

HEALTH OVERVIEW AND SCRUTINY COMMITTEE

11 OCTOBER 2023

HILL CREST MENTAL HEALTH WARD

Summary

1. On 15 March 2023 the Health Overview and Scrutiny Committee (HOSC) received an update on Hill Crest Mental Health Ward (Hill Crest), in order to seek assurance on actions taken by Herefordshire and Worcestershire Health and Care NHS Trust (the Trust), following concerns about safety and staffing raised by the Care Quality Commission (CQC).
2. The HOSC has requested an update on the impact of the actions outlined in the March meeting and the Agenda and Minutes are available in Background Papers.
3. Representatives from the Trust have been invited to the meeting to respond to any questions the HOSC may have.

Hill Crest Ward

4. Hill Crest is a Mental Health Ward in Redditch for adults of working age. The 18 bedded ward provides a 24-hour service offering intensive input for patients who experience acute mental health difficulties. It provides care to people aged between 18 and 65, some of whom may be detained under the Mental Health Act.
5. The Trust uses its admission beds flexibly and patients from anywhere in Herefordshire and Worcestershire may be admitted to any of the 3 working age adult Acute Wards in the two counties, dependant on bed availability and specific patient need. The other two Acute Mental Health wards are Holt Ward, a 16 bedded mixed gender ward in Worcester located on Elgar Unit on the Worcestershire Royal Hospital site and Mortimer Ward a 21 bedded mixed gender ward in Hereford (within the Stonebow Unit at Herefordshire County Hospital). The Trust also has four Older Adult Acute Mental Health wards in operation – two wards at New Haven (Princess of Wales Community Hospital, Bromsgrove) and two at Stonebow Unit, Hereford.
6. This update includes progress since the March meeting and also includes early consideration of the option to transfer bed provision from Hill Crest to the vacant Athelon Ward at the Elgar Site on the Worcestershire Royal Hospital site. This option is being proposed in light of the inherent environmental constraints of the Hill Crest building and safety concerns arising from its isolation from other mental health wards.
7. Engagement with staff and other key stakeholders around any transfer of the beds will take place throughout the remainder of 2023 to ensure impacts are fully understood before any decision is made. Any move would not be any earlier than March 2024.

Care Quality Commission (CQC) Inspections (2022 and 2023)

8. On 21 and 22 July 2022, the CQC carried out an unannounced inspection of the services on the Ward. Following the Inspection, the Trust was issued with a notice of possible urgent enforcement action under Section 31 of the Health and Social Care Act 2008. The themes of the concerns raised were:
 - Patient care plans and records
 - Patient risk assessments
 - Incidents reporting
 - A reliance on agency staff
 - Environment and estates issues
 - Sexual safety on a mixed gender ward
 - Staff handovers
 - Governance of the ward.
9. In response to the concerns raised, a multi professional task force was assembled led by the Associate Director for Specialist Mental Health and Learning Disabilities to review the risks and agree actions through a “risk summit” meeting chaired by the Director of Nursing and Chief Operating Officer. An improvement plan was devised to address the issues and processes, embedding best practice and a governance structure to monitor and provide assurance internally and to stakeholders.
10. In January 2023, the Trust made a decision to reduce the number of beds on the Ward from 18 to 10 given ongoing concerns about staffing levels and to enable more sustainable improvement work to be undertaken.
11. The CQC reinspected Hill Crest on 14 February 2023 as part of the Trust core inspection and noted the following concerns:
 - Poor patient experience in relation to insufficient staff to allow escorted leave from ward or supervised use of the garden areas
 - High use of temporary staffing and poor quality of care delivered by some temporary staff
 - Lack of proactivity in dealing with sexual safety incidents
 - Poor documentation and possible under reporting of incidents
 - Lack of therapeutic activity for patients.
12. These items were raised verbally in immediate post-inspection feedback. At the time of writing (3 October 2023) the Trust has not received the Inspection report. This is not an unusual position in respect of timelines, post CQC Inspection. Previous CQC inspection reports are attached at Appendix 1.

Hill Crest Improvement Plan

13. The Hill Crest Leadership Team have been working through a multi-level Improvement Plan from September 2022. The plan is organised into four themes:
 - Environmental

- Clinical
- Staffing
- Patient and Carer Engagement.

14. The purpose of the plan is to restore safe operations within Hill Crest and make environmental and operating improvements to raise quality of care delivery. The plan is not designed to overcome underlying recruitment issues, or the constraints of the Hill Crest building. Arising from the four plan themes, there are 56 workstreams and over 200 individual tasks – with commencement and completion dates from December 2022, through to August 2023. The Improvement Plan is now substantively complete, with no critical outstanding issues.
15. As the plan nears maturity, a report will be submitted to the Trust’s Quality and Safety Committee in November 2023 to close the September 2022 Improvement Plan as at present there are no outstanding areas causing uncontrolled risk. A view will be taken about any areas of work “in progress”, to determine how these should be completed, in light of decisions about the future of acute inpatient provision on the Hill Crest site.

Workforce

16. The recruitment of registered staff remains a challenge on Hill Crest Ward even with a Band 6 Deputy Ward Manager and a Band 6 Senior Occupation Therapist starting in July and August 2023. 3 Whole Time Equivalent (WTE) Band 5 staff nurses have started in September as “newly qualified staff under preceptorship” (i.e the first six months post qualification, in which nurses work under supervision).
17. This means that the ward has 6.8 WTE permanent registered staff with 2 WTE Band 6 and 6.6 WTE Band 5 Nurse posts vacant. One additional Band 5 is also due to join the ward in October on completion of a “Return to Practice” course. The registered vacancy rate however remains over 50% at the end of September.
18. One issue that Hill Crest will face as the registered position improves is the lack of very experienced staff. Only the Ward Manager, Deputy Ward Manager and two staff nurses will be outside of preceptorship.
19. The permanent Healthcare Support Worker (HCSW) situation is better, with 10.81 WTE in post against baseline establishment of 17.2 WTE (July 2023). Three “Care Worker Support Development Programme” (CSWDs - HCSW development posts) have converted to HCSWs in August and three more are expressing an interest in becoming HCSWs on the ward. If all CSWDs can join Hill Crest, the ward would be approaching the baseline HCSW establishment.

Block booked agency solutions

20. In March 2023, the Trust entered a “block booking” arrangement with two major staffing agencies for the supply of a cohort of Registered Nurses and Health Care Support Workers, to work exclusively, or near exclusively at Hill Crest. These staff are rostered as “regular” staff, alongside the pool of permanent staff, NHS Professionals staff who took regular shifts at Hill Crest and a small number of

staff from other agencies who were well regarded on the ward and also worked regularly. Agency rostered staff are supplied with Trust uniforms and receive local induction, training, supervision, and development as if they are permanent staff. This situation has provided stability and continuity of care.

21. The staffing agency used for Registered Nurses has fulfilled over 95% of all requested shifts between April and August, with only 20 different staff being rostered. Additional extra shifts to fill absence and increased clinical needs have been fulfilled in the most part by two main agencies, with high-cost off-framework accounting for only 7% of shift fill. At present Hill Crest is the only Adult Acute Ward that is managing staffing within its agency target, despite having the highest vacancy rate. Use of block booked staff has probably been the most financially efficient way available of addressing the large numbers of unfilled posts.
22. Professional practice concerns have been raised relating to a small number of staff from the two contracted agencies. Other agency staff have decided to leave Hill Crest, usually because of a mismatch in expectations. These staff have been replaced by the agencies with others who are rostered in. Discussion has been taking place with professional leads from agencies related to concerns that some registered agency nurses were not completing a full range of nursing tasks – including completion of risk assessment and care planning duties. At the date of reporting these issues are not fully resolved, but weekly meetings with the lead agency are continuing. Block booking arrangements were in place until end September 2023. The proposal supported by the Trust Board was that the block booking would be extended until end March 2024.

Bed reductions and substitute capacity

23. As Hill Crest was temporarily reduced to operating at 10 beds (from 18) from March 2023, 5 beds were commissioned at Ty Grosvenor – an independent hospital operated by Elysium, in Wrexham, Wales. A Standard Operating Procedure has been approved by NHS England (NHSE) resulting in these beds being counted as local acute bed stock – in accordance with nationally agreed standards for continuity of care.
24. The beds are being used selectively for male patients who are detained under Section 3 of the Mental Health Act (an order for detention for mental health treatment for up to 6 months) and require a longer period of stability before discharge, or who are on a pathway to locked rehabilitation placements. Exceptionally beds may be used for patients detained under section 2 (an order for assessment and treatment – lasting up to 28 days), with an early move back to Herefordshire or Worcestershire. To date 13 patients have moved through the beds at Ty Grosvenor.
25. The Trust continues to collect feedback from all patients placed at Ty Grosvenor, with a member of the Patient Flow team visiting regularly to speak with all local service users staying at the hospital. The ward also has a dedicated advocacy worker. The Trust continue to review the placement quality – led by a member of Trust staff with a quality assurance background. To date there have been no patient or carer concerns about the placement and no quality issues identified.
26. Discharge processes have been managed directly from Ty Grosvenor, when the

onward care is to placement, or home arrangements are straightforward. More complex discharges take place with the patient repatriated to a local ward before discharge. Community Team practitioners have been fully involved in discharge planning and ward reviews.

27. Two related issues that have emerged are:

- Difficulty repatriating patients to base wards to commence Community Treatment orders, because of ward flow. Approved Mental Health Professionals (AMHPs) from Herefordshire and Worcestershire are unwilling to travel to Wrexham to complete applications.
- Reluctance of patients, or their families from the two counties to complete their care journey in Wrexham. This has led to short periods of under-utilisation of the block booking. At 27 September 2023, all block-booked beds at Ty Grosvenor are in use.

28. Both issues are endemic to the outsourcing of replacement capacity at distance.

29. The Service Delivery Unit (SDU) Associate Director together with the Hill Crest leadership team reviewed Hill Crest bed capacity in July and presented a short paper for Trust Executives on 15 August 2023. The paper recommended that additional capacity at Hill Crest was not opened until permanent registered nurse staffing levels had improved considerably. This was because of the ongoing high levels of support required from the Ward Manager and Matron to ensure that less experienced or less committed staff members are delivering care safely. The paper also noted that even opening up to 14 beds would necessitate the reopening of a third bedroom corridor every time that there was a gender imbalance. The Trust Executive team endorse the recommendation that beds are not reopened until staffing levels improve. The rate of recruitment is unlikely to return safe permanent staffing levels at any point before the end of 2023/24. The Trust Executive team therefore propose that additional external capacity continues to be purchased on a block contract basis until the end of March 2024. This capacity has now been reserved with Elysium.

Clinical Environments

30. Quality issues arising from the CQC Inspection, concerns raised by Staff Side (Trade Union representatives) and consideration of bed configurations have continued to highlight the shortcomings of the Hill Crest environment.

31. The ward has a large and complex footprint, with interlinking corridors joining a number of communal areas, which themselves often lead through to other corridors. Spaces are poorly defined and not well-designed for delivery of acute mental healthcare. The layout is confusing and difficult to monitor. Twenty-nine blind spots were identified in a 2022 safety audit of the ward, which have now been mitigated through the use of CCTV, but still provide a challenge in delivering care. A programme of environmental improvements is now substantively complete but cannot entirely compensate for the awkward layout of the unit.

32. Hill Crest is also an isolated mental health unit on the Alexandra Hospital site. All of the other acute inpatient wards for adults and older adults have at least one other acute mental health ward with which they are collocated on the same site.

The implication of this for Hill Crest is that in the event of a patient safety incident, there are no other ward staff who can attend and assist. Staff assisting one another across wards is a common feature of the other mental health estate.

33. An alternative to providing acute care at Hill Crest has become available with the rebuilding on the Elgar Unit at the Worcestershire Royal Hospital site. The Elgar Unit has three purpose-built wards within a single campus. Two of the wards – Holt (16 beds) and Athelon (14 beds) were completely rebuilt in 2022 and 2023 as part of the national “Eliminating Dormitories” programme. They are specifically designed as acute mental health wards, incorporating the range of modern design features expected in such facilities.
34. At the time of planning, Athelon Ward was intended as an older adult acute ward, but by the date that the rebuild had been completed, a new Hospital at Home Team (community acute treatment) had significantly reduced the requirement for older adult beds and Athelon was no longer required for its planned purpose.
35. Athelon Ward will be in use between October 2023 and February 2024. During this time the Trust is carrying out environmental improvements to Hadley Ward (Psychiatric Intensive Care – also on the Elgar site) and patients will be moved to Athelon.
36. After February 2024, Athelon has no dedicated purpose and will be “mothballed” awaiting further planning. Since it is designed as an acute mental health unit however, it could be utilised as a replacement for the functions currently provided on the Hill Crest Ward site.

“Getting it Right First Time” (GIRFT) Programme

37. “GIRFT is a national programme designed to improve the treatment and care of patients through in-depth review of services, benchmarking, and presenting a data-driven evidence base to support change” (NHS England)
38. The GIRFT programme is locally administered by specialist clinicians, using national guidance around particular clinical areas. Mental health clinicians at the Trust are undertaking a review of local Mental Health Rehabilitation services, using the GIRFT guidance and methodology. Arising from this review will be recommendations about the use of the overall bedded estate across the two counties and the mix of investment between inpatient based and community mental health teams.

Staff and public engagement about future options

39. In August 2023; the Chief Operating Officer presented a paper to the Joint Negotiating Consultative Committee proposing engagement with staff about future options for Hill Crest. The terms of engagement are specifically that:
 - As an organisation, the Trust acknowledge that the ambition around the sustainable provision of high-quality care would be best achieved by providing adult acute wards on only two sites (Stonebow and Elgar). These 2 sites enable staffing resilience and make the best use of our modern purpose-built estate including an empty 14 bedded ward (previously Athelon

ward) from early 2023 that has seen significant investment under the national eliminating dormitories capital programme.

- The Trust acknowledge that staff working on Hill Crest Ward may have difficulty in relocating to Worcester and would like to have an informal conversation with them about their views and preferences for future roles should a decision to consolidate services be agreed.
- The outputs of those conversations will be part of staff consultation and public and stakeholder engagement.
- 7 public listening events will be undertaken to outline the issues and engage on potential options, with a focus on understanding the impacts and adjustments that might be necessary before any decisions around the future of the Hill Crest beds could be made.

40. The Trust Staff Side were in support of the approach to staff engagement and to the plan to relocate acute provision on a single site for Worcestershire. Informal conversations with staff commenced at the end of August 2023 and are anticipated to continue until the middle of October 2023.

Proposal for relocation of Hill Crest Ward

41. The Trust is intending to develop proposals for an option to relocate the Hill Crest Ward from Redditch to the Elgar Unit in Worcester.

42. Proposals will only be developed following staff engagement as described above. Staff engagement is likely to be concluded by 13 October 2023.

43. At the point where staff engagement has concluded there will be a 7 public listening events across Herefordshire and Worcestershire, including one virtual event, starting from 30 October 2023.

44. The Trust Board intend to make a decision on a preferred option in January 2024. The timelines and the specific plan for relocating acute care provision will be informed by the availability of staffing for a new ward at the Elgar Unit and mitigating any other logistical issues that may arise from internal and public engagement. The proposal will also be discussed at the Herefordshire and Worcestershire Mental Health Collaborative.

45. The option to relocate Hill Crest Ward to Worcester will reduce the number of Acute Adult Mental Health beds in Herefordshire and Worcestershire from 55 to 51. This is because Athelon Ward is a 14-bed unit, and the current Hill Crest Ward normally runs at 18 beds (although temporarily reduced to 10). Other bed numbers and provision across the two counties are not affected by any proposal for relocation of the Hill Crest provision.

Table 1 Herefordshire and Worcestershire Adult Acute bed numbers

Ward	2019 Adult Acute Bed Numbers	2021 Bed Numbers Provided	2023 Current Numbers	2024 Proposed Numbers
Hill Crest	25	18	10	n/a
Athelon	n/a	n/a	n/a	14
Holt	16	16	16	16

Mortimer	21	21	21	21
Ty Grosvenor	n/a	n/a	5	n/a
TOTALS	62	55	52	51

46. It should be noted that the Hill Crest Ward can accommodate up to 25 acute beds and was run as a 25-bed acute mental health unit from 2017 through to 2020. This bed number though is excessive for an acute mental health ward – the normal range being between 12 and 20 beds. Bed numbers were reduced in 2021 to 18 to provide a more manageable environment.

47. The Trust is involved in a system wide demand and capacity exercise to identify our future need for beds across the health system. The intention is to include mental health beds within this modelling work. This will inform our longer-term strategic planning.

Purpose of the Meeting

48. The HOSC is asked to:

- Consider and comment on the information provided
- Support the direction of travel and the public engagement to inform any move of the beds at Hill Crest to the Elgar site in Worcester
- Agree whether any further information or scrutiny is required at this time.

Supporting Information

Appendix 1 – CQC inspection of Herefordshire and Worcestershire Health and Care Trust, including Acute wards for adults of working age and psychiatric intensive care units [Herefordshire and Worcestershire Health and Care NHS Trust - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk)

Contact Points

Matthew Hall, Chief Operating Officer, Herefordshire and Worcestershire Health and Care NHS Trust Tel: 07553 383793 Email: matthew.hall24@nhs.net

Sue Harris, Director of Strategy and Partnerships, Herefordshire and Worcestershire Health and Care NHS Trust Tel: 07540 252693 Email: susan.harris2@nhs.net

Richard Keble, Programme Director for Mental Health, Learning Disability and Autism, NHS Herefordshire and Worcestershire Tel: 07849 308245 Email: richard.keble@nhs.net

Emma James / Jo Weston, Overview and Scrutiny Officers, Tel: 01905 844964 / 844965 Email: scrutiny@worcestershire.gov.uk

Background Papers

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance), the following are the background papers relating to the subject matter of this report:

[Agenda and Minutes for HOSC on 13 March 2023](#)

All agendas and minutes are available on the Council's website here.