaven
Functional Frail Elderly	12	Oakwood, Carleton Clinic, Carlisle
Dementia assessment & treatment	15	Ramsey, Furness General Hospital site, Barrow in Furness
Dementia assessment & treatment	15	Ruskin, Carleton Clinic, Carlisle
PICU	10	Rowanwood, Carleton Clinic, Carlisle
Male Rehabilitation	10	Acorn, Carleton Clinic, Carlisle
TOTALS	Acute Assessment and Treatment	68
	Functional frail elderly	12
	Dementia specialist	30
	PICU	10
	Rehabilitation	10

CQC Provider Ratings

Cumbria Partnership NHS Foundation Trust (CPFT)

CPFT has provided all age mental health and learning disability services across Cumbria for a number of years, however despite working closely with other parts of the system it has struggled to meet a number of quality, performance and regulatory requirements.

The Care Quality Commission (CQC) subsequently provided an overall rating of **Requires Improvement** to CPFT in their report dated 26th January 2018, being rated as good for Caring and rated as requires improvement for Safe, Effective, Responsive and Well Led. The report highlighted that in relation to specific services CPFT community mental health services with learning disabilities or autism, mental health crisis services and health-based places of safety and community-based mental health services for adults of working age were rated as good. However the CQC also highlighted that wards for older people with mental health problems, specialist community mental health services for children and young people, community-based mental health services for older people, acute wards for adults of working age and psychiatric intensive care units, wards for people with a learning disability or autism and long stay or rehabilitation mental health wards for working age adults were rated as Requires Improvement.

A further CQC inspection of CPFT services was undertaken in July of 2019 and has maintained the overall rating of *Requires Improvement*.

Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW)

The Care Quality Commission (CQC) provided an overall rating of **Outstanding** to NTW in their report dated 26th July 2018, being rated as Good for Safe, and Outstanding for Effective, Caring, Responsive and Well Led. The report highlighted that all specific services were rated as either Good or Outstanding.

Lancashire and South Cumbria NHS Foundation Trust (LSCFT)

The Care Quality Commission (CQC) provided an overall rating of **Requires Improvement** to LCFT in their report dated 11th September 2019, being rated as Good for Caring and rated as requires improvement for Safe, Effective, Caring, Responsive and Well led. The report highlighted that in relation to specific services LCFT community-based mental health services for older people, child and adolescent mental health wards, forensic inpatient or secure wards, community mental health services with learning disabilities or autism, specialist community mental health services for children and young people, wards for older people with mental health problems, were all rated as being Good, with only community-based mental health services for adults of working age being rated as requires Improvement and mental health crisis services and health-based places of safety being rated as Inadequate.

For more information contact...

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