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Dear Colleague

Improving acute inpatient mental health care within Hampshire

I wanted to write to you about changes we are making to improve access to acute mental health care for people in Hampshire, alongside our partners across the health and care system.

As you will be aware, demand for mental health inpatient care is outstripping capacity across the NHS nationally. Locally, this means that at any one time there are dozens of Hampshire residents receiving care miles from their homes, loved ones and support networks. This has a detrimental effect on our patients, and is also very costly to find and fund 'out of area' placements when our own beds are full.

Clearly, this situation is entirely unacceptable and requires urgent and ongoing action. As a local provider of mental health services, improving access to care closer to home is one of our most pressing priorities. It is also a priority for the Hampshire and Isle of Wight Sustainability and Transformation Partnership (STP).

The root causes of the problem are many and complex:

- An increase in demand for acute mental health care (more patients, greater acuity, longer stays)
- Limited investment in mental health services - especially community-based crisis care/prevention
- Historical reductions in acute mental health beds - Hampshire is below the national average for population size (14 beds, compared to 19 beds, per 100,000)
- Limited alternatives to admission, such as crisis lounges and day treatment models
- Challenges associated with timely discharge from hospital to the community (e.g. availability of housing or supported accommodation)
- Systems and processes, which have limited our staff's ability to deliver the best care.

Unfortunately, there are no simple fixes, and the solution lies across multiple areas of work. In response, we have undertaken a number of initiatives, including:

- Establishing a Crisis Lounge in Southampton and Day Treatment Programme in Fareham and Gosport, to provide alternatives to hospital admission

OUR VALUES



- Placing mental health nurses in the NHS 111 call centre to triage and provide appropriate care and response to anyone in Hampshire and the Isle of Wight - 24 hours a day, 7 days a week
- Working with Solent NHS Trust to develop an improved community crisis care response in Portsmouth and South East Hampshire
- Working with local authorities and housing providers to unblock issues regarding delays to discharge and to also introduce alternative accommodation for people in crisis
- Making use of local private sector beds and those of partner NHS trusts
- Appointing staff with lived experience of mental health problems to ensure we are listening to, and learning from, people using our services.

We have also placed bids to access additional national funding to develop better crisis care and mental health in-reach in local acute hospitals (e.g. improved psychiatric liaison in A&E departments).

Divisional Bed Model

Most recently, we have made some internal changes to how our Trust manages adult mental health beds. We have moved from a centralised model to a new 'divisional bed model' aligned to our four geographical divisions - North and Mid Hampshire, South West Hampshire, East Hampshire and Southampton. This is to ensure all aspects of a patient's care, from the community to hospital, is managed by local care teams, reducing the fragmentation of care and enabling closer working between community and hospital teams. This model has been used before successfully – and has reduced the need for local people to receive care outside Hampshire.

In order to enable this new model to work, we have taken the difficult decision to focus on current patients in Hampshire rather than the repatriation of patients currently out of area. It also means that in some circumstances, in the short term, it will be necessary for some local patients to receive care out of area rather than impacting on another division's bed management. However we are confident that, in time, this new approach will result in fewer out of area placements and better access to the most appropriate care for people.

An Increase in Beds

Despite all these initiatives, we acknowledge that we currently do not have sufficient beds in Hampshire to meet demand. That is why we are now proposing to change the location of some of our mental health beds and open additional ones. These plans will help the new divisional approach to bed management work effectively, as well as moving us towards a needs-led, rather than age-led, approach to mental health inpatient care.

The proposals involve:

- Moving the Crisis Lounge, currently at Southampton's Antelope House (in part of the unit called Abbey Ward), into a community setting in the city - something patients have told us they'd prefer.
- Moving Berrywood Ward from the Western Hospital in Southampton into Abbey Ward. This would then become a 13-14-bed specialist mental health ward for patients with frailty.

- Moving Stefano Olivieri Ward from Melbury Lodge in Winchester into the 18-bed space vacated by Berrywood Ward at Western Hospital, following a full refurbishment.
- Using the space vacated by the Stefano Olivieri Ward in Winchester to create 12-14 new beds for adult patients with acute mental health needs. (This substantial increase in adult mental health beds would result in one or two fewer beds overall for older people's mental health, where capacity currently exists).

Please note that we are in the early stages of these proposals and some of the detail is subject to change. We are committed to involving our staff, patients and wider stakeholders in these planned changes in the coming months, so they feel fully informed and able to support the proposals. Needless to say, we would carry out any agreed changes with sensitivity and the minimum of disruption to patients.

If you would like further detail, or have any questions about this work, please do not hesitate to get in touch. We would also be delighted to arrange a visit to any of our services, should you find that helpful. My contact details are below.

Yours sincerely,

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Dr Nick Broughton FRCPsych
Chief Executive Officer