

Wiltshire Council

Cabinet

11th November 2014

Subject: Specialist dementia hospital care

Cabinet member: Councillor Keith Humphries – Public Health, Protection Services, Adult Care and Housing

Key Decision: No

Executive Summary

This paper is to brief members on the Wiltshire vision for specialist dementia hospital care. Three options have been developed to potentially deliver the service going forward with plans to proceed to public consultation during December 2014 – February 2015.

NHS Wiltshire Clinical Commissioning Group (CCG) commission a range of specialist mental health services from the Avon and Wiltshire Mental Health Partnership (AWP), including specialist dementia hospital care. It is therefore the role of the CCG to fund and make decisions regarding the future provision of these services.

Following the temporary closure of the specialist dementia hospital unit at Charter House, Trowbridge in early 2013, specialist hospital care for people with dementia has been primarily provided in Amblescroft, Salisbury, with a small number of Wiltshire residents also being cared for in specialist dementia hospital units at St Martin's, Bath and the Victoria Centre, Swindon (also provided by AWP).

During this time, work has taken place to develop two alternative options (in Devizes or Trowbridge) in addition to the current specialist dementia hospital care provision (in Salisbury). The Wiltshire ambition for specialist dementia hospital care is to deliver efficient, modern, compliant services which are an integral part of the dementia care continuum.

Although specialist dementia hospital care is commissioned by Wiltshire CCG, it is acknowledged that it is only one part of the dementia pathway, as outlined in the Wiltshire Dementia Strategy, which is jointly owned by Wiltshire Council and Wiltshire CCG as commissioning organisations. In addition, it is the role of Wiltshire Council to act as a community leader in consultation processes that affect its local communities and population. For these reasons, Wiltshire Council is acting as a partner with Wiltshire CCG, supporting them through their public consultation, pending approval from Cabinet.

Proposal

That Cabinet notes the recommendations and gives approval to proceed to formal consultation on the options developed for the future provision of specialist dementia hospital care in Wiltshire.

Reason for Proposal

To ensure that people with dementia have access, when required, to specialist dementia hospital care that is fit for purpose and conforms to best practice standards.

Maggie Rae
Corporate Director

Wiltshire Council

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Purpose of Report

1. To outline plans and seek approval to proceed to formal consultation on the future of specialist dementia hospital care in Wiltshire.

Relevance to the Council's Business Plan

2. Specialist dementia hospital care aims to ensure that people with dementia are able to access high quality services when they require specialist care in order to be assessed, treated and stabilised. This specialist service provision also meets the Business Plan outcome of ensuring that people in Wiltshire have healthy, active and high-quality lives for as long as is possible.

Main Considerations for the Council

3. The vision for specialist dementia hospital care in Wiltshire is that:
 - It is provided only when all other care options to support people at home have been considered and deemed not to be sufficient or appropriate.
 - People with dementia, their carers and families receive high quality care and support during a hospital episode.
 - The specialist hospital provides efficient, modern and fully compliant care and support, as well as conforming to best practice standards.
 - People stay in a specialist dementia hospital until they are stabilised mindful that it is for as short a time as is possible.
 - Every effort is made to ensure that the individual is able to return to a preferred care setting, following discharge from the specialist dementia hospital.

- All of the above points are implemented in accordance with the Care Act for its implementation in April 2015.
4. Specialist dementia hospital care delivers highly specialist care to individuals whose circumstances or needs mean that they cannot be treated and supported appropriately at home or in any other environment. It provides care where the primary needs of the individual are specific to their dementia, as opposed to their physical needs that would normally be treated in a district general hospital.
 5. It should be noted that not everyone with dementia will require this service. Only a small number of people in Wiltshire with acute needs relating to their dementia (usually no more than 120 people over a year) will require admission to a specialist dementia hospital for a period of intensive treatment during a severe phase of their illness.
 6. Locally, Wiltshire CCG commissions specialist dementia hospital care – this means that they are responsible for funding and making decisions about the current and future service. Avon and Wiltshire Mental Health Partnership (AWP) provide specialist dementia hospital care in Wiltshire. The role of Wiltshire Council is as a community leader in public consultations that affect its local population and communities. In addition, Wiltshire Council works alongside Wiltshire CCG to improve dementia care services as outlined in the Wiltshire Dementia Strategy. However, it should be noted that Wiltshire Council does not commission, and therefore does neither fund, nor make decisions about specialist dementia hospital care as it is a health service.
 7. In January 2013 AWP took the decision to stop admitting patients to the specialist dementia hospital unit in Charter House, Trowbridge on a temporary basis due to a number of issues including low occupancy, environmental problems and the stand alone nature of the site i.e. it is not near to a district general hospital. Community based services continued to be provided from the site.
 8. Following the temporary closure, specialist dementia hospital care for people with dementia has been primarily provided from Amblescroft South in Salisbury, with a small number of Wiltshire residents also being cared for in specialist dementia hospital units at St Martin's, Bath and the Victoria Centre, Swindon. This mirrors the locations of the district general hospitals that people travel to when they require acute care relating to their physical health.
 9. Since the temporary closure of Charter House, work has been taking place on two projects that will have a role in shaping the long term provision of dementia services in Wiltshire:
 - a) Wiltshire Dementia Strategy 2014 – 2021 – This document is led by Wiltshire Council and Wiltshire Clinical Commissioning Group. Whilst the strategy does not outline the specific detail for the future provision of individual services, it sets out the wider vision and strategic direction for supporting people to live well

with dementia in Wiltshire, as well as outlining the key principles and outcomes that organisations will be working towards in the future.

- b) Specialist dementia hospital care provision is part of the dementia pathway. The work undertaken has focused specifically on the provision of specialist dementia hospital care following the temporary closure of Charter House and the development of a range of potential options for the future of the service. These options are the focus of this paper, and upon which a decision is being sought in relation to proceeding to public consultation.

10. Whilst the commissioning and provision of specialist dementia hospital care is health-led, it is acknowledged locally that these services make up only a small element of the whole dementia pathway that people living with dementia may pass through. In addition, it is recognised that any changes to a service within the pathway will impact upon other care and support services, including those commissioned and delivered by Wiltshire Council. For this reason and in its role as a community leader, Wiltshire Council is supporting Wiltshire CCG in developing and delivering specialist dementia hospital care, including them proceeding to public consultation on these options, pending approval from Cabinet.

11. In addition to the immediate scope of the specialist dementia hospital care consultation which looks at the physical location of the future services in Wiltshire, it is acknowledged that there are a number of systemic issues and opportunities that are key in supporting people's journey into specialist dementia hospital care and out back into the community. To achieve the Wiltshire vision for short stays of specialist dementia hospital care and also to prevent people requiring these services wherever possible, there are various other workstreams taking place across health and social care services. These include:

- a. Improving crisis services for people with dementia who have immediate and complex requirements.
- b. Enhancing step up and step down services to and from hospital for people with complex and specialist needs.
- c. Ensuring Mental Health Care Home Liaison staff are working with care home providers so that care homes are supported to meet the needs of people with dementia as their dementia progresses and becomes more complex, alongside other physical health conditions.
- d. Ensuring that people's stay in hospital is as short as possible through timely discharge planning and partnership working.
- e. Increasing the provision of specialist dementia care available within Wiltshire care homes.
- f. Developing dementia friendly communities.

Future provision of specialist dementia hospital care

12. Following the temporary closure of Charter House, Trowbridge, a programme of work covering specialist dementia hospital care was established to develop a set of options for the future provision of services that align to the Wiltshire vision.
13. Wiltshire CCG commissioned AWP to work with independent contractors to develop options for the provision of a compliant, 20 bed specialist dementia hospital unit at Green Lane in Devizes and also at Charter House in Trowbridge. The aim was to determine whether either or both of these sites, which are owned by AWP, could provide best practice specialist dementia hospital care and at what cost. Both sites were required to be of comparable standard to Amblescroft in Salisbury which currently provides a service for up to 20 people at any one time.
14. Following this period of analysis and review, three options for the future provision of countywide specialist dementia hospital care in Wiltshire have been developed and are outlined in more detail in the consultation document in Appendix 1:
 - Option 1: Undertake renovation/improvement work to Charter House, Trowbridge and move all specialist dementia hospital care from Amblescroft South, Salisbury to Trowbridge
 - Option 2: Undertake renovation/improvement work to Avebury ward at Green Lane Hospital in Devizes and move all specialist dementia hospital care from Amblescroft South, Salisbury to Devizes
 - Option 3: Formalise the existing provision and location of services at Amblescroft South, at Fountain Way in Salisbury
15. It is noted that each of the above options only allows for a service to be commissioned from a single Wiltshire site. At present (and in addition to the provision of specialist dementia hospital care in Amblescroft South, Salisbury) further specialist dementia care beds may be commissioned at the Victoria Centre, Swindon and St Martins Hospital, Bath should they be required.
16. The options being presented contain significant financial implications that are outlined under points 30 to 32 of this report.
17. The proposal is to take the consultation document (see Appendix 1) to formal public consultation, which will commence on 1st December 2014 and run for three months. The consultation is that of Wiltshire CCG and it will be supported by Wiltshire Council as a partner organisation, pending approval by Cabinet. During this time all three options covering Charter House, Green Lane and Amblescroft South will be presented to the general public and interested parties. Within the consultation, Wiltshire CCG and Wiltshire Council will share their

preference for Option 3. People will be invited to participate and provide their feedback on the options presented.

18. The consultation process will ensure that it is accessible and meaningful to all relevant parties and individuals, including people with dementia and their carers and relatives. Efforts will be made to ensure that people are able to participate through a variety of methods and information will be available in easy-read formats. Having undertaken a formal consultation process for the Wiltshire Dementia Strategy in early 2014 as well as engagement work with black and minority ethnic communities on the topic of dementia, Wiltshire Council and Wiltshire CCG will use this experience and learning to ensure that all groups, including those who may not access health and social care services or have a formal diagnosis of dementia, are invited to participate. In addition, consideration will be given to the synergies with the carers' strategy and implementation of the Care Act to ensure that carers are an integral part of the process.
19. A draft consultation document was agreed by Wiltshire CCG Governing Body during a private session on 23rd September, with delegated authority being assigned to Chief Officer, Deborah Fielding and Chair, Steve Rowlands to sign off the release of the consultation documents once the documents are considered to be complete and are supported by Council through the Cabinet meeting on 11th November 2014.

Safeguarding Implications

20. One of the primary aims of specialist dementia hospital care is to ensure that people with dementia are supported to be as independent as possible whilst ensuring that they are safe and that risks are identified, assessed and managed as appropriate.
21. By the nature of its service, specialist dementia hospital care provides for people who have dementia coupled with complex needs and behaviours that are often challenging to the people that care for them. Carers, relatives and care workers may often not be able to understand and cope with these behaviours and therefore more specialist provision is needed. This group of individuals with dementia will also inevitably overlap with the most vulnerable group from a safeguarding perspective.
22. It is vital that the service has a high level of awareness of safeguarding, and is well designed and staffed with committed and caring professionals, which will enable it to provide a good and safe environment. The specialist dementia hospital care provider, AWP is tasked with ensuring that the service has in place policies, procedures and workforce development strategies to ensure that safeguarding is a priority and is in accordance with the safeguarding provisions of the Care Act 2014 in line for its implementation in April 2015.

23. In addition to this, in cases where the individual receiving specialist dementia hospital care lacks capacity, is not free to leave and is not subject to detention under the Mental Health Act then an authorisation from Wiltshire Council via Deprivation of Liberty Safeguards is required. In such cases the best interests process stipulates that care plans and the environment must be as least restrictive as possible i.e. the ability to walk outside, have good access to communal areas etc. This must be taken into consideration following the consultation when an option is being selected.
24. Where a person living with dementia in the community lacks capacity to make decisions regarding their accommodation and care arrangements, their care arrangements must be made in accordance with the provisions of the Mental Capacity Act 2005 and in accordance with the principles of best interests and be as least restrictive as possible. Where they are in receipt of a high package of care, such that they are under 'constant supervision and control' and are 'not free to leave' they may meet the requirements of the 'Acid Test'. In such a case an application for a court order authorising a 'Deprivation of Liberty' must be made by the CCG if the person is funded by Continuing Health Care and by Wiltshire Council if the local authority funds the care.

Public Health Implications

25. Dementia is a national priority area for Public Health, and Public Health staff are working closely with Adult Social Care and NHS staff to develop and deliver the Wiltshire Dementia Strategy, which sets the strategic direction for this consultation. There are no direct implications in relation to specialist dementia hospital care.

Environmental and Climate Change Considerations

26. The three options being presented have environmental and climate change implications. These are in relation to the needs of relatives, friends, patients or / and staff to travel to one of the proposed locations. In addition there are also implications in relation to the estates being considered, i.e. if refurbishment / renovation / construction is required as in Option 1 and Option 2, then the carbon footprint of this service will increase. This will need to be mitigated by specifying energy efficient standards for any renovation and new build and looking at transport options that minimise the impact upon the environment and climate. Further work will be required once the consultation has taken place and an option is selected.

Equalities Impact of the Proposal

27. An equality analysis has been undertaken during the review and development of specialist dementia hospital care. It is reviewed at regular intervals, with the recent dementia strategy consultation also providing opportunities for equalities issues to be raised for action. The current analysis has identified the main equality issues that will require further attention as:

- a. People with early onset dementia (aged under 65 years old)
- b. People with learning disabilities and dementia
- c. People with dementia from black and minority ethnic communities
- d. People with dementia who live alone without family support
- e. People with rarer forms of dementia
- f. People with dementia and other health conditions / disabilities
- g. People who live in rural areas
- h. People who lack transport and for whom travel is costly and complex.

Risk Assessment

Risks that may arise if the proposed decision and related work is not taken

28. Should a full consultation process not be undertaken, decisions upon future service provision would have to be made without input from the general public and people who use the services. This is a risk to the CCG as the commissioner and AWP as the service provider.

Risks that may arise if the proposed decision is taken and actions that will be taken to manage these risks

29. There are three primary risks associated with undertaking the project:

- a. Endorsement of the re-development of Charter House or Green Lane as the preferred option resulting in additional revenue and capital costs having to be identified. Additional costs would result from the potential decommissioning of the specialist dementia hospital care at Amblescroft, Salisbury. This risk will be managed through transparent information sharing during the consultation process so that people participating are able to make informed decisions about the implications of their choices. This is a risk to the CCG as the commissioner and AWP as the service provider.
- b. Project resourcing – Commitment has been sought from directors that resources will be made available and that the consultation will be prioritised within organisational work plans. This is a risk to the CCG as the commissioner in the consultation and also Wiltshire Council, as lead partner in the delivery of the Wiltshire Dementia Strategy and associated care pathways.

- c. Challenge of the decision or potential judicial review due to failure to implement a robust and transparent process for the consultation. This will be managed by ensuring that the consultation and decision making process and content is fair, understandable, transparent and compliant. This is a risk to the CCG as the commissioner.

Financial Implications

- 30. The costs associated with the direct implementation of these options are the responsibility of Wiltshire CCG as the commissioner of the service and / or AWP as the service provider. The full costs of each option to the commissioner and provider are included within the consultation document.
- 31. Whilst Wiltshire Council would not be responsible for the implementation costs of the above options it should be noted that any changes to part of the dementia care pathway may have implications on other sections of it. Each of the three options presented will allow for the same level of specialist dementia hospital care provision as has been provided on a temporary basis for the previous eighteen months. Therefore it is unlikely that the selection of any of the three options i.e. where the service would be located, would have an immediate and direct impact upon other dementia care services. However, if either Option 1 or 2 were to be selected, they both involve disinvestment from other dementia care services in order to finance the work required to bring the selected estate up to standard. This would have implications for social care services that are commissioned and provided by Wiltshire Council, although at this stage it is difficult to outline these impacts without understanding which services would be delivered in the longer term.
- 32. Whilst the consultation focuses solely upon the location of the service, and not level of provision, it should be noted that if reinvestment (as per Option 3) in community based services does not occur and is not effective, then there is likely to be an increased demand for specialist dementia hospital care in to the future. If this demand is not matched by provision this will have financial implications for social care services commissioned and provided by Wiltshire Council.

Legal Implications

- 33. Wiltshire Clinical Commissioning Group has and continues to seek legal guidance on the project, including the consultation process.
- 34. All related policies and procedures must be updated to comply with the provisions of the Care Act in time for the implementation of the Care Act.

35. Staff training must be provided within all relevant organisations to ensure a good level of awareness and that staff operate within the framework of the Care Act 2014.

Options Considered

36. The options considered include:

- a. Do nothing i.e. do not proceed to public consultation – this is not seen as a viable option
- b. Amend options being proposed before proceeding to public consultation
- c. Proceed to public consultation

Proposal

37. Specialist dementia hospital care is a critical part of the dementia care pathway and it is important that it is able to meet the needs of the local population. Following temporary changes to services in 2013, options have been developed that outline how services can be delivered in the future.

38. Cabinet is asked to note these options and agree to proceed to formal consultation on these options in partnership with Wiltshire CCG.

Maggie Rae
Corporate Director

Background Papers

None

Appendices

Appendix 1 – Proposed Specialist Dementia Hospital Care Consultation