

# **EAST AYRSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP**

## **INTEGRATION JOINT BOARD: 29 AUGUST 2018**

### **KIRKLANDSIDE HOSPITAL – REPROVISIONING**

#### **Report by Senior Business Support Manager**

#### **PURPOSE**

1. To update the IJB of the reprovisioning of Kirklandside Hospital and associated services from the current site on the outskirts of Kilmarnock.
2. This report provides an update to the IJB in relation to:-
  - i. Kirklandside Hospital's proposed replacement of NHS based complex care with a Housing / Hospital at Home Model;
  - ii. An update on the services currently provided at the Kirklandside Day Hospital, Community Rehabilitation Centre and in particular;
  - iii. This report also sets out the proposals for the relocation of 88 employees and their respective service bases from the Kirklandside Hospital Site to 4 alternative sites.

#### **BACKGROUND**

3. Following the reports to the East Ayrshire Integration Joint Board on 14 June and 30 November 2017, this report provides an update on the proposed replacement of NHS based complex care with a Housing / Hospital at Home Model; an update on the Community Rehabilitation Centre and the relocation of service bases.
4. The Rowallan Ward was the final inpatient provision at Kirklandside Hospital and was closed in 2016 due environment challenges that impinged on patient care. A Stakeholder Reference Group was convened in January 2017 to oversee and agree a public engagement plan in respect of future service provision. The engagement plan ensured that potentially affected people were aware of the planned timetable for engagement, reasons for change and background information. Key work of the group included the development of options and options appraisal process in line with Scottish Government CEL 4 Guidance.
5. After carefully considering stakeholder feedback on how best to re-provision this service, the group overwhelmingly agreed a new 'blended' housing model of care which will make services available closer to people's own homes and communities. It will include clustering of a supported housing and hospital at home approach, with peripatetic multi-disciplinary teams providing care when needed. There will be effective anticipatory care planning combined with ever advancing technology enabled care products to keep people at home or in a community setting and importantly avoid hospital admission and lengthy hospital stays.
6. In the interim 10 in-patient beds have been commissioned at Woodland View from NAHSCP for the next 2-3 years to allow EAIJB to carry out the feasibility study and develop the housing option with housing colleagues. The design of the housing option is underway and the architect is working on the design to meet requirements over the summer of 2018. The Strategic Housing Investment Plan (SHIP) 2018 – 23 allows for the development of this model with an indicative 30 new homes in year two, 2019/20.

7. The Kirklandside site also accommodates the Community Rehabilitation Centre (often referred to as the Day Hospital). This is a consultant led multi-disciplinary rehabilitation for people over 65 with complex care needs. The service promotes optimum level of function through therapeutic programmes such as the Falls Clinic. The service is provided Monday – Friday from 09.00 until 16.30.
8. A review of the service was undertaken in 2017 and the Stakeholder Reference Group followed the same process outlined above. The engagement plan ensured that people who used the service as well as the wider public had an opportunity to give their views on current and also future service development.
9. After carefully considering stakeholder feedback on how best to deliver rehabilitation services in the 21<sup>st</sup> century, the group overwhelmingly agreed on a mobile community model where the service can be delivered in a community rather than a hospital setting.
10. A community approach is currently being developed and a test of change is due to start in summer 2018 to take forward this way of working. By taking an incremental approach there is an opportunity to consider what works well and any areas for improvement.
11. The third element on the Kirklandside Site is a Service Base for Intermediate Care; Physiotherapy and OT Community Rehabilitation; Community Alarms; Health Promotion; Dietetics and Business Support Services. To declare the site surplus to requirement will require the relocation of 88 NHS and Council employees, and their respective service bases, from the Kirklandside Hospital Site. Plans are being progressed to utilise 4 alternative sites.
12. The most significant proposal is to relocate the 62 employees, and their respective services equipment, to the Old Kirkstyle Primary School which will require minor alterations and the installation of additional network cabling and electrical points to support this move.
13. It is proposed to take the opportunity to colocate a total of 21 employees with other senior management at the existing Balmoral Road Office in Kilmarnock.
14. The Allied Health Professional Service has a Podiatry Team based in the Kirklandside Hospital Site and the proposal for these 4 employees is to relocate these employees to a currently unused office in Treeswoodhead Clinic.
15. The relocation to The Johnnie Walker Bond is for the Community Health and Care Service Manager responsible for Intermediate Care and Rehabilitation, currently based at the Kirklandside Hospital Site.

## **PEOPLE WHO USE SERVICES AND CARERS IMPLICATIONS**

16. The 4 Mobile Personal Carer Services; Home from Hospital Team; Intermediate and Care Enablement Team; Community Alarms Team; and Out of Hours Team are all currently run from the Kirklandside Hospital Site 24 hours per day, 7 days per week and the proposals in this report enable this provision to be continued, without interruption or delays to the current level of service provided, to the residents of East Ayrshire.

## **FINANCIAL IMPLICATIONS**

17. The total one off revenue expenditure for the above 4 proposals is £160,496 and the total recurring revenue expenditure is £68,698 per annum and the detail of this expenditure is contained with the appendix to this report.

## **HUMAN RESOURCE IMPLICATIONS**

18. Liaison is also ongoing with NHS and EAC HR Services in relation to their respective Organisational Change Polices and this relocation was also discussed at the EAHSCP Partnership Form Meeting held on 9<sup>th</sup> August 2018.

## **POLICY/LEGAL IMPLICATIONS**

19. There are no direct implications however the report supports the key priorities as detailed in the Strategic Plan 2018/21 in respect of developing new models of care for rehabilitation and re-enablement which seek to deliver services closer to home and within local communities, where possible.

## **COMMUNITY PLANNING IMPLICATIONS**

20. There are no direct implications.

## **EQUALITY IMPLICATIONS**

21. There are no direct implications and EQIA was completed as part of the engagement and consultation phase.

## **RISK IMPLICATIONS**

22. There are risk implications of any proposals in this report not being approved through the respective NHS and EAC Governance routes resulting in the employees and service bases remaining at the Kirklandside Hospital Site until the issue(s) are resolved and the resultant impact on the progress anticipated in the NHS Transformation Plan.

## **RECOMMENDATIONS**

23. It is recommended that Members:
- (i) Note the proposals outlined in this report;
  - (ii) Note that this report is being presented to NHS Ayrshire & Arran's Corporate Management Team; Estates, Environmental and Sustainability Group and Capital Programme Management Group for budgetary approval;and
  - (iii) To otherwise note the content of the report.

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**8 AUGUST 2018**

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