

**Briefing for Portsmouth Overview and Scrutiny Committee – December 2016**  
**Proposal to relocate the Kite Unit from St James' Hospital, Portsmouth to**  
**Western Community Hospital. Southampton**

**1. Introduction**

The Kite Unit, situated on the St James' Hospital site in Portsmouth, provides specialist neuropsychiatric and neuro behavioural services to people from a very wide area. The Unit on the St James' Hospital campus currently caters for level 1a and 1b acuity Neuro rehabilitation patients. This includes individuals with a brain injury whose impairments are largely in the cognitive, behavioural or mental health spectrum. Staff at the Kite Unit provide intensive and clinically specialised support for those who have a neurological condition which, when combined with other health and/or psychiatric needs, create significant difficulties or leads to the presentation of challenging behaviour. This cannot be provided in a community setting due to the complex needs of this particular group of patients.

The facility consists of 10 beds and the average length of stay is between 6 and 9 months.

Over time, it has become apparent that the current building which houses the Kite Unit, on the St James' site, is no longer fit-for-purpose. To ensure we can continue to deliver the very best possible care to our service users, we have considered alternative accommodation for the Unit.

Following an options appraisal it has become apparent that the option, which provides the maximum benefit to service users and staff, is to relocate the unit to the Western Community Hospital in Millbrook, Southampton.

This paper outlines the proposal to relocate services from the Kite Unit at St James' hospital in Portsmouth to the Western Community Hospital (WCH) in Southampton, and in doing so create a dynamic Neurological Rehabilitation Hub at the WCH. The WCH already houses core Neurological rehabilitation services including Snowdon ward, a 14 bedded neurological rehabilitation unit and specialist community and early supported discharge services. Rehabilitation, botulinum, orthotic and spasticity clinics also run from this site. Creation of the hub will allow for effective cross fertilisation of ideas amongst professionals to improve patient care.

**2. Background to the proposal**

The proposal to relocate the Kite Unit is built on a number of elements:

**(i) Meeting quality standards**

Whilst staff at the Kite Unit always maintain a high level of care for their patients, a previous inspection by the Care Quality Commission (2014) highlighted that the building which currently houses the Unit is not fit for purpose.

The presence of potential ligature points, the inhibited lines of site within the facility and ensuring compliance with single sex guidance has been the subject of on-going remedial works.

Providing safe, quality services is our highest priority. Whilst we have done everything we can to ensure a safe and equitable environment for our patients, the extent of works required, and the physical layout of the building, makes addressing these issues any further challenging.

In addition, whilst steps have been taken to ensure provision of compliant single sex accommodation, the layout of the building is inflexible and does not allow clinicians to maximise their estate resource, resulting in the inability to take more than two female patients at any time.

## **(ii) Development of a regional neuro rehabilitation service**

It is our intention to be at the forefront of neurological rehabilitation provision across the Wessex region. There is a proven need for additional acute complex and specialist rehabilitation beds in Wessex and the region requires more musculoskeletal rehabilitation facilities, as well as viable neurological psychiatric facilities. We already deliver some of this provision and have the optimum clinical skills to develop a comprehensive regional neurological rehabilitation facility. To establish such a service requires the centralisation of existing services to create a specialist hub on which to develop and build further capacity.

### **The two options considered:**

- 1) **Do nothing** – Continue to deliver neurological rehabilitation services from the Kite Unit on the St James' site.

Whilst this option saves on capital expenditure, it fails to deliver the necessary environmental improvements required to safely develop the Unit and accommodate increasing demand for this kind of neurological rehabilitation service. The current estate also doesn't allow the service to develop in line with patient feedback i.e. patients have requested gym which would aid their recovery.

- 2) **Move the Unit to the Western Community Hospital site**

The empty ward at the Western will involve some capital expenditure, but it will provide a fit for purpose location that can accommodate increasing demand for services and establish a clinical platform on which to develop a regional neurological rehabilitation hub. The Western Community Hospital also provides a better rehabilitative environment. As stated above, key clinical services have their base at WCH and there are rehabilitation facilities and clinics that can be accessed by Kite unit patients to enhance and optimise their rehabilitation journey.

## **3. Benefits of the proposal**

- The co-location of the Kite Unit with Snowdon, Solent's 14-bedded neuro rehab unit, will facilitate improved efficiency, productivity and enhance clinical expertise and skills through improved supervision, training and operational cover.
- The estate will allow greater capacity flexibility of access. The service will no longer need to limit the number of female patients being admitted to two and will be able to accommodate up to 12 patients at a time.
- The Western Community Hospital offers a better environment for the rehabilitation of service users. The proposed ward for relocation has been used for older people with behavioural concerns

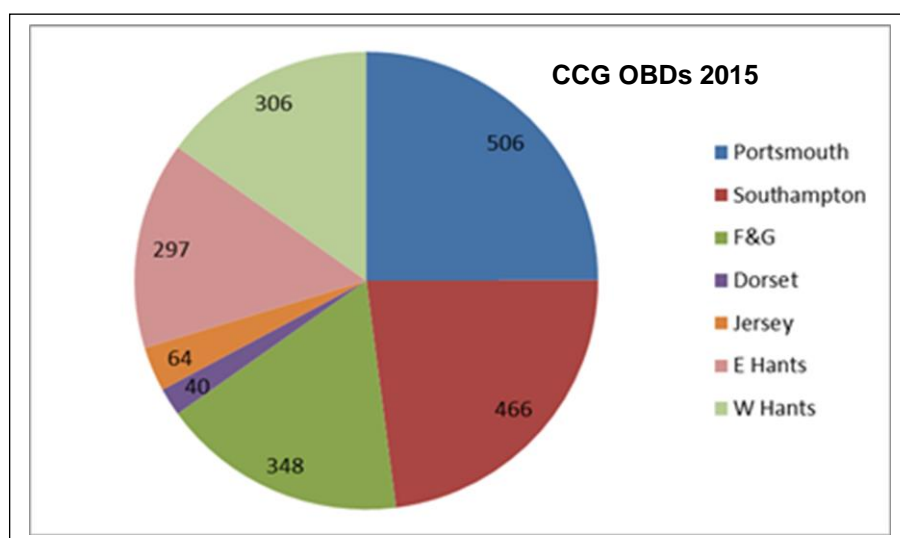
and so is an ideal environment for the client group as many anti-ligature features required are already in place. Patients will also have access to rehab gymnasiums and garden areas on the WCH site.

- The co-location would enable Solent to strategically develop the service as a specialist regional neurological rehabilitation hub. The creation of a HUB of service activity, and the creation of a platform and critical mass, gives a concentration of significant clinical weight. This will allow Solent to develop further service collaborations.

#### 4. Impact on referrers, patients and carers

The services that Kite provide are predominantly commissioned by the following clinical commissioning groups (CCGs): Portsmouth, Fareham and Gosport Commissioning Group, Southampton, Dorset and North Hampshire

The pie chart below outlines the occupied bed days (OBD) of the Unit by respective CCGs for 2015. Patients are referred from across Hampshire, with a minority from Dorset and Jersey for specialist treatment.



	2015 number of patients by CCG	2016 to date (end Oct) number of patients by CCG
Southampton	4	3 (166 OBD)
East Hampshire	5	1 (305 OBD)
Portsmouth	7	3 (499 OBD)
West Hants	4	4 (642 OBD)
Jersey	1	0
Fareham and Gosport	3	1 (167 OBD)
Dorset	1	2 (276 OBD)
North East Hants	1	1 (32 OBD)
North Hants	0	1 (61 OBD)
Surrey Downs	0	1 (34 OBD)

## **5. Communication and engagement**

We are proactively communicating and engaging about the move to ensure key stakeholders and local people and are heard when developing our proposals.

Our plan for communications and engagement has been shared with Healthwatch organisations in Southampton, Portsmouth and Hampshire. Further meetings were held with Healthwatch Southampton and Healthwatch Portsmouth to develop the plan.

Our programme of work so far has included engaging with current service users, their families and carers, and staff through a variety of means including group and face-to-face conversations. We have also informed key stakeholders about the move and have invited them to meet with us to discuss in more detail. We will continue with our engagement activity, including engaging with our membership base (7,000 public members) and members of the public.

## **6. Proposed timeframe**

A draft project plan has been developed and high level timescales scoped:

Solent internal assurance and support	July – September 2016
Engagement and communication phase	September – End of project
Potential relocation	May-June 2017

## **8 Recommendations**

Solent NHS Trust requests support for the recommendation to relocate the Kite Unit from St James' Hospital site in Portsmouth to the Western Community Hospital site in Southampton.