

# Health in Hackney Overview and Scrutiny Committee

4<sup>th</sup> November 2019

Centre of Excellence Model

Consolidating Dementia and Challenging Behaviour Inpatient Wards

#### 1. Summary

- 1.1 The purpose of this document is to outline the next stages of the Trust's proposed continued strategy and commitment to improve the care and outcomes for Older Adults within East London.
- 1.2 It is proposed that the future care of Thames Ward patients (Mile End Hospital), will be consolidated within Sally Sherman Ward (East Ham Care Centre), this proposal will build upon and compliment previous successful Older Persons ward consolidations such as
  - Consolidation Dementia Assessment for the 3 CCG's within Columbia Ward (2012)
  - Consolidation Functional Assessment for the 3 CCG's within Leadenhall Ward (2015)
  - Consolidation of Cedar Lodge into Thames Ward (2018)
- 1.3 Sally Sherman is a 19 bedded ward with the provision to flex to 23 beds, it provides holistic care for older adults serving Newham CCG, the service supports people with cognitive impairment (specifically dementia), who require specialist nursing care to support their complex and challenging behaviour.
- 1.4 Thames Ward is an 18 bedded ward providing holistic care for older adults serving Tower Hamlets and City & Hackney CCG, the service supports people with cognitive impairment (specifically dementia), who require specialist nursing care to support their complex and challenging behaviour.
- 1.5 In total are 37 (including flex beds 41) complex and challenging behaviour beds for Newham, City & Hackney and Tower Hamlets.
- 1.6 A run chart (Table 1) identifies Sally Sherman ward occupancy from January 2017. When looking at the last 12 months, from Sept 18, 59.8% through to (peak of 71.8% July 19) Sept 19, 63.2%, the ward has been carrying significant bed vacancies for considerable time.
- 1.7 A run chart (Table 1) identifies Thames ward occupancy from January 2017. When looking at the last 12 months, from Aug 18, 11.3% through to Aug 19, 32.9% the ward has been carrying significant bed vacancies for considerable time. This is despite the closure of Cedar Lodge and the consolidation of that service within Thames ward from April 2018.

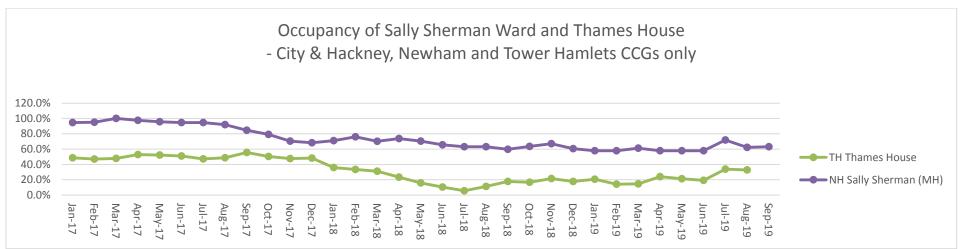


Table 1- Sally Sherman and Thames Ward occupancy as a % Jan 2017 - Sept 2019

1.8 A run chart identifies the available bed days (vacant beds) from January 2017 for both wards (Table 2)

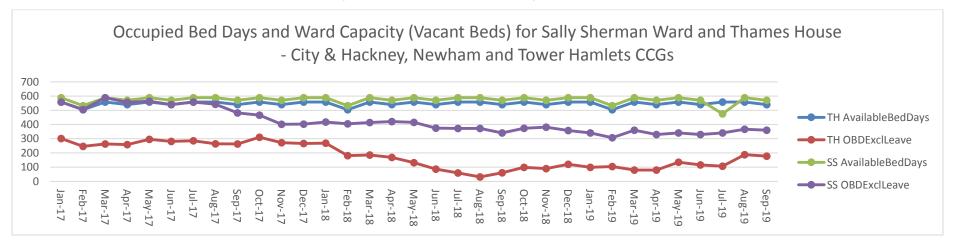


Table 2 - Sally Sherman and Thames Ward occupied bed days against capacity Jan 2017 - Sept 2019

1.9 Locating the complex care and challenging behaviour services together at East Ham Care Centre will provide a vast

improvement to the environment currently provided in Thames Ward, with improved lighting and access to natural light through a central atrium, an environment using effective colour and design with dementia patients in mind, a feeling of space, clear lines of sight, with provision for privacy and dignity. Clinically this will improve access to a wide range of healthcare services, activities and support, and a more joined up approach to care delivery maximising the benefits the adjacency of other services configured for Older Persons on site.

1.10 The clinical scoping of these changes suggests this proposal could take place and be implemented incrementally, providing a safe and planned transition to Sally Sherman ward from November through to early December 2019.

TASK	Sept - 19	Oct - 19	Nov - 19	Dec - 19	Jan -20
Agreement of Business Case with CCG's					
Quality Impact Assessment					
Local Stakeholder Events					
Staff Consultation					
Further Engagement with individual patients and carers					
Transfer of patients out of ward					
Closure of Ward					

### 2. Background

- 2.1 Dementia is a syndrome characterised by an insidious but ultimately catastrophic progressive global deterioration in intellectual function and is a main cause of late-life disability. The prevalence of dementia increases with age and is estimated to be approximately 7 per cent in those over 65.
- 2.2 The risk of dementia, Alzheimer's type rises incrementally with age, the prevalence is higher in women than in men due to the longer lifespan of women.

- 2.3 The configuration of Older Adult complex care and challenging behaviour services is not currently optimised; the activity and bed occupancy is underutilised within Thames and Sally Sherman wards.
- 2.4 The opportunity to build on previous successful consolidations within Older Adult Mental Health would not only improve the quality of patient care, and reduce variation it would also provide better value and use of the available estate and resources.

#### 2 National Guidance

- 3.1 **NHS Long Term Plan** NHS will need to make better use of capital investment and its existing assets to drive transformation, as well as maximising productivity through improving utilisation of clinical space, and as an enabler to support transformation. This proposal in consolidating the available estate resource in one place rather than across 2 wards responds to this key driver.
- 3.2 Royal College of Psychiatrists The Quality Network for Older Adults Mental Health Services (formally known as AIMS-OP) works with inpatient services to improve the quality of the care that they provide through peer review and accreditation processes. The ELFT Older Adult service has undertaken an initial review of the standards and deemed it would be difficult to reach compliance within Thames ward as a number of the criteria are environment related. Sally Sherman ward however provides a much-improved environment and the service would wish to register and apply for accreditation of the new consolidated service. (Appendix 2 pictures of environment)
- 3.3 The **Prime Minister's Challenge on Dementia 2020** Highlights the need to ensure that every person diagnosed with dementia receives meaningful care and recommends that care settings ensure consistency of access, care and standards and reduce variation. The environment within Sally Sherman ward is far superior to Thames ward in terms of design and flow, use of space, colour, lighting and sound. The consolidation of Thames ward will respond to these issues and also reduce variation in what is a specialist area of psychiatry, supporting very complex inpatient Mental Health care. (Appendix 2 pictures of environment)
- 3.4 **NHS England's Dementia: Good Care Planning (2017)** further highlights the need for a standardised approach: "reducing unwarranted local variation in process or outcomes, promoting equality and tackling health inequalities, ensuring alignment with relevant cross condition care plans such as diabetes; and drawing on examples of good practice around the country". Sally Sherman ward has the benefit of having hospital status and is also located in the heart of the community, having direct and easy access to the full range of community services, Health and Social Care.
- 3.5 The Kings Fund *Enhancing the Healing Environment* Programme highlights the importance of providing visual clues and prompts, including accent colours and artworks, to help dementia patients find their way around a ward. Sally Sherman ward has won a number of awards and acknowledgments for its design, artwork and overall environment, related to Dementia provision. (Appendix 2 pictures

#### of environment)

#### 4.0 Service Proposal

- 4.1 It is proposed to locate all older adult inpatients with behavioural and complex psychiatric symptoms of dementia, across East London consolidated into one site, Sally Sherman Ward, East Ham Care Centre. An analysis of the options has been considered, (Appendix 1)
- 4.2 This represents a comparatively small-scale service change; this proposal would see the transfer of 7 inpatients. However, the benefits in terms of improved quality are significant.
- 4.3 There are currently 7 patients on Thames Ward (Table 3) who have been clinically assessed as suitable for transfer to Sally Sherman Ward. Sally Sherman Ward has 8 vacancies

Borough	Male	Suitability for Sally Sherman	Female	Suitability for Sally Sherman	Total
City & Hackney	3	Yes	1	Yes	4
Tower Hamlets	0	N/A	3	Yes	3
Total	3		4		7

Table 3- Thames Ward Occupancy & Gender Mix - (Sept 2019)

#### 5.0 Benefits

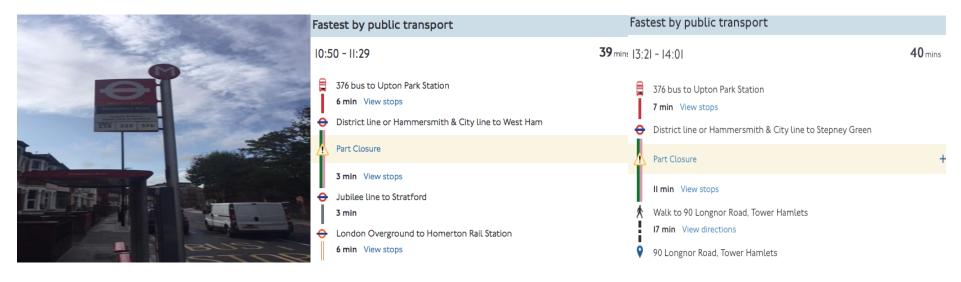
- 5.1 The East London NHS Foundation NHS Trust and working with local Commissioners are committed to ensuring ongoing access to high quality care, the merger of Thames Ward and Sally Sherman is part of this process of improvement and will deliver a number of quality benefits.
- 5.2 East Ham Care Centre is purpose-built, patients would be accommodated in a dementia-friendly unit, which has recently been refurbished, designed specifically for the older adult population and provides the full range of holistic care to older adult patients including the following wards and services:

- Sally Sherman Ward 19 bed ward, providing specialist and continuing care for people with cognitive impairment and challenging behaviour
- Fothergill Ward 27 bed intermediate care ward, providing, rehabilitation and end of life care
- Day Hospital incorporating the Falls Prevention Clinic (FPC) providing intervention from two or more health specialists to help support chronic or long-term condition, FPC a multidisciplinary service including Occupational and Physiotherapy working together to investigate the causes of falls, reduce incidence and minimise injury following falling.
- Activity Centre includes weekly music therapy sessions; a music therapist has recently commenced working at East Ham
  Care Centre. Patients also have access to faith and fellowship services, including multi-faith prayer meetings each week, and a
  sensory room
- Cazaboun Ward 23 bed vacant wad
- 5.3 The co-location of the different streams of the older adult inpatient pathway allows for a smooth transition between them for a patient group for whom change can be unsettling and also creates a critical mass of expertise, resources and support in the care of the elderly and frail at this location. Patients can transition from the day hospital to our continuing care ward and if required, transition to our end of life ward providing seamless care.
- 5.4 Sally Sherman Ward operates a treatment model based on delivering person-centred care, as recommended by the Alzheimer's Society:
  - Treating the person with dignity and respect
  - Understanding their history, lifestyle, culture and preferences, including their likes, dislikes, hobbies and interests
  - Looking at situations from the point of view of the person with dementia
  - Providing opportunities for the person to have conversations and relationships with other people
  - Ensuring the person has the chance to try new things or take part in activities they enjoy.
  - Family, carers and the person with dementia (where possible) should always be involved in developing a care plan based on person-centred care.
  - Their knowledge and understanding of the person is extremely valuable to make sure the care plan is right for them.
- 5.5 The ward is dementia-friendly, providing a bright spacious environment for patients. Every bedroom has en-suite facilities and are spacious enough to be equipped to support patients with disabilities. The ward is built around a central atrium, which not only renders an abundance of space and natural light it also provides a dementia-friendly natural loop, which patients can move around when they want to take some exercise but in a safe environment where they cannot get lost. There is seating

- areas spaced around this loop where service users can sit, to relax or rest if they get tired.
- 5.6 The ward maintains exceptional levels of cleanliness, is pleasant, friendly and inviting.
- 5.7 East Ham Care Centre also benefits from lovely gardens, which are used frequently by service users. Every service user has a tailored activity programme and is allocated an activity worker. The Activity Centre runs from Monday to Friday every week and includes weekly music therapy sessions; a music therapist has recently commenced working at East Ham Care Centre. Patients also have access to faith and fellowship services, including multi-faith prayer meetings each week, and a sensory room.
- 5.8 Staff on Sally Sherman Ward encourage orientation and involvement of the service users. Annual celebrations and events are marked and service users are involved in art projects to create decoration for the ward at key points of the year, e.g. Easter, Christmas.
- 5.9 Staff work with the service users to create a 'memory book' features photographs of their family, items from their childhood or people and places that have a special meaning to them. These books are regularly shown to and discussed with service users and this can help with orientation and reduce stress in isolation.
- 5.10 The ward encourages the use of small tables at mealtimes to create conversation and interaction between service users and staff, to minimise any distractions and to ensure that service users aren't sat in one place all day and are stimulated by a change of scenery.
- 5.11 Patients based at Sally Sherman Ward also benefit from a wide range of health care and treatment approaches which are either based on site or visit the site on a regular basis, as follows:

Speech & language therapists	Physiotherapists	Diabetic nurses	Dieticians	Tissue viability nurses
Falls clinic	Podiatry	Optician	Dental service (provided by local practice)	Hairdresser on site
Liaison with local Bereavement Service	Sensory Room	Welfare Team	Physical health nurses	Therapy Room
Therapeutic Gardens	Mental Health Nurses	Medical Psychiatry and General Physicians	Activity Centre	Restaurant

- 5.12 East Ham Care Centre has good transport connections for families and carers visiting patients based at Sally Sherman Ward, as follows:
  - Car park with visitor parking
  - Cycle bays
  - East Ham tube station is a 10-minute walk away on the District and Hammersmith & City lines
  - Nearby bus stop in Shrewsbury Road offering access (376) to public transport routes to Hackney and Tower Hamlets.



5.13 Service users, families, carers and other visitors have access to an on-site canteen at East Ham Care Centre. A good support mechanism is also in place for relatives, with a designated area where families and carers can chat and offer informal support to each other. The multi-disciplinary team works closely with families and carers who are engaged at every step of their loved one's journey.

A relative recently wrote: "The level of care that patients receive here is extraordinary. Compassion, commitment and dedication are the order of the day. The staff bring hope and happiness to those in need. The atmosphere is calm and relaxed and promotes a much better quality of life than many had before. The confidence and contentment I had a as relative was priceless."

- 5.14 Sally Sherman Ward has participated in and achieved the following:
  - Successful QI Project to reduce violence & aggression on continuing care wards
  - Older Peoples Positive Mental Health (positive practice improvement). Ward shortlisted for QI Project on including carers in the care of older adults
  - Oral health QI Project about to commence with aim of improving oral hygiene and responding early to dental decay and associated problems
  - Won Nursing Times award for their work on reducing violence by 50%; sickness levels also reduced as a consequence of this
  - The ward reached the final three in the Older People's National Awards in Bristol and although they did not win the award, they were 'highly commended' and received a certificate for the excellent work they undertake with Carers.
  - Strategies to reduce antipsychotic and benzodiazepine
  - Carers took part in a charity Memory Walk in Olympic Park
  - Ward Housekeeper won Ancillary Leader of the Year at the National Unsung Hero Awards for her work around patient nutrition and developing diet plans
  - Ward nominated for Improvement Team of the Year at ELFT Staff Awards
  - As part of an International Quality Conference, the ward was visited by health staff from a number of countries around the world, including Canada, Australia, Scotland, Sweden, Norway and other parts of the UK, who all gave very positive feedback about Sally Sherman and said that they would be happy to have their family members placed in such a facility.
- 5.15 Sally Sherman successfully secured funding through the Prime Minister's Challenge on Dementia used the funds to make changes to the ward, including the décor, lighting, flooring and colours. The team also created lots of seating areas around the ward, including one particular alcove transformed from a dull unused area into a bright, inviting area, now used by many service users and their families. The alcove seating blends beautifully with a lovely view overlooking the beautiful gardens.
- 5.16 Staff on Sally Sherman Ward have undertaken a number of particularly successful interventions with challenging patients (Appendix 3).

#### 6. Current, Future Activity and Demand

- 6.1 The demand capacity forecasting of Dementia diagnosis over the next 10 years has been based upon the baselines and profile of the ageing population within the Boroughs. All 4 Boroughs are regarded as young in terms of the population age range in comparison to the rest of the country and indeed London.
- 6.2 The number of people with Dementia in 2013 according to Local Authorities

CITY of LONDON - 86

HACKNEY – 1293

**TOWER HAMLETS – 1209** 

NEWHAM - 1540

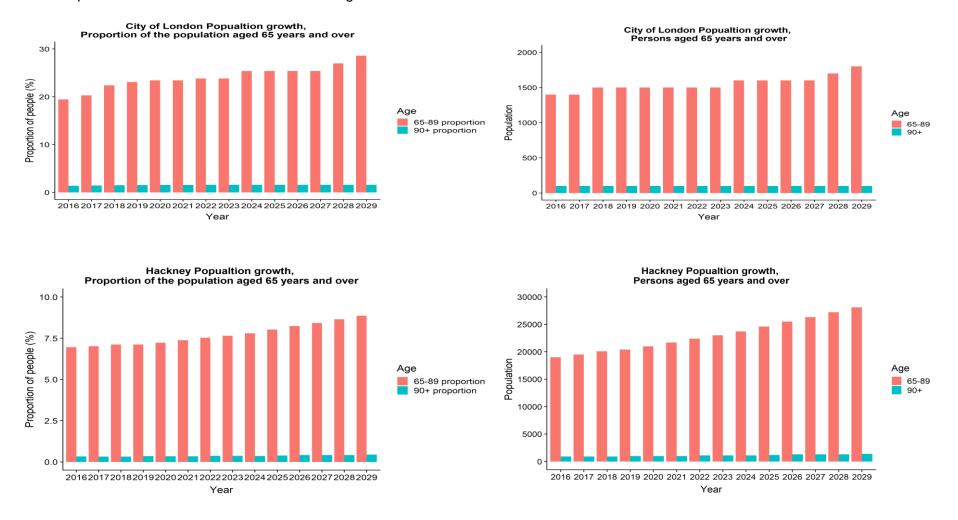
6.3 Life expectancy for older people is increasing, older people are most at risk of suffering dementia, the largest increases in the number of people with dementia will occur in those areas with oldest age groups within their population (see Table 4), this risk rises incrementally with increasing age.

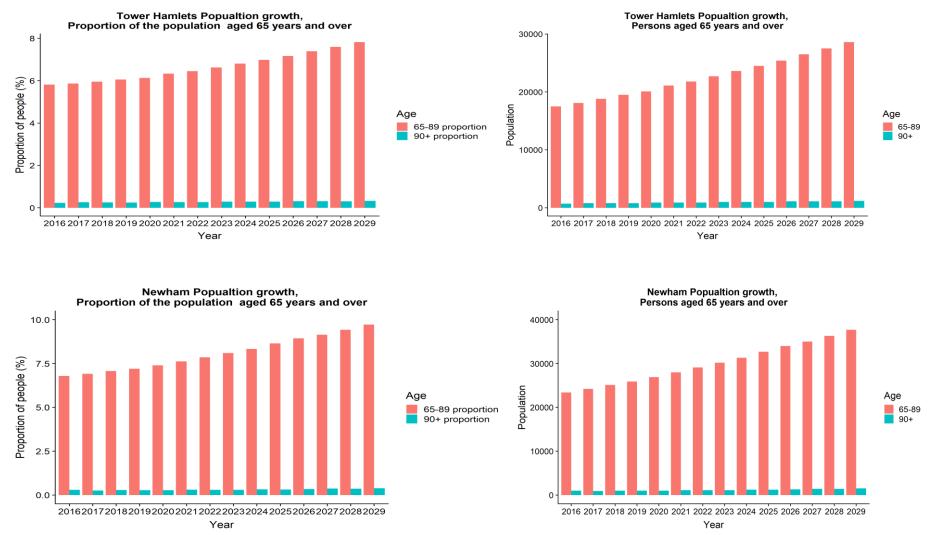
Tαble A: The c	onsensus est	imates of the	population pr	revalence (%) of	late-onset d	ementia
	Previous estimates (Dementia UK 2007)			Current est (Dementia		
Age in years	Female	Male	Total	Female	Male	Total
60-64	(0.1)*	(0.2)*	(0.2)*	0.9	0.9	0.9
65-69	1.0	1.5	1.3	1.8	1.5	1.7
70-74	2.4	3.1	2.9	3.0	3.1	3.0
75-79	6.5	5.1	5.9	6.6	5.3	6.0
80-84	13.3	10.2	12.2	11.7	10.3	11.1
85–89	22.2	16.7	20.3	20.2	15.1	18.3
90-94	29.6	27.5	28.6	33.0	22.6	29.9
95+	34.4	30.0	32.5	44.2	28.8	41.1

Table 4 - Population prevalence of late onset dementia

- The tables below provide the forecast in terms of the general population age profile for the 4 Boroughs over the next 10 years.
- 6.5 Using the population profile as a means to assess future demand and capacity requirements for Dementia we can establish that

increasing age, increases risk, those people who are in the 90+ age group remains largely static within the Boroughs (life expectancy is lower than UK national average), whereas the 65 – 89 age range increases. profile increases within each of the Boroughs.





6.6 In terms of inpatient bed requirements for those with complex care and/or challenging behaviour the following growth assumptions have

been made using the formula, current population and age profile 65 – 89 and 90+, compared with current usage of Inpatients beds as an % of that population segment. Projecting forward the forecast Inpatient need based on the increased growth of those aged 65 and over within the Boroughs. (Table 5 below)

Area	Measure	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029
City of London	OBD 65 years and over	164.1	164.1	164.1	164.1	164.1	174.3	174.3	174.3	174.3	184.6	194.8
Hackney	OBD 65 years and over	2194.4	2255.9	2327.7	2409.7	2471.2	2543.0	2645.5	2748.1	2830.1	2922.4	3024.9
Newham	OBD 65 years and over	2758.3	2860.9	2983.9	3096.7	3209.5	3332.6	3476.1	3619.7	3732.5	3865.8	4019.6
Tower Hamlets	OBD 65 years and over	2081.6	2153.3	2255.9	2327.7	2430.2	2522.5	2614.8	2717.3	2830.1	2932.7	3055.7
City of London	Occupancy 65 years and over (%)	1.2%	1.2%	1.2%	1.2%	1.2%	1.3%	1.3%	1.3%	1.3%	1.4%	1.4%
Hackney	Occupancy 65 years and over (%)	16.2%	16.7%	17.2%	17.8%	18.3%	18.8%	19.6%	20.3%	21.0%	21.6%	22.4%
Newham	Occupancy 65 years and over (%)	20.4%	21.2%	22.1%	22.9%	23.8%	24.7%	25.7%	26.8%	27.6%	28.6%	29.8%
Tower Hamlets	Occupancy 65 years and over (%)	15.4%	15.9%	16.7%	17.2%	18.0%	18.7%	19.4%	20.1%	21.0%	21.7%	22.6%

Table 5 - Projected bed requirements forecast over next 10 years

- 6.7 In term of future forecasting and capacity from our bed modelling the capacity within Sally Sherman ward will meet future demand over the next 4 years, in 2024 demand will begin to outstrip bed availability.
- In order to effectively plan for this forecasting and mitigate demand pressures we will be investing as phase 2 of this development in community orientated, upstream interventions to support more effective support and upskill the sector, developing increased expertise within nursing homes to help manage greater degrees of complexity, educational and supportive in reach for carers.

### 7.0 Staffing

- 7.1 It is proposed that all staff on Thames House are met with and redeployment plans are agreed and put into place in advance of patient transfer and ward closure.
- 7.2 Suitable Trust-wide vacancies have now been frozen and will be used to redeploy Thames House.

#### Medical Cover Current

- 7.3 Thames House is currently allocated 3 PAs of older adult consultant psychiatry input per week, Junior doctor cover to supplement the medical care is currently provided as required.
- 7.4 G.P input is provided by a local practice, to which all the patients would be temporarily registered whilst they are an inpatient
- 7.5 Sally Sherman is currently allocated 2 PAs of older adult consultant psychiatry input per week; only one of these is funded, the unfunded PA to be supported through this consolidation.
- 7.6 There is nominal duty doctor cover
- 7.7 G.P cover is one session per week; however, it is limited in its scope.

#### Medical Cover New Model

- 7.8 Sherman Ward consultant psychiatry sessions increased to 4 PAs per week. The current Sally Sherman consultant has the capacity to accommodate this increase and a new job description will be developed for this role. In addition, a middle grade doctor will provide cover for the Sally Sherman consultant's leave and other absence, providing much needed continuity of care and senior medical oversight.
- 7.9 The GP model (Thames House) will be replicated at Sally Sherman Ward to address current limitations.

### 8.0 Impact of Changes for City & Hackney and Tower Hamlets Service Users

8.1 It is recognised that that the move to Sally Sherman ward will be unsettling for the individual patients, who would transfer from

Thames Ward, 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 Sally Sherman prior to change taking place.

- The Trust recognises the importance in providing accessible services for Family & Carers to care and support 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 Sally Sherman is significantly more complex than the journey would have been to the Thames Ward. 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, **a total journey time of 45 minutes or more the** care co-coordinator will determine with the carer how the Trust might support the individual to maintain their visiting arrangements to Sally Sherman 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.
- Appraisals of travel times (Table 6) for Tower Hamlets and (Table 7) City & Hackney residents to East Ham Care Centre 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. There are specific locations where the journey time is in excess of 45 minutes marked in red. An analysis undertaken shows the following differences in travel times for Tower Hamlets and Hackney residents.

#### Table 6 Tower Hamlets travel to Mile End/ East Ham Care Centre



	_			
	Current	Current Travel to	Future Travel to	Future Travel to
	Travel to	Mile End Hospital	East Ham C.C	East Ham C.C
Tower Hamlets	Mile End	Public Transport	Driving	Public Transport
	Hospital	•		•
	Driving			
Stouts Place	13 mins	24 mins	34 mins	41 mins
St. Katherines Dock	16 mins	24 mins	32 mins	38 mins
Docklands	15 mins	36 mins	28 mins	56 mins
Island	13 mins	37 mins	25 mins	52 mins
Aberfeldy	14 mins	30 mins	24 mins	36 mins
Strudley Walk	12 mins	16 mins	21 mins	25 mins
Ruston Street	10 mins	23 mins	27 mins	37 mins
Spitalfields	12 mins	17 mins	43 mins	33 mins



Hackney	Current Travel to Mile End Hospital Driving	Current Travel to Mile End Hospital Public Transport	Future Travel to East Ham C.C <b>Driving</b>	Future Travel to East Ham C.C Public Transport
Abney House	25 mins	45 mins	38 mins	60mins
Green Lanes	32 mins	50 mins	45 mins	60mins
Southgate Road	19 mins	40mins	50 mins	55 mins
Half Moon Court	25 mins	30 mins	40 mins	52 mins
Broadway Market	12 mins	30 mins	36 mins	48 mins
Lower Clapton Road	23 mins	40 mins	31 mins	60 mins
Wick Road	15 mins	40 mins	30 mins	49 mins
Mandeville Street	31 mins	49 mins	35 mins	64 mins
Egerton Road	30 mins	45 mins	43 mins	57 mins

#### 9.0 Financial costs and Value for Money

- 9.1 It is not financially viable to run wards with such significant bed vacancies over a long period of time. The staffing costs remain disproportionate with the ratio of patients, the consolidation of the wards will address these financial imbalances whilst providing the opportunity to achieve greater value for money and use of resources.
- This scheme will enhance the current inpatient service through a remodelled and full multi-disciplinary team and support through reinvestment further improvements in the community pathway for Older Adults, including greater accessibility, early intervention and in reach to nursing home providers.

### 10. New Service Monitoring and Governance

- 10.1 In order to understand the impact of the change and mitigate/respond to any unintended consequences we propose to use the following measures to understand over time
  - Length of Stay (Trend)
  - Staff turnover (monthly 12 month rolling)
  - Staff absence rate (monthly)
  - Incidents number and themes (trend)
  - Patient experience & F&F responses
  - Staff experience
  - Eligibility for travel assistance identified vs's Travel assistance provided

#### 11. Conclusion & Recommendations

- Sally Sherman is a modern, purpose built Older Person's ward located within East Ham Care Centre with sufficient capacity to meet the future requirements of complex and challenging behaviour for Older People from Tower Hamlets, City & Hackney and Newham.
- Family and carers of City and Hackney and Tower Hamlets residents in Thames Ward will be able to access assistance where travel time is an issue to enable them to regularly visit the ward in East Ham.
- The City & Hackney Health and Social Care Committee are therefore asked to support this proposal to merge Thames Ward with Sally Sherman, and in so doing deliver more cost effective, higher quality inpatient care, and improve the overall utilisation of estates at both East Ham Care Centre and Mile End Hospital enabling further exploration of various options to repurpose the future use of Thames Ward.

#### 12. Horizon scanning and future plans

- 12.1 We are about to embark on a review of the Older Persons Organic Inpatient Assessment service (Columbia Ward 21 beds) which is currently located at Mile End Hospital, Columbia provides a function on behalf of all 3 CCG's. There is opportunity to utilise further the available space and accommodation at East Ham Care Centre to greater effect, as there is a vacant ward (Cazaboun 23 beds) which will provide sufficient bed mass for the relocation of Columbia ward.
- Discussions are at a very early stage, but we feel it important to signal at this stage this exciting opportunity to bring together all of the frail elderly and Dementia wards together on one site to provide a Centre of Excellence for this care group.

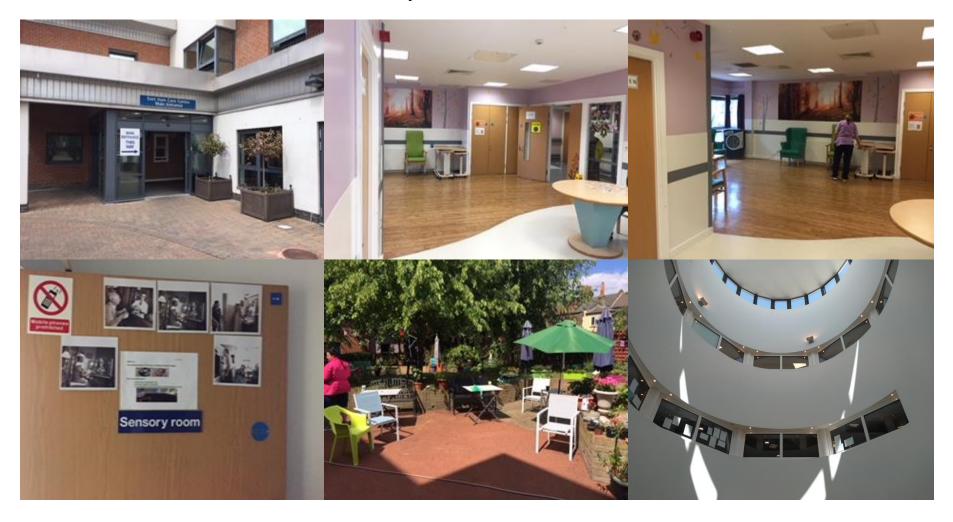
### **APPENDIX 1**

No	Option Description	Positive Impact	Negative Impact
		Service users do not have to be moved	Service users will not benefit from being located in the best possible environment and what this enhancement will mean to their daily lives
1	Do nothing; Trust provides two separate Continuing Care Wards: Thames House and Sally Sherman Ward	Staff do not have to be redeployed	The Trust is not offering good value for money in operating two wards which are underutilised.
		Families and carers who are residents of the City of London, Hackney and Tower Hamlets will not need to source alternative travel to visit loved ones.	Thames House is not a fully dementia-friendly ward and does not offer the same level of environment as Sally Sherman Ward, e.g. large ensuite bedrooms, colour, light and space
		Service users will benefit from being located in the best possible environment. This will enhance their daily lives, as highlighted above.	Service users will need to be moved; continuing care service users sometimes find change difficult
	Consolidate the location of all older adult inpatients with behavioural and complex psychiatric symptoms of dementia into one site, Sally Sherman Ward, East Ham Care Centre.	Sally Sherman Ward has led on many exciting projects, including violence reduction, involving families and carers and implementing innovative ways of working with service users	Families and carers who are residents of the City of London, Hackney and Tower Hamlets will need to travel further to visit loved ones. However, Trust can provide free transport for this where required
2		The Trust will provide a high quality service to all Continuing Care residents of the East London boroughs it serves. There is currently inequity in the service provided for people with behavioural and complex psychiatric symptoms of dementia	Staff will need to be redeployed. However, the Trust has identified a number of suitable vacancies and Sally Sherman Ward will also need to be enhanced when operating at full capacity
		The Trust will be able to generate an efficiency saving of £900k as a result of creating a consolidated unit and will therefore offer better value for money	

No	Option Description	Positive Impact	Negative Impact
		Service users can be managed in their own home or in alternative community settings	Service users will need to be moved; service users sometimes find change difficult
3	Close Thames House and replace with an enhanced community	Care closer to home where possible is considered to be best practice	Staff will need to be redeployed
3	Continuing Care Service		This service user group, patients with behavioural and complex psychiatric symptoms of dementia are not deemed suitable to be managed in the community; most display challenging behaviour and many require 1:1 care

### **APPENDIX 2**

## **Sally Sherman Environment**



#### **Sally Sherman Patient Stories**

A service user was placed in eight different care homes but did not settle; staff were unable to manage her care and she was subsequently readmitted to Columbia Ward at Mile End Hospital. She exhibited challenging and often aggressive behaviour. She was then transferred to Sally Sherman and the team used their person-centred care model to great effect, getting to know her over the long-term. She did not have any family visiting her and so ward staff set up a befriending system. They also arranged for her to leave the ward a couple of times a week and this opportunity enhanced her experience and reduced her aggressive behaviour.

Another challenging man had refused to leave the ward for many years, even refusing to go downstairs to the garden. Sally Sherman's Housekeeper developed a relationship with him and managed to get him out of the ward, into a taxi and took him shopping. This significantly reduced his aggression. This led to staff considering every service user on the ward, why they were aggressive and what we could do for them and was developed into a very successful QI Project.