

JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE (JHOSC) **ON LAMBETH HOSPITAL REDEVELOPMENT**

Thursday 6 February 2020 at 7.00 pm

MINUTES

PRESENT: Councillor Danial Adilypour, Councillor Maria Linforth-Hall, Councillor Nanda Manley-Browne, Councillor Victoria Olisa and Councillor Charlie Smith

APOLOGIES: Councillor Philip Normal

1. APOLOGIES

Apologies for absence were received from Councillor Philip Normal and apologies for lateness were received from Councillor Nanda Manley-Browne.

2. ELECTION OF CHAIR

RESOLVED: That Councillor Danny Adilypour be appointed Chair of the Joint Health Overview and Scrutiny Committee (JHOSC) concerning the reconfiguration of Lambeth Hospital mental health in-patient services for the Municipal Year 2019/20.

3. ELECTION OF VICE-CHAIR

RESOLVED: That Councillor Victoria Olisa be appointed Vice-Chair of the Joint Health Overview and Scrutiny Committee (JHOSC) concerning the reconfiguration of Lambeth Hospital mental health in-patient services for the Municipal Year 2019/20.

4. DECLARATION OF PECUNIARY INTERESTS

There were none.

5. TERMS OF REFERENCE

RESOLVED: That the terms of reference for the Joint Health Overview and Scrutiny Committee concerning the reconfiguration of Lambeth Hospital mental health in-patient services be noted.

6. LAMBETH HOSPITAL REDEVELOPMENT - CONSULTATION PROCESS

The Chair welcomed everyone to the meeting, including:

- Andrew Eyres, Strategic Director, Health and Care, Lambeth CCG and Lambeth Council;
- Fiona Connolly, Executive Strategic Director for Adults and Health, Lambeth Council;
- Liz Clegg, Interim Director of Integrated Commissioning, Lambeth CCG and Lambeth Council;
- David Bradley, Chief Executive, South London and the Maudsley NHS Foundation Trust; and

- Dr Rob Harland, Clinical Director, Lambeth, South London and the Maudsley NHS Foundation Trust.

The Committee was informed that the report set out plans for public consultation on proposals to move adult inpatient mental health services from Lambeth Hospital to a modern, fit for purpose facility on the Maudsley Hospital site. It was highlighted that this included feedback and learning from engagement activities that had already taken place.

The Committee noted there was a duty on the Commissioner (Lambeth CCG) and the Provider (SLaM) to ensure users of services were involved in their planning and, in the case of substantial changes to service provision, to consult with Overview and Scrutiny. Mr Bradley highlighted the following points:

- There was an urgent need to improve inpatient accommodation to ensure high quality services for patients that were safe.
- SLaM's clinical and estates strategy had identified the need to release value from land to help modernise inpatient facilities.
- There would be no loss of beds or services as a result of the proposals.
- If the move went ahead, SLaM would be able to invest to improve clinical environments and services for the benefit of all patients and service users.

Mr Eyres confirmed that the proposals represented a substantial service change and explained that in making a final decision Lambeth CCG would need to decide whether the proposals were in the interests of both local and national health populations; was in line with long term plans to improve health and care; and was an effective use of public money. It was emphasised that the consultation process would help to inform this decision.

As set out in the report, Mr Bradley advised that SLaM, with the support of the CCG, Lambeth Council and the Living Well Network Alliance, had explored various options for the long-term future of the Lambeth Hospital site. However, the Committee was informed that not all options were viable and that as a result they would consult on the options below:

- Do nothing: Lambeth Hospital would remain as is.
- Relocation to Maudsley Hospital: four inpatient wards, a Psychiatric Intensive Care Unit (PICU), and a rehabilitation ward would be re-provided on the Maudsley Hospital site. This was the preferred option.

The Committee was informed that an option to develop a new, high quality facility on the Lambeth Hospital site (rather than on the Maudsley Hospital site) had also been evaluated. However, this option required additional capital of around £30m and decant space for services to move off site temporarily. Due to these factors it was explained that this option was unrealistic and would not be taken forward for consultation.

Mr Bradley informed the Committee that the public consultation would ask for feedback on the Lambeth inpatient services only. It was noted that:

- Community services were part of the Lambeth Alliance and would be provided in improved accommodation across the Lambeth borough.
- Further changes would be proposed to specialist services, provided on the Lambeth Hospital site, as part of another concurrent clinical reconfiguration scheme which would be overseen by the relevant Commissioners and NHS England and Improvement.

In response to questions about the proposed new facility, Dr Harland highlighted that:

- Planning permission had been granted in November 2019.
- Clinicians, service users and carers from a number of boroughs had attended workshops to shape the design.
- Based on detailed analysis, the proposals included 72 acute beds for Lambeth patients across four 18 bedded wards was. It was emphasised that having modern facilities on the Maudsley Hospital site would increase flexibility should there be a need to provide more, or less, beds in future.
- The wards were adaptable with ensuite bathrooms, with access to outside space and natural light in all main areas.
- Overall the benefits included: improved quality and safety of care; increased dignity and respect; reduced transport time for emergency and crisis care; staffing efficiencies and productivity; shared therapy and group recovery space across wards; and improved outcomes and increased accessibility for many.

In response to questions about the future of the Lambeth Hospital site, Mr Bradley explained that the options included:

- Disposal for development to a third party which would include a high level of affordable housing and other public amenities, such as healthcare facilities and shops.
- Retaining part of the site (with disposal of part) to provide a higher return to the NHS. It was highlighted that this would increase the risk profile but provided opportunities for a greater focus on key worker accommodation on the site and other forms of accommodation to support recruitment and retention of staff.

It was emphasised that SLaM would continue to work with Lambeth Council to explore these, and other, options, and planned to engage with key stakeholders and the public concerning the future use of the site.

It was noted that a Lambeth Communications and Engagement Steering Group had been created to oversee engagement and consultation work on the proposals. This group included senior communications and engagement representatives from SLaM, Lambeth CCG, Lambeth Healthwatch and Black Thrive. The Committee

was informed that a key task had been the mapping of stakeholders to identify organisations and groups who needed to be engaged with as part of the consultation. A range of issues in relation to methods of communication and engagement were considered by the Committee, including:

- The stakeholder matrix which set out a broad approach to each stakeholder group.
- Feedback from pre-consultation engagement activity, which had been set out at Appendix 1 to the report.
- The principles that had been used to develop the consultation plan, including: partners working together to ensure openness and transparency in decision-making; providing sufficient and accessible information for people to make intelligent choices and input to the process; keeping an open mind during consultation; maximising opportunities for co-production during consultation and future phases of building and construction; and allowing adequate time for consideration and response, including timely information and responses to communications needs.
- The different ways for people to find out about the proposals and to get involved or give views, including:
 - o An online questionnaire;
 - o Printed consultation documents, with both translated documents and easy read versions available to make the proposals easy to understand;
 - o Public meetings in Lambeth (x3) and Southwark (x1);
 - o Discussions with vulnerable people;
 - o Roadshow style events;
 - o Attendance at existing forums and meetings;
 - o Discussions with key groups and voluntary sector organisations; and;
 - o Promoting the consultation widely, using a variety of channels, including press, social media, regular stakeholder communications channels and patient networks.

The Committee was informed that feedback from the pre-consultation activities included:

- Staff and service users alike had agreed that the current condition of the wards was not fit for purpose and that the option to relocate to Maudsley Hospital was preferable over the “do nothing” option.
- Governors had been reassured to hear that the number of inpatient beds for Lambeth would remain should the proposals be enacted.
- Staff had highlighted that the proposed changes would help reduce violence and aggression on the wards.
- Concerns about the potential loss of identity of Lambeth Hospital, the lack of green and outdoor space at the Maudsley site, parking facilities and the sale of ‘prime’ NHS real estate.

The Committee asked what was doing to address these concerns. In response it

was explained that Lambeth Alliance's three newly-created Living Well Centres would give Lambeth a new identity in the community, and that the designs for the inpatient units at Maudsley Hospital included the ability for all service users to access outdoor space with fresh air directly off the ward without escort or special permissions. The close proximity of Ruskin Park to the Maudsley site was also noted.

It was also highlighted that Healthwatch Southwark had submitted feedback on the proposals and consultation plan. This information was tabled and considered by the Committee. It was noted that Lambeth CCG / SLaM would respond outside of the meeting.

During the discussion, a variety of issues were considered, relating to:

- How the move of adult inpatient mental health services from Lambeth Hospital to the Maudsley Hospital site would affect the workforce, including how staff had been involved in developing the proposals.
- Ensuring the impact of the proposals had been fully thought through for Southwark, especially in relation to responsibilities and budgets for re-housing and the protocols that were in place to deal with out of borough acute bed usage.

In response to questions about the public sector equality duty, it was highlighted that a number of vulnerable or protected groups had already been identified who could be affected by the proposals. The Committee was informed that various channels had been selected to ensure these audiences were reached.

In conclusion, the Chair highlighted that public consultation was expected to start in early March 2020 and would last for twelve weeks. In response to questions about how feedback from the various consultation activities would be used, it was explained that responses would be independently analysed by the NHS North East London Commissioning Support Unit. A consultation findings report would be produced and used to inform the development of the decision-making business case.

RESOLVED:

- (1) That the proposed consultation plan, set out in the report presented, be supported.
- (2) That the feedback from Healthwatch Southwark (tabled at the meeting) be noted and passed to Lambeth CCG / SLaM for a response outside of the meeting.
- (3) That Healthwatch Southwark and Healthwatch Lambeth be invited to the next meeting to help the Committee consider and respond to the proposals in more detail.

7. DATES OF FUTURE MEETINGS

RESOLVED:

- (1) That site visits to Lambeth Hospital and Maudsley Hospital be scheduled for late March 2020.

(2) That the next JHOSC meeting, to consider and respond to the proposals in more detail, be scheduled for late April 2020.

(3) That the arrangements for (1) and (2) above be confirmed outside of the meeting.

CLOSE OF MEETING

The meeting ended at 8.01 pm

CHAIR

Date of Despatch: 21 February 2020

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