

Health & Overview Scrutiny Committee

Time:	10am
Date:	Thursday 4 November 2021
Venue:	Council Chamber, County Hall, Martineau Lane, Norwich NR1 2DH

Supplementary Agenda

7 Norfolk and Suffolk NHS Foundation Trust (NSFT) Out of Area Placements and the Use of Inpatient Beds

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Appendix A

Contact: Jonathan Hall – 01603 679437 committees@norfolk.gov.uk

Tom McCabe Head of Paid Service County Hall Martineau Lane Norwich NR1 2DH

Date Supplementary Agenda circulated: 03 November 2021

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Item:	Agenda number	



Report to:	Norfolk Health Overview and Scrutiny Committee	
Meeting date:	4 November 2021	
Title of report:	Out of Area Placements and the Use of Inpatient Beds	
Purpose of paper:	Response to issues raised by the Committee	
Author:	Andrew Smith, Communications Officer	
Director:	rector: Amy Eagle, Interim Chief Operating Officer Dan Dalton, Chief Medical Officer	

Summary:

The Committee asked about out of area placements and the placing of younger patients on to wards used for older patients, with particular interest in Blickling Ward at the Julian Hospital in Norwich.

Purpose: This paper aims to address the issues raised by the Committee.

Recommendation:

The Committee is asked to note the report.

1. Working age and older people placed out of area in the past two years (October 2019 to September 2021)

1.1 Patient admitted to an inpatient unit within Norfolk and Suffolk but not in their catchment area

By Commissioner (a Norfolk patient in a Suffolk bed or Suffolk patient in a Norfolk bed):

- a. Working age 314
- b. Older people 43

By Distance (more than 50 miles from home to the unit):

- a. Working age 247
- b. Older people 14

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1.2 Out of Trust at private providers' facilities (not including Southern Hill Mundesley or Priory Norwich or specialist placements – which are 'appropriate')

- c. Working age 224
- d. Older people 49
- 1.3 Out of Trust at NHS providers' facilities (now not including NSFT)
 - a. Working age 0 (zero)
 - b. Older people 0 (zero)

2. Younger patients and older people's wards

2.1 Our functional wards take patients aged 65 and above. Our dementia wards do not have an age restriction as dementia, although rarer in younger people, can affect people of any age.

2.2 There have been just under 30 patients on Blickling Ward since it reopened. Of these, all but two were aged 65 or over. The two were in their 50s and 60s and admitted to Blickling on the grounds of extreme frailty. Both people were treated for their individual needs and had thorough risk assessments.

2.3 Blickling Ward has had safe staffing levels since reopening, with trainees overseen by trained staff. Nationally, this has been agreed as being good practice during COVID. A project of further improvement works to the ward environment is being progressed. All patients are carefully risk-assessed and placed on whichever ward is most suitable to their needs.

2.4 The number of admissions to NSFT Adult Acute wards in Norfolk and Waveney where the service user is aged under 18 at the point of admission between 01/09/2019 and 31/08/2021 was two. Both were 17 at the time of admission.

Our priority is always to ensure patients get the care they need. If they need a bed, then we do everything we can to find them a suitable ward. Each case is assessed on an individual basis, with the admitting ward undertaking a risk assessment, taking into consideration the needs and vulnerabilities of the patient and of patients who are already on the ward.

2.5 Nationally, there is a huge demand for services for younger people. We deliver care for people in their own homes, where this is best for their needs and is most appropriate. When someone is especially poorly and they urgently need a bed on a ward, we do everything we can to keep them safe. If the bed is on an adult ward, additional safety measures include increasing staff ratios to provide enhanced observations of the young person, providing oversight by a CAMHS (Child and Adolescent Mental Health Services) Consultant and ensuring that all staff have the appropriate safety checks and skills to work with young people.

3. Geographic locations and providers used for out of area and out of Trust placements in the past two years

Please see attached table.

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4. Arrangements for conveying people to and from out of area destinations.

4.1 The Clinical Commissioning Group is responsible for non-urgent hospital transport for patients in Norfolk and Waveney. Hospital transport could be used if the patient is being taken from a general acute hospital.

4.2 Patients detained under the Mental Health Act have their transport organised by the AMHP (Approved Mental Health Professional) service.

4.3 Informal patients (ie patients who have agreed to come into hospital voluntarily and are not detained under the Mental Health Act 1983) choose how they are transported. Following a rigorous and detailed risk assessment, taking into account the service user's wishes, and what is in their best interests, friends and family may want to be involved with transporting them to their destination. Community teams or Crisis Resolution and Home Treatment Teams may also transport patients. We also use mainly ERS Medical and, very rarely, other transport providers approved by the Trust.

5. Action to reduce out of area placements

5.1 We want every patient to receive care as close to home as possible, so they are able to maintain important contact with their family, carers and care teams.

5.2 Working with health, social care and voluntary sector colleagues, we are aiming to improve community mental health services over the next three years. At the same time, we will be increasing support to prevent crises and care for people at home as much as possible.

5.3 Over the last few months, we have seen an increased demand for support from our community and crisis teams. We are also seeing patients admitted to our wards with more complex mental health needs who need to stay in hospital longer.

5.4 Investment has been pledged to support development of system-wide plans for community mental health and crisis care.

5.5 A programme to improve community and crisis care is underway. In the community this includes new primary mental health care nurses, pharmacists, and psychologists. For crisis care, we set up the freephone First Response Service in April 2020. First Response has received 82,811 calls between April 2020 and August 2021. The highest number of calls received in one month was 6,740 in May 2021.

5.6 We are working closely with social care colleagues to ensure people do not stay in hospital for longer than necessary. Voluntary sector colleagues are providing additional support in people's homes as well.

5.7 We opened an additional older people's ward in March 2021 to help reduce the need for patients to go out of area. 16 new adult assessment and inpatient beds were opened at Yare Ward at Hellesdon Hospital in October 2019.

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5.8 The Trust clinically considers every request for an admission and any subsequent decision to place a patient out of area, where it is necessary to do so for patient safety. NSFT also reviews all beds daily so that people can be moved back to their home area as soon as possible.

6. Caring for patients in out of area placements and their families / carers

Our Matron for out of area placements supports patients and their families and will ensure patients are returned to an NSFT bed as soon as possible, where it is clinically appropriate.

7. Plans to end inappropriate out of area placements

7.1 The pandemic has had a significant impact on people's mental health and all our hardworking staff are treating more patients than ever before. We are also seeing patients admitted to our wards with more complex mental health needs who need to stay in hospital longer.

7.2 We and our system partners are working together to reduce out of area placements to zero by spring 2022.

7.3 A plan has been implemented with local, clinically-led actions in place to initially reduce the need to seek out-of-area beds. Medium and longer-term solutions are focused more on system solutions and sustaining a zero position.

7.4 Some people who need specialist care that can only be provided elsewhere will sometimes require treatment out of area.

8. Recommendation:

The committee is asked to note this report.

END

Notes

Out of area placement criteria:

- Is **not** an OAP if the service user is:
 - Admitted into an NSFT-provided bed, regardless of the location or commissioner of that bed (valid since 15/06/2020 for new admissions)
 - Norfolk & Waveney-commissioned and placed in Priory Norwich (previously known as Ellingham Farm) (since 01/06/2021 for new admissions)
 - Norfolk & Waveney-commissioned and placed in Southern Hill (previously known as Mundesley) (since 01/04/2020 for new admissions)
 - Norfolk & Waveney-commissioned and placed in a PICU bed anywhere in the country (since 01/06/2021 for new admissions) following the temporary closure of Rollesby Ward

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- Is an OAP in all other circumstances and is considered:
 - Inappropriate:
 - If the service user is placed out of area due to the unavailability of a bed
 Appropriate if the service user is placed out of area due to:
 - - A safeguarding reason Offending restrictions •
 - Being a staff member or family/friend •
 - Patient choice
 - Being admitted while away from home

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Appendix 1

Provider Cygnet Beckton (E London) Cygnet Blackheath Cygnet Churchill (S London) Cygnet Colchester Cygnet Godden Green (Kent) Cygnet Harrogate Cygnet Maidstone Cygnet Stevenage Cygnet Taunton Cygnet Victoria House (Darlington) Cygnet Woking Elysium Potters Bar Huntercombe Roehampton Priory Altrincham Priory Bristol Priory Burgess Hill Priory Burton Park Priory Cheadle Priory Chelmsford Priory Enfield Priory Kneesworth, Royston Priory Lakeside, Willenhall (W Midlands) Priory Middleton St George (Darlington) Priory Norwich Priory Ticehurst (E Sussex) Priory Woking Southern Hill Mundesley St Andrews (Essex/Northampton)

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Graphs showing number of bed days and unique inappropriate

Appendix 2



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