

East Ayrshire CHP Committee

2 November 2009

Subject:	Potential Service Development Opportunities at East Ayrshire Community Hospital
Purpose:	To receive report from the Officer Locality Group on options for future use of East Ayrshire Community Hospital.
Recommendation:	The CHP Committee is asked to approve, in principle, the options for the future use of East Ayrshire Community Hospital and to support the proposed next steps.

1. BACKGROUND

- 1.1 The CHP Committee, on 24th August 2009, received a paper on potential service development opportunities at East Ayrshire Community Hospital.
- 1.2 The CHP Committee asked the Officer Locality Group, at its meeting on 11th September, to consider options for future service provision at the hospital and to report back to the CHP Committee.
- 1.3 The CHP Committee remitted the Forum to provide a partnership view on feasible options as part of the consultation process.

2. CURRENT POSITION

- 2.1 The Officer Locality Group, on 11th September 2009, received a joint report from Head of Service, Community Care, East Ayrshire Council and Health Care Manager, Communities and Partnerships, NHS Ayrshire & Arran, which outlined options for future use of accommodation at EACH. The report identified two services for potential provision:
 - Community Dental Services, comprising independent dental practitioners and community dentists;
 - East Ayrshire Council Day Service for Frail Older People.
- 2.2 The report also highlighted the potential for East Ayrshire Community Hospital to be a hub for community rehabilitation, supporting integrated working between community hospital and domiciliary services; and as base to develop a Health Promoting Health Service site. It was highlighted that these initiatives could be

taken forward without the requirement for dedicated space in the hospital.

- 2.3 The OLG was advised that capital funding had been secured for the Community Dental Services and that capital funding for the East Ayrshire Council Day Service for Frail Older People could be made available, subject to appropriate bid and approval from East Ayrshire Council's capital resources for 2010/2011.
- 2.4 The Officer Locality Group then gave detailed consideration to the potential benefits of providing dental services and day services on the EACH site. A Health Economist from NHS A&A provided information to support this work and gave an overview of six criteria against which to assess the benefits of each service.
- 2.5 The purpose of the exercise was not to assess the relative merits of one option against the other, but rather to consider, in each case, whether EACH would be an appropriate location for the potential service development, to support the overall decision making process.
- 2.6 After detailed consideration of the criteria, the Officer Locality Group concluded that both options offered significant benefits and as such the OLG would support the provision of both services on the site.
- 2.7 No further suggested services were identified as being suitable to locate on the site at the present time.
- 2.8 At the time of the Officer Locality Group meeting it was not known how much space may become available on the site through any potential reduction in inpatient beds. It was therefore agreed that, if the available space was sufficient to accommodate only one of these services, then the Officer Locality Group would require to give further consideration to the options, including undertaking a formal option appraisal exercise if required.
- 2.9 At the CHP Forum on 22nd October 2009, the outcome of the Officer Locality Group meeting was reported to the group by the Health Care Manager, Communities and Partnerships.
- 2.10 The Forum supported the two options identified and expressed the view that both services should be located on the site if possible.
- 2.11 Forum members further advised that they were satisfied with the communication and decision making processes involved.
- 2.12 The Forum was also advised of the outcome of the review of current inpatient service requirements on the site, which indicated:
 - a potential reduction in the frail elderly service from 25 to 20 places
 - a potential reduction in the Elderly Mental Health (EMH) service from 25 to 16 places.

This would reduce the combined bed complement of both services from 50 to 36. Detailed development of these proposals is now underway, including consideration of the resource transfer implications.

3. PROPOSALS

- 3.1 It is proposed to take forward the capital planning implications of reducing the size of the current EMH and inpatient ward areas and the feasibility of locating both dental services and integrated day services on the East Ayrshire Community Hospital site.
- 3.2 The first priority will be to ensure that the reconfigured ward space is suitable to meet the needs of the current in patients.
- 3.3 A further priority will be to maximise the opportunity for integrated working in any new configuration.
- 3.4 Thereafter business cases and funding proposals will be taken forward within NHS Ayrshire and Arran and East Ayrshire Council.
- 3.5 It is intended that the initial decision making processes will be concluded by December 2009, in order to meet the timescales for utilising the capital funding available for the dental development.

4. CONSULTATION

- 4.1 Staff and community engagement will continue through staff meetings on site, the CHP Forum and with the wider community.
- 4.2 The CHP Forum will receive a presentation on the existing and proposed services at East Ayrshire Community Hospital site at the next meeting on 2nd December. This meeting will take place at EACH and CHP Committee members will be invited to attend.

5. RESOURCES

- 5.1 Capital: as previously reported.

Revenue consequences will require to be identified as part of any Business Case submitted for consideration to NHSA&A and East Ayrshire Council.

6. CONCLUSION

- 6.1 The Community Health Partnership Committee is asked to:
 - a. approve, in principle, the options for the future use of East Ayrshire Community Hospital.
 - b. support the proposed next steps.

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