

To: City of London Corporation Health and Social Care Scrutiny Committee

Date: 13th February 2018

Subject: Briefing on the Proposal to merge Cedar Lodge with Thames Ward, Mile End Hospital

Summary

Cedar Lodge and Thames House are continuing care dementia wards for people with behavioural and psychiatric symptoms. Occupancy across both wards will fall to 32% by April 2018 and Cedar ward is now isolated from other healthcare facilities, creating safety concerns. This paper presents an outline proposal to merge the 13 bed Cedar Lodge with the 18 bed Thames house to create a shared older adult dementia inpatient ward at Thames House. This proposal would:

- Eliminate the current risks related to service isolation of Cedar Ward, namely staff cover and access to rapid response services,
- Enhance the utilisation of Thames House at Mile End Hospital, which is currently operating below capacity,
- Enable investment to enhance the staffing skill mix at Thames House, improving quality of care and helping to optimise length of stay,
- Improve the ward environment for City and Hackney, with Thames House patients providing a larger more recently refurbished ward
- Improve the utilisation of the Trust's estate and enable efficiency savings, which will be re-invested into local City and Hackney mental health services including Older People's services.

In conclusion, the proposal to merge Cedar Lodge with Thames Ward, at Mile End Hospital delivers more cost effective, higher quality inpatient care, and improves utilisation of estates. Thames Ward is a purpose built older person's ward with sufficient capacity to meet the future requirements to provide inpatient continuing health care needs due to dementia for Older People from Tower Hamlets, Hackney and The City even allowing for demographic growth in the older adult population.

A travel analysis shows that, whilst there will be some increase in travel times, the impact on journey times is not excessive. Furthermore, family and carers of City and Hackney residents in Thames Ward will be able to access assistance to enable them to regularly visit the ward in Mile End. The number of patients being transferred is about 5, making the scale of the change small. All patients and families will be prepared for the transition.

The City of London Corporation Health and Social Care Scrutiny Committee is therefore asked to endorse the proposal that the reconfiguration proceeds, without the need for any further stakeholder or public consultation, beyond that already planned or undertaken.

1.0 Purpose

The purpose of this report is to outline, for consideration by the Health in Hackney Overview and Scrutiny Commission, the City & Hackney CCG and East London NHS Foundation Trust's proposal to merge Cedar Lodge with Thames House, at Mile End Hospital to create a shared Older Person's dementia continuing care inpatient ward serving - The City, Hackney and Tower Hamlets.

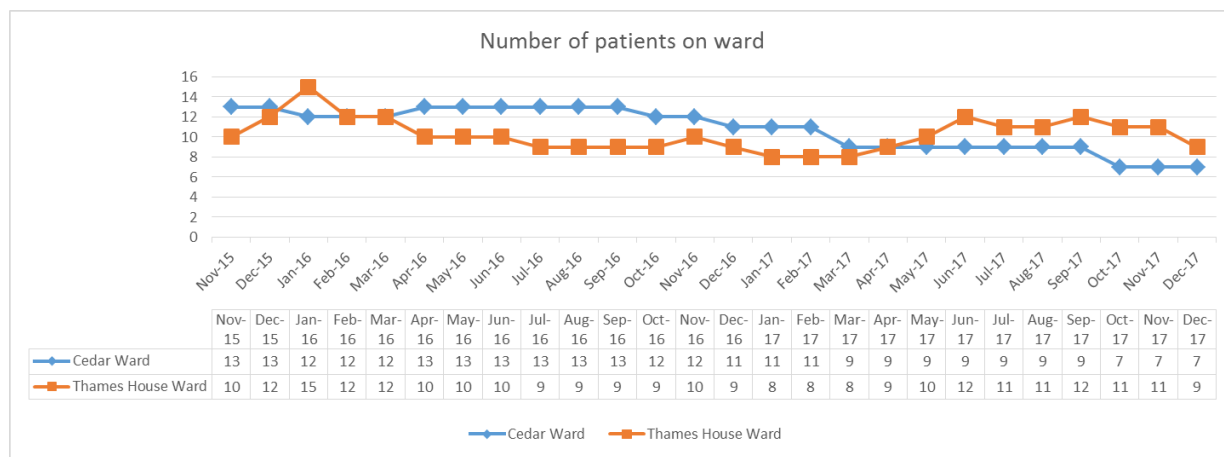
2.0 Service Change Proposal and Rationale

Cedar Lodge is a 13 bed continuing care bed continuing care unit for patients with behavioural and psychiatric symptoms of dementia, which are severe enough to warrant a longer term stay in an inpatient healthcare environment. Cedar Lodge had been one of three wards based on The Lodge site in City and Hackney, but following the merger of other wards with wards on the Mile End Hospital site, Cedar Lodge is now isolated from other adult mental health and physical health care units.

The proposal is to close Cedar Lodge, and to use Thames House, at Mile End Hospital in Tower Hamlets, as a shared facility serving The City, Hackney and Tower Hamlets. Thames House is an 18 bed dementia continuing care ward, covering the same patient cohort as Cedar Lodge.

As Table 1 illustrates, the occupancy of both Cedar Lodge and Thames House has steadily reduced since November 2015. This has been achieved by reducing delayed discharges through improvements in the discharge system and discharge pathway. The psychiatric ward environment provided by Thames and Cedar is only appropriate for patients with behavioural and psychiatric symptoms. Once these are no longer present, patients are more appropriately cared for in nursing home, particularly if physical healthcare needs are more predominate and behavioural issues have diminished.

Table 1



As a result of this fall in occupancy, currently both Cedar Lodge and Thames House are significantly under-utilised. It is anticipated that Thames House will have just 5 patients by the end of March when the merger is planned to take place. Similarly, it is expected that there will only be 5 City & Hackney patients who would need to transfer to Thames House, should the merger proceed.

Currently there are 7 patients on Cedar Lodge. Three of these patients have been assessed as now requiring nursing home care and are in the process of being transferred to Mary Seacole Nursing Home. It is anticipated that 2 of these patients will have moved to Mary Seacole Nursing Home, by the end of March.

Table 2 Anticipated Occupancy & Gender Mix – Thames Ward (March 2018)

Borough	Male	Female	Total
City & Hackney	3	2	5
Tower Hamlets	2	3	5
Total	5	5	10

Thames House is a high quality, recently refurbished ward on the Mile End Hospital site, built to support 18 people with continuing health care needs due to dementia. Thames House is the preferred location for consolidation of older peoples inpatient services because it is the larger of the two wards and has sufficient capacity to accommodate the anticipated demand from both City & Hackney and Tower Hamlets. It is a recently refurbished, dementia friendly ward, with proximity to the other Older Persons Inpatient wards on the Mile End Site as well as direct access to specialist support based at the Tower Hamlets Centre for Mental Health.

Merging the wards would complete the modernisation of Older Adults inpatient services in City and Hackney and Tower Hamlets, which has focused on centralising services on the Mile End site to provide more cost effective, higher quality inpatient care, and improve utilisation of estates.

This proposal would:

- eliminate the current risks related to service isolation of Cedar Ward , namely staff cover and access to rapid response services,
- enhance the utilisation of Thames House at Mile End Hospital, which is currently operating below capacity,
- enable investment to enhance the staffing skill mix at Thames House, improving quality of care and helping to optimise length of stay,
- improve the ward environment for City and Hackney, with Thames House patients providing a larger more recently refurbished ward

- Improve the utilisation of the Trust's estate and enable efficiency savings, which will be re-invested into local City and Hackney mental health services.

The East London NHS Foundation NHS Trust and local Commissioners are committed to ensuring ongoing access to high quality Continuing Care provision. The merger of Cedar Lodge and Thames House is part of this process of improvement. The plan also includes the intention to enhance the clinical capability and capacity of local nursing home providers to provide Continuing Care for Older Adults with Dementia. In the future this will enable continuing care to be provided in a more appropriate, non- hospital setting closer to the patient's family and friends.

In addition there are plans to improve community care and support for people with dementia and their carers. These plans include improved support for carers, shared care plans and more responsive support in times of crisis. This extra support will be available within primary care and will further supported by the new primary care neighbourhood model.

The closure of Cedar Ward will deliver recurrent savings of £870,000 that the CCGs will reinvest into local Mental Health Services including Older Peoples Mental Health Services. The older people's investment will cover the proposals outlined above.

Pending the decision of this Commission we would be anticipate the move to Thames House being completed by 1st April 2018.

Care Pathway

Only a small proportion of people with dementia will require inpatient continuing care as part of their individualised care pathway. As discussed, patients are admitted to either Cedar Lodge or Thames House because they have challenging behaviour or care needs, which can only be met in an inpatient setting. As their dementia progresses, often their needs change and become primarily focused on physical health and personal care, which can then most appropriately met in a nursing home. At that point they would be transferred to an appropriate nursing home

The closure of Cedar Lodge and the move of these continuing care beds to Thames House at Mile End Hospital will mean a change in the location of the continuing care inpatient provision for City and Hackney patients. However, this service change will not have any adverse impacts on the wider healthcare system or on the care pathway for City and Hackney patients with dementia requiring continuing care. Furthermore, it is not anticipated that there will be a change or increase in the number of patients being transferred to the Mary Seacole Nursing Home. These decisions will continue to be made as they are currently i.e. on an individual basis, taking into consideration what is the most appropriate care setting and what is in the best interests of the patient.

3.0 Demand and Capacity Planning

As can be seen from table 2 above, following the merger, Thames ward will have a total of 10 patients. In the short term we would expect patient numbers to fluctuate between 8 and 12. Consequently occupancy on the 18 bedded ward will therefore be between 44% and 67%. This leaves plenty of spare capacity, whilst ensuring the ward is maintains a viable level of occupancy.

Over the next 10 years the number of people with dementia is expected to increase. The table below is based on figures from the April 2016 City and Hackney JSNA for Mental Health and the Tower Hamlets JSNA for Older Adults. The figures show an estimated increase in the dementia population of City, Hackney and Tower Hamlets of 39% over a 10 year period. If we were to assume that there is a comparable increase in the demand for dementia continuing care from 2018-2028, then this would result in a Thames ward bed usage of 14-16 beds or 78-89% occupancy. In other words, there appears to be sufficient capacity to absorb the demand increase. Furthermore, the joint strategy of Tower Hamlets and City and Hackney CCG is to improve the capability of local nursing and residential care homes to accept patients with behavioural and psychiatric symptoms. Over the next 10 years this will reduce the demand for inpatient beds on Thames Ward creating further spare capacity.

Table 3: Estimated growth in City, Hackney and Tower Hamlets Dementia Populations

Date	Hackney	City of London	Tower Hamlets	Total	% Growth
2015	1238	93	826	2157	0%
2020	1422	139	961	2522	17%
2025	1672	191	1140	3003	39%

4.0 Impact of Changes for City & Hackney Service Users

It is recognised that that the move to Thames ward will be unsettling for the five individual patients, who would transfer to Mile End Hospital, and for their families. In each of these cases the Consultant Psychiatrist and nursing staff, who know and are currently caring for the patients, will work closely with them and their family to re-assess their specific needs, agree individualised transfer plans and prepare them for the move. Family and carers will also be given the opportunity to visit Thames House prior to change taking place.

Accessibility for Family & Carers

The Trust recognises the importance for older people in hospital of being able to be visited regularly by their family and carers. Therefore additional travel assistance will be offered to carers where the journey to Thames ward is significantly more complex than the journey would have been to the Cedar Lodge

How the Transport Assistance Assessment Works

At the time of admission the care co-ordinator will, in collaboration with the carer, determine if the journey to Thames House is significantly more complex than the journey would have been to Cedar Lodge. In coming to this determination the care co-ordinators will take into account:

- Mobility issues.

- Journey time.
- Number of transport changes needed to complete the journey.
- Physical, sensory or mental health problems that make travelling by public transport difficult.
- Personal safety considerations, including travelling after dark.

In situations where a journey is agreed as significantly more complex the care co-coordinator will determine with the carer how the Trust might support the individual to maintain their visiting arrangements to Thames ward. This might include the provision of taxis, payment towards parking costs or provision of hospital transport. The transport arrangements will be reviewed regularly by the ward team and the carer throughout the patients stay.

In general, previous appraisals of travel times from Hackney to Mile End have shown that the potential impact on patient and carer travel time would not be excessive as there are a number of public transport routes. An analysis that was undertaken shows the following differences in average travel times for Hackney residents:

Table 4: Average Travel Times

	Travel time to the Lodge	Travel Time to Mile End
Walking	35 mins	57 mins
Cycling	11 mins	19 mins
Driving	8 mins	13 mins
Public Transport	21 mins	33 mins

The table above refers to average travel times, however it is important to understand the impact on individual journey times. In the table below we have compared the current travel times, by public transport, for the actual carers or family of the patients currently on Cedar Lodge with their travel times to Mile End Hospital. As can be seen, although journey times, for most, increased the average increase in time was 12 minutes. Furthermore, the longest journey time was for a carer who was based out of the borough in Frien Barnet and had long distances to travel anyway.

Table 5 – Comparison of Individual Carers Travel Times

<u>Point of travel</u>	<u>How often they visit</u>	<u>Current travel time</u>	<u>Travel time to Mile End</u>	
Frien Barnet	Some weekends	1 hour 10 minutes 4 changes	1 hour 16 minutes 2 changes	6 mins increase – simpler journey

London Fields	Daily	24 minutes 1 bus	34 minutes 2 buses	10 mins increase
Homerton	Daily	13 Minutes Walking	41 minutes 2 buses	28 minutes increase
Shoreditch	Daily	35 minutes 2 changes	34 Minutes 2 changes	1 minute decrease
Stamford Hill	Daily	41 minutes 2 changes	58 minutes 3 changes	17 minutes increase
Victoria Park	Occasionally	18 minutes 1bus	30 minutes 1 bus	12 minutes increase

Notably, since the Dementia Assessment ward moved from Hackney to Columbia Ward in Mile End, none of carers or family from The City or Hackney have taken up the offer of assistance with transport. Furthermore all carers reported that they found the journey times manageable.

Quality Benefits

In terms of the scale, these proposals would see the transfer of 5 patients from a ward in Hackney to a ward in Tower Hamlets. This represents a comparatively small-scale service change.

Overall the merger of Cedar Ward and Thames House will deliver a number quality benefits:

- Patients would be accommodated in a dementia-friendly unit, which has recently been refurbished, designed specifically for the older adult population. Further enhancements to the ward environment are also planned including the addition of Reminiscence Pods
- Cedar Lodge is currently the only remaining Older Persons ward on the Lodge site. Consequently there are clinical risks linked to it being isolated from other adult mental health and physical health care units. In contrast, Thames House is co-located with other older persons inpatient and community services on the Mile End Hospital site. The move to Thames House will therefore improve the care delivered to patients by locating highly expert clinicians in a centralised location thereby enhancing the delivery of integrated multi-disciplinary care, and creating a centre of excellence for dementia care.
- Being co-located with other mental health services would enable staff cover at short notice, and the service would have access to rapid response services, which are

located at Tower Hamlets Centre for Mental Health.

- The Mile End site meets the recommendations of the Royal College of Psychiatrists to locate inpatient care on a hospital site delivering physical inpatient healthcare to older people.
- The Mile End site has sufficient space available to provide most rooms with en-suite accommodation, high quality day and therapy areas.
- The current over provision of inpatient bed capacity for Continuing Care provision across Tower Hamlets and City & Hackney would be addressed by this proposal
- Further environmental enhancements - As mentioned above, the extra space available at Thames makes it possible to introduce Reminiscence Pods. The pods have interactive software including old films, television shows and life stories and they can be designed to meet the needs of people with different cultural backgrounds e.g. the Windrush pods aim to resonate with people from the Caribbean. The Pods have been successfully trialled at Columbia ward, and it is planned to introduce Reminiscence Pods on Thames House as well.

Figure 1: RemPod Images.



Consultation Plans

We have already met with the Older Person's Reference Group to discuss these proposals. There are plans to consult with the CCG's Patient and Public Involvement Committee (PPIC) and both Hackney and City of London Healthwatch. This proposal will also go before the City of London Overview and Scrutiny Committee on the 13th February 2018.

5.0 Future Plans for Cedar Lodge

The two already vacated wards on the Lodge site have been developed into Vivienne Cohen House, a base for the Specialist Psychotherapy Service and the North Hackney Recovery Team.

Various options are currently being explored for the re- use of Cedar Lodge. These include:

- The option of Cedar Ward being utilised as a base for providing Intermediate Care Beds for Hackney
- Providing a new Team Base for City & Hackney CAMHS
- Providing a new Team Base for additional Adult Mental Health Community Services covering City & Hackney – this would create, with those services already in the adjacent Vivienne Cohen House a community hub for Adult Mental Health and Recovery Services.

6.0 Conclusion and Recommendations

- The proposal to merge Cedar Lodge with Thames Ward, at Mile End Hospital delivers more cost effective, higher quality inpatient care, and improves utilisation of estates.
- Thames Ward is a purpose built Older Person's ward with sufficient capacity to meet the future requirements to provide inpatient continuing health care needs due to dementia for Older People from Tower Hamlets, Hackney and The City .
- Family and carers of City and Hackney residents in Thames Ward will be able to access assistance to enable them to regularly visit the ward in Mile End.

The City of London Corporation Health and Social Care Scrutiny Committee is therefore asked to endorse the proposal that the reconfiguration proceeds without the need for any further stakeholder or public consultation, beyond that already planned or undertaken.

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