

Planning for the Future of Older People's Mental Health Services

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Today we will explain...

- ➡ Why we're proposing changes
- ➡ What we're proposing to do
- ➡ How we've engaged and consulted, and the feedback we've had
- ➡ Our recommendations



Why change?

Final Joint Hampshire Commissioning Strategy for Older People's Mental Health



**Hampshire Primary Care Trust
and
Hampshire County Council**

**Joint Hampshire Commissioning Strategy for
Older People's Mental Health
2008 - 2013**

Working in partnership with:

**Hampshire Partnership NHS Trust
Surrey and Borders Partnership NHS Trust
Alzheimer's Society**



PCT/HCC Joint Commissioning Strategy for Older People's Mental Health

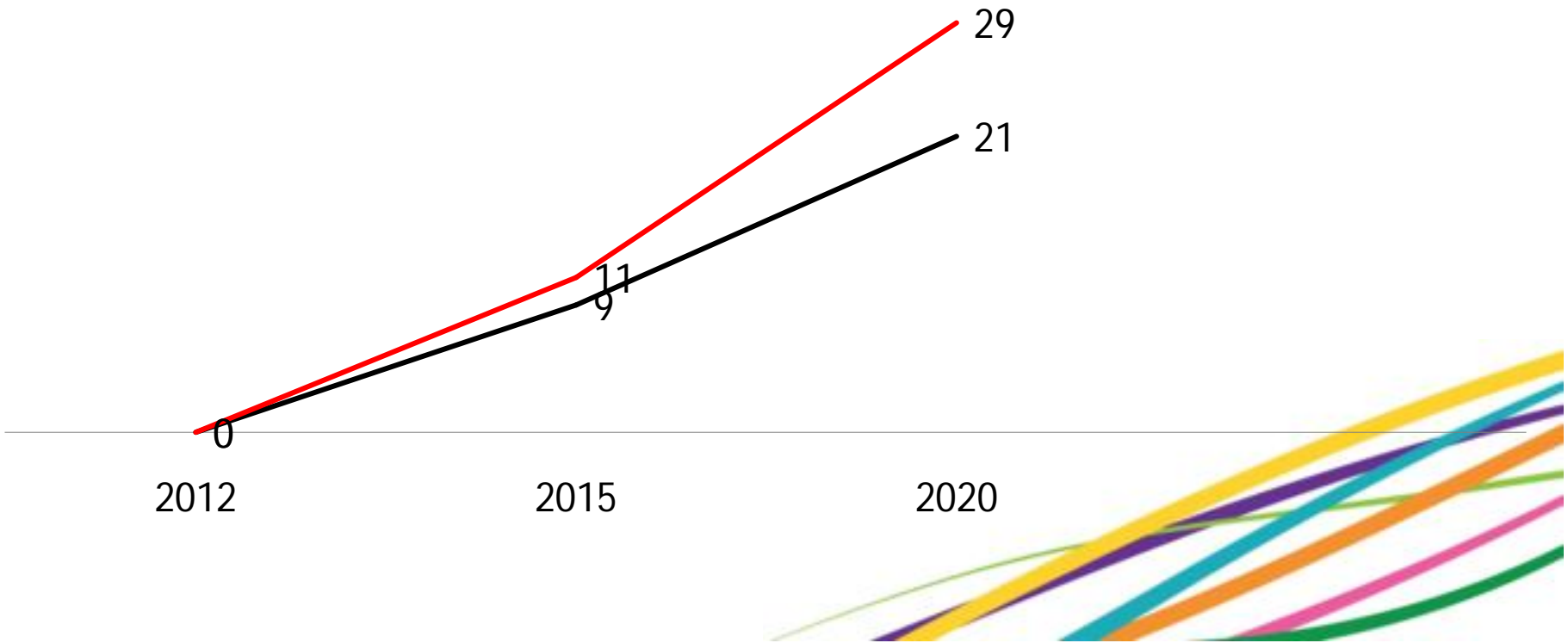
- Published in 2008
- Wide involvement and engagement across all stakeholders
- Identified a growing demand for services....



Scale of need

Increased prevalence from baseline 2012

— % increase over 65 — % increase in dementia



PCT/HCC Joint Commissioning Strategy for Older People's Mental Health

- ➔ Published in 2008
- ➔ Wide involvement and engagement across all stakeholders
- ➔ Identified a growing demand for services
- ➔ Identified a range of needs which local mental health services would have to respond to



Overarching commissioning aims of the Joint Strategy for OPMH services

- Services deliver person-centred care addressing mental and physical health needs
- Promote independence and choice
- Support carers
- Improve pathways into and out of hospital
- Ensure care is based on best evidence of effectiveness



What we're proposing to do



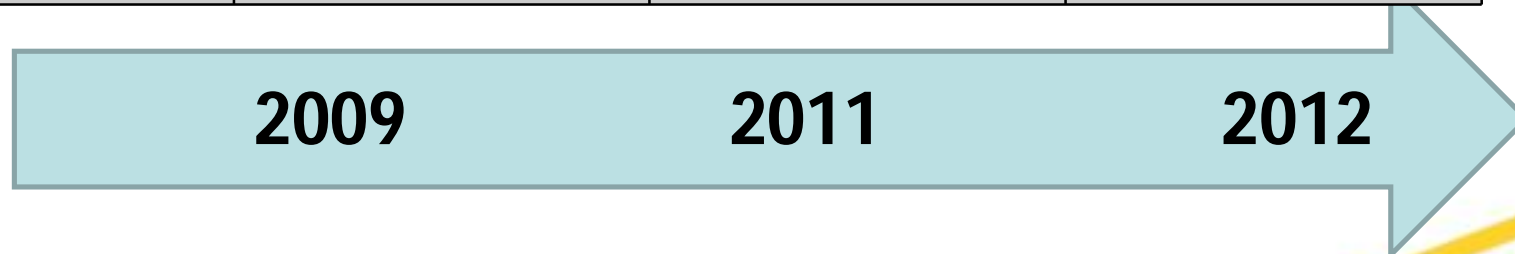
The next stage



- Already redesigned services in:
 - Andover – Allan Gardiner Unit
 - Southampton – Tom Rudd Unit
- Broad engagement prior to service developments
- Now in the third phase of this service redesign



<i>holistic</i>	Joint clinics	Realigned with physical health teams	
<i>independence</i>	Memory Matters Programme	Mental health advisors	
<i>carers</i>	Dedicated care home liaison		
<i>pathways</i>		Improved wards at Western Hospital.	



Andover

Southampton

W&E Hants



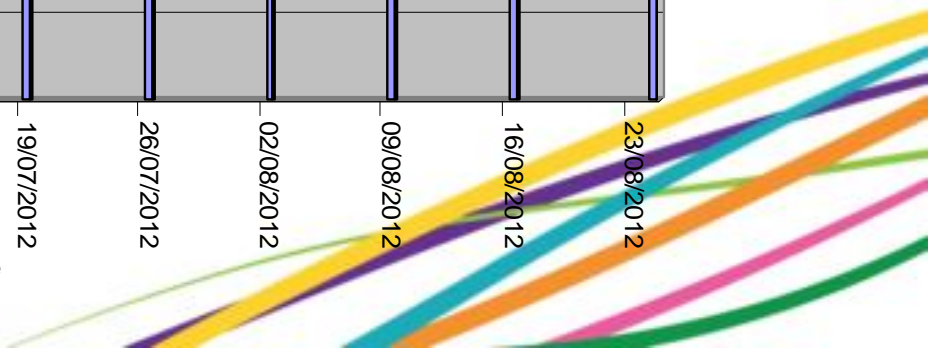
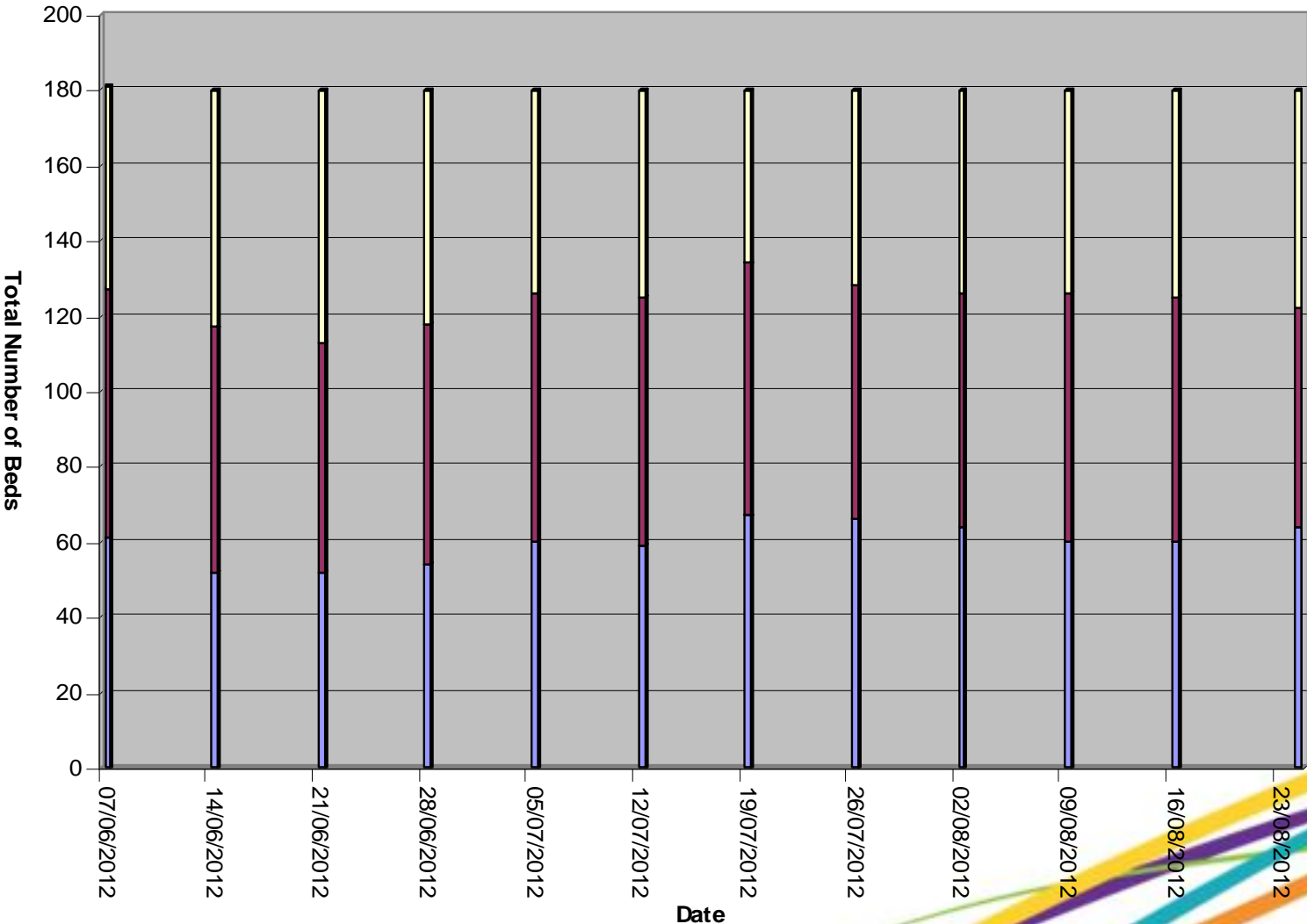
Bed capacity

- Over the past three years, we have been monitoring closely the level of bed capacity we have across the county
- Despite having reduced beds, we still have, on average, 60 vacant beds in the trust at any one time
- This is using resources that could be better utilised on activities that will have a more positive effect on how we care for patients



Snapshot of Bed usage Over June - Aug 2012

■ Organic ■ Functional
■ Unused



Public engagement and consultation

- Engagement programme from October 2011 – April 2012
- 12-week consultation – 4 May - 27 July 2012
- 12 public engagement events
- 18 face to face meetings with individuals and groups
- Meetings and updates with MPs, GPs and Hampshire LINKs
- Stakeholder meetings held fortnightly between Feb and June 2012 (still ongoing on a monthly basis)
- Attendance at 20 meetings
- Website information and online survey




The four key tests

- Support from GP commissioners
- Strengthened patient and public engagement
- Clarity on the clinical evidence base
- Patient choice



Key messages from engagement and consultation activity

- Improving admission and discharge processes when a hospital bed is required
 - Importance of developing existing and new services in the community
 - Carers said that patients don't want to be inpatients unless it is absolutely necessary
 - Closer working with primary care
 - Welcomed increased support into nursing/care homes, acute sector
 - Concern over increased travel times and access to transport for carers visiting their loved ones
 - Concern over capacity of services in the future
 - The need for respite care
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Main issues

- Transport – creation of a transport plan for East and West, developed with stakeholder group
- Carer support – continuing to work around closer integration of support services with voluntary sector and local authority. Don't envisage increase in support as removing already vacant beds
- Respite care – working closely with local authority colleagues to support as much as possible



Our recommendations for East and West Hampshire

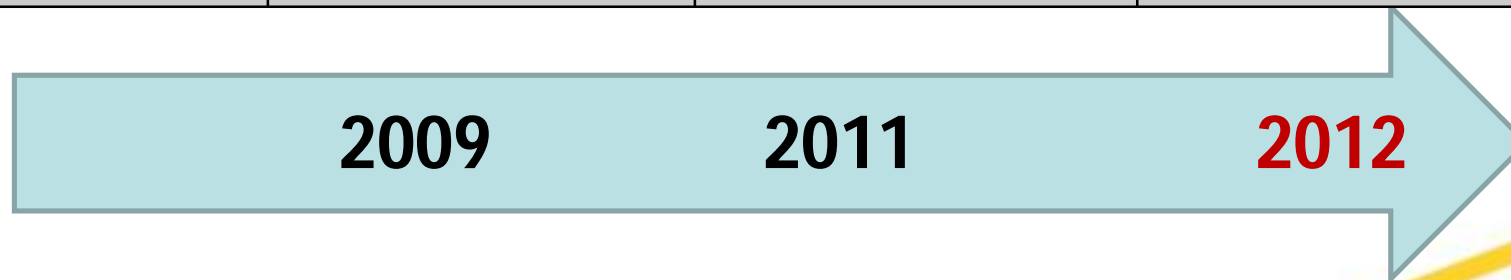
- East Hampshire – Maintain the beds at Gosport War Memorial Hospital, close facilities at Summervale and Fernhurst and remove inpatient beds at The Willows
- West Hampshire – Maintain the beds at Melbury Lodge and remove inpatient beds at The Becton Centre
- Move to a whole system resource for inpatient beds in Hampshire – patients will be offered a choice where possible
- Flexible bed use in Basingstoke
- Not a change in the current community model – ‘enhanced’
- Working to protect sites where possible – eg reuse of Willows Ward, Becton Centre for local residents



Services will improve



<i>holistic</i>	Joint clinics	Realigned with physical health teams	Joint visits to care homes
<i>independence</i>	Memory Matters Programme	Mental health advisors	Improved early detection
<i>carers</i>	Dedicated care home liaison		Work with Dementia Advisors and 3rd sector
<i>pathways</i>		Improved wards at Western Hospital.	All acute wards improved



Andover

Southampton

W&E Hants



Examples

 Mrs S

Living in a care home
in Petersfield



Examples

➡ Mr T

Living with his wife in
The New Forest



Finance

- ➡ We need to make savings
- ➡ We don't want to take this from the community, it would be better taken from vacant beds
- ➡ Remaining funding can be reinvested into helping enhance our current community model
 - Approx $\frac{1}{4}$ into transport plans
 - Approx $\frac{1}{2}$ into enhancing community services
 - Approx $\frac{1}{4}$ into in-patient services



Timescales

- Pending HOSC support of our recommendations, we would propose a phased implementation of bed closures. This is to reflect the current state of occupancy, the safety of current patients and the need to reduce any anxiety where possible.
- Summervale and The Willows – October 2012
- The Becton Centre – December 2012
- Fernhurst – March 2013



In conclusion

- ➔ 1. have we responded to the commissioning vision?
- ➔ 2. have we responded to local feedback?
- ➔ 3. have we met the 4 key tests?



Thank you for listening

We're happy to take questions

