



Mental Health Rehabilitation Care

Consultation: 16 January – 31 March 2023



Introduction

Thank you for taking the time to learn about our proposal for the future of mental health rehabilitation care in Lincolnshire. The information in this document has been provided so that you are able to understand the potential options for future services and share your views.

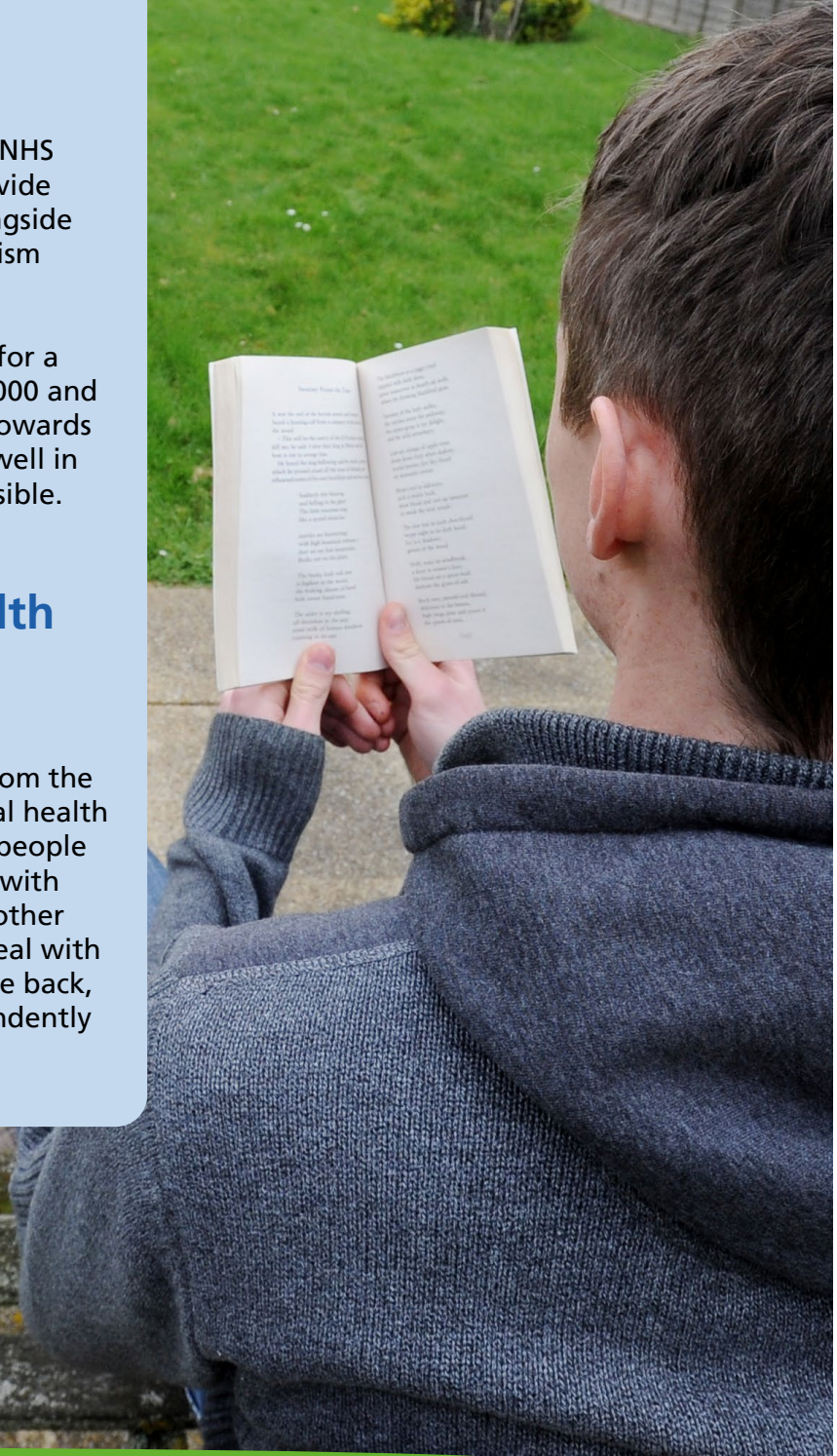
Who are we?

We are Lincolnshire Partnership NHS Foundation Trust (LPFT) and provide NHS mental health services, alongside some learning disability and autism services for Lincolnshire.

We provide care and treatment for a local population of around 766,000 and are focused on helping people towards recovery, enabling them to live well in their community as much as possible.

What is mental health rehabilitation?

Mental health rehabilitation is a service to help people recover from the difficulties of longer-term mental health problems. It helps and supports people who still find it difficult to cope with everyday life, or to get on with other people. It aims to help people deal with problems, to get their confidence back, and to help them live as independently as possible.



Engagement to develop our proposals

Over the last three years we have carried out engagement with patients, carers, staff, public and partner organisations to understand their views on the current service and how this could be improved in the future.

This included the co-production of a new mental health community rehabilitation service with our service users, which supports people ready to move away from hospital, back into the community with additional support.

Events have taken place across a variety of locations in Lincolnshire, including online events during the COVID-19 pandemic.

All of this valued feedback has been considered and used to develop our preferred proposal for the future service, which we are now asking for your views on in this consultation.

What we've heard so far during the engagement

"Service users are worried about relapsing following a long time in hospital, so feel extra support is needed following discharge to help them back into the community - including housing support, accessing benefits and personal budgets, as well as joining community groups and activities."

"Support needs to come from a range of expertise including, social workers, occupational therapists, and community nurses as a coordinated package of ongoing care."

"Service users do not want to travel out of Lincolnshire for mental health rehabilitation care."

"Service users want continued help and support following discharge to avoid their wellbeing deteriorating and needing to be re-admitted."

"Service users want more support to live well at home, rather than in hospital."

Getting involved in this consultation

These proposals and our preferred option have been developed with clinicians, service leads and our service users through our previous engagement.

We are now seeking your views on this throughout our consultation which will run between 16 January – 31 March 2023.

During this consultation, you will be able to share your views via our survey, [which is available online](#), in paper form or other languages and formats on request, as well as at our public events across Lincolnshire, or virtually at our online events.

Below you will find details of the various events taking place.

Consultation events

Thursday 9 February	2pm-3.30pm	Online event
Monday 13 February	10am-12pm	Jubilee Church Life Centre, 5 London Road, GRANTHAM, NG31 6EY
Thursday 16 February	10am-12pm	Gainsborough Uphill Community Centre, Riseholme Road, GAINSBOROUGH, DN21 1NJ
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Further information on the services we are consulting on can be found on our website: www.lpft.nhs.uk/MH-rehab-transformation

Hearing your views throughout the engagement and consultation process is an important part of the decision-making process and will be fully taken into account alongside other essential factors such as clinical, financial and practical considerations.

Any decision to proceed with any of the proposed service changes will be informed by the feedback.

The feedback from this consultation is really important but does not represent a vote on, or a veto over, any form of change. The full report of the results and decision will be published on our website after the consultation has ended.

What are we consulting on?

We are seeking your views on our proposal to expand Lincolnshire's new community rehabilitation service, and the impact this might have on a need for local mental health

rehabilitation beds, specifically at Ashley House in Grantham, which has been temporarily closed during the COVID-19 pandemic.

Background

Ashley House is a 15 bedded low dependency, open mental health rehabilitation unit, in Grantham. It has been temporarily closed since 10 February 2021 as part of arrangements to ensure safe staffing levels during the pandemic. The temporary closure has enabled staff to be redeployed to support other adult mental health wards during the pandemic and the temporary expansion of community rehabilitation in the county, which has enabled us to provide more support and care in the community, to more people, in a more flexible way.

Since the temporary closure, all patients requiring this kind of support have been treated at Ashley House's twin unit Maple Lodge in Boston, or by the newly formed community rehabilitation service, with some support also provided by adult social care. No one has had to wait longer to access care locally or travel outside of Lincolnshire for care.

As part of a national move towards increasing community support for adults with severe mental illness, the [NHS Long Term Mental Health Implementation Plan](#) sets a future direction for providing the least restrictive care for patients, minimising the need for hospital care.

This has included a mandate to introduce community rehabilitation teams, that offer a service in people's own homes, or other supported accommodation where additional support may be required longer term.

Therefore, the Trust has been piloting community rehabilitation in the west of the county (Lincoln and Gainsborough), using national transformation funding, to understand the impact.

With the temporary closure of Ashley House, this service was temporarily expanded to cover the southwest of the county (Grantham area) too, using some staff who had been working at Ashley House.



What is low dependency open rehabilitation?

Ashley House in Grantham and Maple Lodge in Boston both care for patients with severe and lasting mental illness, who have likely had significant periods in hospital to help manage their symptoms.

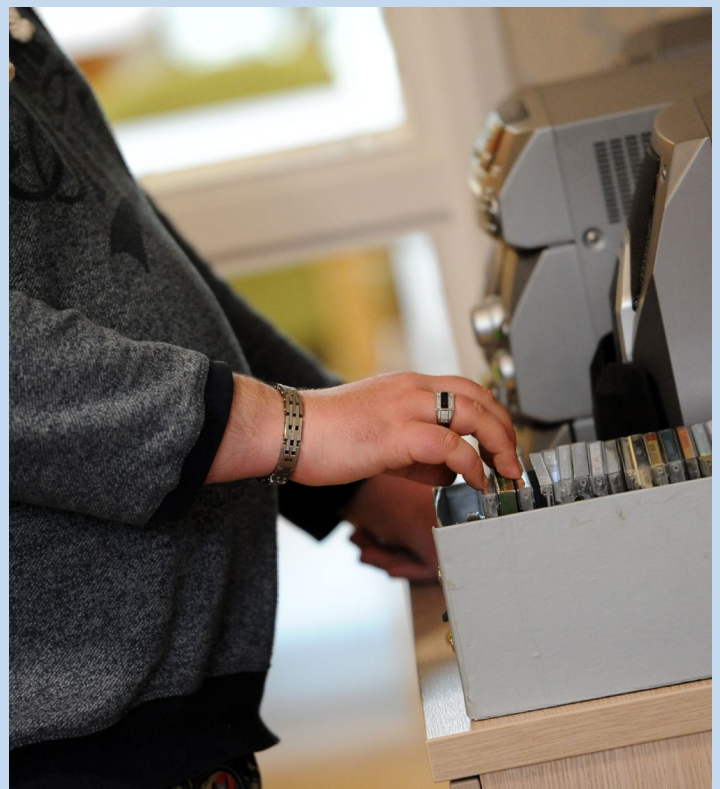
The teams provide support in people's recovery just before they move back into their community to live. This service is provided 24/7, all year round and patients live on the unit with round the clock staff support.

Support includes encouraging and supporting people to become as independent as possible, by building life skills such as cooking, budgeting, self-care, managing medication and finding activities and hobbies that can help them stay well.

The unit is not locked, and people can come and go as they please. Staff are on hand to monitor how people are getting on and are available to offer support with accessing their local community and working with other teams and partners to make sure everything is in place for discharge such as accommodation, benefits, and other support.

Historically, patients have been referred to open rehabilitation beds from either high dependency rehabilitation wards, or acute mental health wards, when they are ready to step down to a lower level of care, just before discharge back into the community.

Lincolnshire's higher dependency rehabilitation care is currently provided at Discovery House in Lincoln. Adult acute mental health wards are provided in Boston (Ward 12), Lincoln (Peter Hodgkinson Centre) and Sleaford (Ash Villa).



What is community rehabilitation?

Similar to the rehabilitation units in Boston and Grantham, the community team support people with severe and lasting mental illness, who have likely had significant periods in hospital.

The team support people following discharge from hospital and help them rebuild their confidence and control of living independently at home. They have smaller caseloads than some other community teams, allowing them more time to spend with individuals and work on specific rehabilitation goals. This service is available seven days a week, between 8am and 8pm.

Referrals come from the Trust's higher dependency rehabilitation wards, or the open rehabilitation unit at Maple Lodge in Boston, as well as the adult acute wards where the team may be able to support earlier discharge and avoid any additional need to stay in hospital for rehabilitation care.

The team also work with people who are currently receiving specialist rehabilitation support outside of Lincolnshire, to help bring people back into the county for their care as soon as possible. As well as working with local community teams to prevent admission to hospital and the breakdown of any local social care support arrangements.

The community rehabilitation team provide the same care and support as Ashley House in Grantham provided, but in people's own homes – they help people find strategies to help reduce stress and manage challenging circumstances whilst at home, as well as help finding and being part of activities, groups and events in the community. They also help people improve and maintain relationships with family members, carers or other support networks.

They help integrate people back into the community, and work with other community mental health teams or GP practices to support people longer term once settled.



"Supporting people's needs after they have been discharged from hospital to their home environment makes sense as you are teaching them to use their own equipment such as an oven and cooking for themselves or a small family, rather than generic ward equipment and cooking for 15 plus people. Doing this at home promotes person centred care and makes it easier to replicate without practitioner support."

Quote from staff member in community rehabilitation

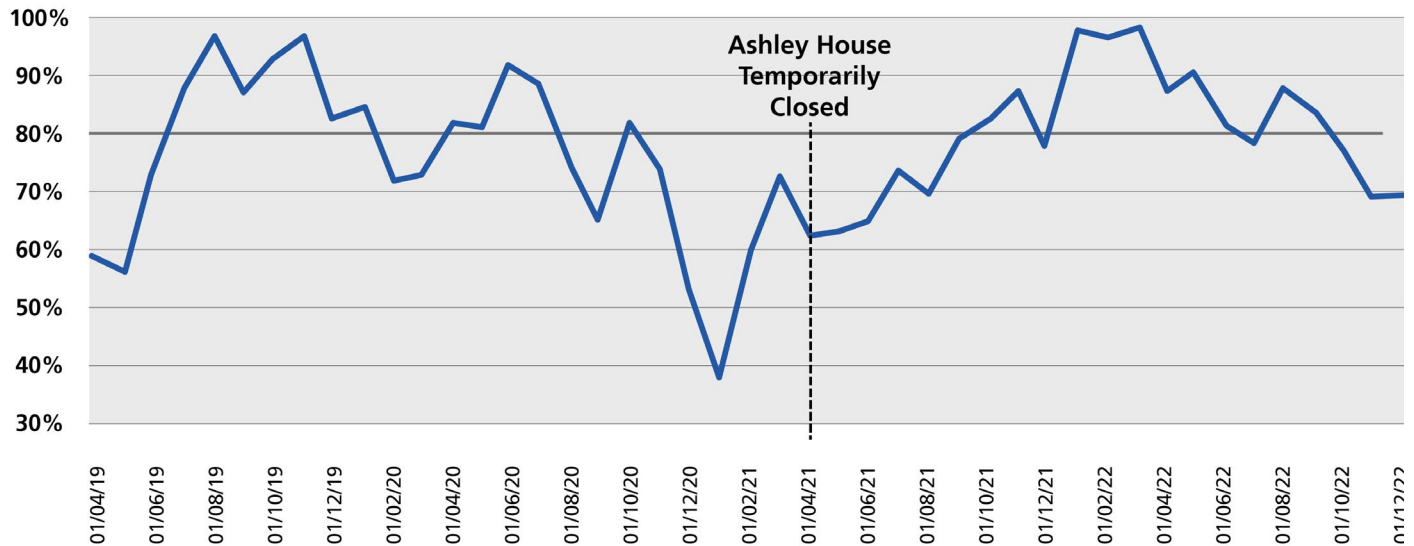
Impact to date

Despite the temporary removal of beds at Ashley House, Maple Lodge has not filled all its beds over the last three years, and there has been no

need for any patient to travel outside the county to receive this level of support.

Maple lodge Bed Occupancy - Starting 01/04/19

Baseline calculated on first 12 values



Maple Lodge, with community rehabilitation and social care support has been able to meet the existing need in Lincolnshire over the last 23 months. Current demand and capacity planning also suggests this trend will continue in the future.

Feedback from patients has remained positive about the service they have received, with Maple

Lodge maintaining 100% positive feedback on their friends and family test surveys and positive feedback being received by the community rehabilitation service. The team have also received positive feedback from those who have used and helped develop the new community rehabilitation service through our patient forums and in the engagement events done to date as part of the development of this proposal.

"Community rehab have been fantastic help and support to get back into community and start living at home again with decorating, going shopping, meeting new people and health eating. Staff are fantastic"

Quote from patient

"We have been able to hold a caseload collectively larger than a ward bed capacity. Also the goals that we can work towards are more realistic to real life and achieving a greater sense of wellbeing. The feedback that I have had is that we have been able to offer more dedicated one-to-one support to people than they have received on a ward."

Quote from staff member in community rehabilitation service

Proposals for the future

Like many NHS organisations up and down the country, we are working hard to transform services so that they are better for patients and deliver the right care, in the right place within the resources available.

This is a difficult balancing act, especially in a large area such as Lincolnshire where many people's homes are spread across the countryside and in small villages. The development of increased community support aligns with

national, regional and county priorities to provide greater support direct to people's own homes and communities and reduce the number of people unnecessarily admitted to hospital.

The Trust and commissioners have therefore been considering two options following an analysis of demand, patient outcomes and feedback on how the community rehabilitation service has been working since the temporary closure of Ashley House. ***This includes:***

1 **Reopening Ashley House as a 15 bedded open rehabilitation unit, but not expanding the community rehabilitation service to the rest of the county.** There is currently not enough resource or demand to have both the countywide community rehabilitation service and two low dependency mental health rehabilitation units in the county.

2 **Permanently closing Ashley House as an inpatient unit and reinvesting the resource into the community rehabilitation service to provide a countywide service.** Patients will either receive their care via the community rehabilitation service in their own homes, or at Maple Lodge in Boston if a hospital stay is still required. ***(This is our preferred option).***

We have seen during the temporary closure of Ashley House, that with the introduction of community rehabilitation support there has been less need for these type of rehabilitation beds in the county. The remaining unit in Boston has rarely been full and no one has had to travel outside of Lincolnshire to receive this type of rehabilitation care.

With the closure of one of the county's low dependency mental health rehabilitation units, the Trust would have the resources to significantly expand the community rehabilitation service to the entire county, without any additional cost to the Lincolnshire health and care system, further reducing the need for people to receive care in hospital.

When choosing which unit would be most appropriate to close, Ashley House is highlighted

by the Care Quality Commission as not currently fit for purpose. Its design and layout are outdated, and it does not allow appropriate privacy and dignity for both the males and females it provides a service for. Maple Lodge however, is able to meet the modern standards required and continues to be improved to improve patient experience. If the unit is reopened further investment would need to be sought to bring Ashley House up to the required standards as soon as possible.

The community rehabilitation service would continue to support patients who were previously admitted to Ashley House and would have further capacity to help more people live independently in other parts of the county, rather than them travelling to one of the units in Boston or Grantham and having to have an extended hospital stay.

Clinicians also believe that a community rehabilitation service is an essential part of the range of services we should offer to patients and feel that this would help those in more higher dependency rehabilitation units be able to move more quickly through to community-based living, including those being cared for outside of Lincolnshire.

Both Ashley House and Maple Lodge both provide a service to the entire county, not just to those in their local area. There is an acknowledgement that given its locality, any permanent closure of Ashley House might mean that a small number of Grantham residents may need to travel further than previously to the alternative unit in Boston if this was required. However, many may need to travel less with the support of community rehabilitation.

This would affect less than 14 people over three years – or around 5 people a year.

If the Trust was to reopen Ashley House and restore the previous service, the community rehabilitation service would return to being only able to offer a service in the west of the county (Lincoln and Gainsborough) until alternative funding and staffing sources could be found.

Initially, the unit would have to remain temporarily closed until sufficient staffing could be recruited to reopen. Many of the staff who previously worked at Ashley House during their redeployment have applied for and been successful in getting alternative permanent roles across the organisation, affecting the staffing available to immediately reopen the unit.

Staffing across the adult inpatient services is a significant challenge, both locally and nationally, and this has led to the Trust also recently temporarily closing the psychiatric intensive care unit in Lincoln to support safe staffing. The Trust would however be proactive in its approach to recruiting the staffing required across the division to reopen Ashley House, alongside the psychiatric intensive care unit as soon as possible.



	Option 1: Reopen Ashley House	Option 2: Permanently close Ashley House and expand the community rehab service across the whole of Lincolnshire
Ashley House	<p>Patients will receive inpatient care in Grantham and limited community support following discharge.</p> <p>People will travel to either Grantham or Boston from anywhere in the county to receive low dependency mental health rehabilitation hospital care.</p>	<p>Most patients will receive care previously provided by Ashley House in their own homes and communities.</p> <p>Majority of patients will not have to travel to receive care, except for a small number of patients a year who may still require hospital services and will need to travel to Boston.</p>
Community Rehabilitation Service	Limited to the west of the county until further funding and staffing could be sourced.	Available across the whole of Lincolnshire.
Maple Lodge	<p>Patients will receive inpatient care in Boston and limited community support when ready for discharge.</p> <p>People will travel to either Grantham or Boston from anywhere in the county to receive low dependency mental health rehabilitation hospital care.</p>	<p>Maple Lodge will continue to take patients from across the county.</p> <p>The unit has the capacity to meet the demand for patients requiring hospital based low dependency mental health rehabilitation.</p>

These proposed changes do not affect the wider adult acute and urgent care services.

This consultation will gather public, service user, carer, staff and stakeholder views on both options above, including our preferred proposal of permanently closing Ashley House and expanding the community rehabilitation service to a county wide service.

Supporting information

Bed capacity

Maple Lodge and Ashley House as a combined service, offered support for up to 30 patients at a time.

During Ashley House's temporary closure this has been reduced to 15 beds at Maple Lodge, but additional support has been added with the new community rehabilitation team covering the west and southwest of the county, with a current caseload of 40 patients. Meaning capacity for this type of rehabilitation care has increased by 83% to being able to support 55 patients during this period.

The community rehabilitation service also offers intensive in-reach to a further 20 people who are still in hospital settings, preparing for discharge. Prior to the temporary reduction in beds, both units had very rarely been full. With occupancy between 1 April 2019 to 1 February 2021 averaging below 90%.

No one has had to travel outside of Lincolnshire for this type of care during the temporary closure.

Travel

As these services are a countywide provision, rather than for a local population, many of the patients receiving care in the units are not from the local area.

In the three-year period prior to the temporary closure of Ashley House, of 52 admissions, 14 were from the Grantham and surrounding area, with 8 from Grantham itself.

This means 73% of patients being cared for were from other areas of the county and had to have travelled to Grantham to receive care.

The proposed permanent closure of Ashley House would mean that a small number of Grantham and surrounding area residents, expected to be around 5 patients a year would need to travel to the twin unit in Boston, at Maple Lodge for open rehabilitation hospital care if it was felt that this was still required.

Patient admissions to Maple Lodge in three-year period prior to closure



Patient admissions to Ashley House in three-year period before closure



This would only be the case if it was felt that they were not quite be ready for community rehabilitation just yet, and would be for the least time possible, before they were transferred over to the community rehabilitation service for support.

Equally, approximately 12 people per year would need to travel less, as they would be able to receive their care from the community rehabilitation team in their local area rather than travel to a unit in Boston or Grantham.

Patients required to travel to Maple Lodge in Boston would be supported with transportation to the ward and we'd like to gather the views of carers, families and friend as part of the consultation on what additional support may be required to support regular contact with their loved ones should they need to be in hospital away from their local community.

Patient experience

Patient's experience of the community rehabilitation service has been consistently high and the team have received positive feedback from those who have used and helped develop the service.

The Trust has also not seen a deterioration in the general experience of people requiring rehabilitation support during the closure. With no key themes highlighted in patient experience feedback.

The community rehabilitation service is currently in the process of collecting impact data to demonstrate the ongoing effectiveness of the service, however anecdotally people have found the service beneficial and liked being back in their communities with additional support.

Financial

If the decision was to permanently close Ashley House, the funding from providing this unit could be used to expand the community rehabilitation service to meet the needs of the entire county, with no additional funding required.

A remaining balance of around £33,000 would also be available to support with the return of other rehabilitation patients receiving care outside of Lincolnshire, which would potentially make savings for the Lincolnshire health and care system in the future.

This does not take in to account any future savings from the maintenance or running of the building, which would remain in place until separate consideration can be given on future use of the estate.

Should the decision be to reopen Ashley House, the community rehabilitation service would remain only able to support one third of the county, until additional funding could be sourced.

"Not going to lie, your team is the best service ever. If it wasn't for you, I would be really ill again. I like the fact we can just be and do different things not having to talk about things all the time. I mean like going out for coffee or a board game. I like that it's the same people and they listen and understand. It's helpful to get back to normal and do things in the community and try to be normal again. When you're just discharged then things can go around in circles"

Quote from patient

Sharing your views

Further to our consultation events below we would also like to invite you to share your views and complete our survey.

You can find our survey at <http://bit.ly/MH-Rehab-Transformation> or by scanning the QR code



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If you would like to attend one of our consultation events please contact us to book a place or alternatively you are welcome to turn up on the day.

You can express your interest by emailing: lpft.involvement@nhs.net or calling 01529 222245 or 07773 206341



What happens to the responses?

All feedback will remain confidential and all information you provide will be processed in accordance with the Data Protection Act and GDPR. The outcome of the consultation is an important part of the decision making and will be fully taken into account alongside other essential factors such as clinical, financial and practical considerations.

The feedback will be fully recorded, incorporated into a report and shared with various groups and committees. These will include:

- Executive Team at Lincolnshire Partnership NHS Foundation Trust
- Board of Directors at Lincolnshire Partnership NHS Foundation Trust
- Council of Governors at Lincolnshire Partnership NHS Foundation Trust
- Health Scrutiny Committee for Lincolnshire
- Executive Team at NHS Lincolnshire Integrated Care Board

The final proposal will be considered by the Executive Team at NHS Lincolnshire Integrated Care Board to ensure support before a formal final decision is taken by the Board of Lincolnshire Partnership NHS Foundation Trust.

More information

This consultation document is designed to give you enough information to be able to consider our proposal and give your views about the permanent closure of Ashley House and expansion of community rehabilitation service.

Some additional documents are available on the Trust's website www.lpft.nhs.uk/MH-Rehab-Transformation should these be helpful, or you are welcome to contact us with any specific questions you may have.

If you would like further information please contact:

The Participation Team

Email: lpft.involvement@nhs.net

Phone: 01529 222245

This document is available in other languages and formats.

To request alternative formats or if you require the services of an interpreter, please contact us on 01522 222245, Monday – Friday 9am – 5pm or email us at lpft.involvement@nhs.net

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