



**REPORT TO:** East Lothian Integration Joint Board

**MEETING DATE:** 25 August 2016

**BY:** Chief Officer

**SUBJECT:** Belhaven Hospital

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## **1 PURPOSE**

- 1.1 This report asks the Integration Joint Board (IJB) to agree a process regarding Ward 2 at Belhaven Hospital.

## **2 RECOMMENDATION**

- 2.1 That the IJB agree to the proposed process to manage the issues around Ward 2 at Belhaven Hospital.

## **3 BACKGROUND**

- 3.1 There has been recent media coverage of concern for the future of Belhaven Hospital in Dunbar.

- 3.2 The IJB directions which emanate from the strategic plan indicates the following direction to NHS Lothian:

*D01.c Continue to support and progress a dedicated programme of analysis and work to review bed bases in Edington and Belhaven Hospitals and bring forward a range of option appraisals and proposals to the IJB by December 2016 which consider alternative models of care and re-provision and which fully recycle the aligned financial and human resources within East Lothian. The options appraisal should recognise the need for enhanced intermediate care, respite care and end of life care provision and will include the delivery of minor injuries services at Edington Hospital.*

- 3.3 The background work on this direction has started with the setting up of a joint management group to assess future needs for beds and housing with care in East Lothian which will give a view of the number of beds and places required in each area.

- 3.4 However there are immediate concerns about Ward 2 at Belhaven Hospital.

- 3.5 Belhaven Hospital has three wards. Ward 1 has 11 beds and provides nursing home care purchased by East Lothian Council. Ward 2 has 12 beds and provides direct access beds for local GPs. Ward 3 has 11 beds and provides a mix of NHS long term care and nursing home care.
- 3.6 Wards 1 and 3 have single rooms and good facilities for patients and visitors and are registered with the Care Inspectorate. Ward 2 has open multi bed bays, inadequate bathroom and hand washing facilities and poor facilities for visitors etc.
- 3.7 In addition the development of Hospital at Home (IJB direction DO6) through the Integrated Care Fund is increasingly providing nursing and medical services at home for older people instead of hospital admission. This includes some of the types of patients admitted to Ward 2 at Belhaven.
- 3.8 These two factors have led to consideration of the potential to cease to use Ward 2 for GP admissions and to accommodate GP admissions in Ward 3.
- 3.9 Following discussions of these issues with local GPs and staff at Belhaven Hospital in June 2016 there has been media attention and the establishment of a "Campaign Steering Group" to "save ward 2".
- 3.10 It was agreed with the GPs and staff that a working Group should be established to review GP admissions and reach a view about the number of beds needed for the future in light of hospital at home and other factors.
- 3.11 The working Group will hold its first meeting in early September 2016 and should report in October 2016.
- 3.12 The following approach is proposed to public engagement and decision making on this issue.
- 3.13 That the "Belhaven Forum" should be re-established. The forum existed at the time of the former Older People's Strategy from 2011 to 2013 and included community councils, staff, GPs, friends of the hospital, elected members, representatives of various organisations such as day centres etc.
- 3.14 The membership would be refreshed to take account of changes such as the establishment of Area Partnerships.
- 3.15 The forum would serve as the public engagement vehicle on Ward 2 and the longer term future of the Hospital.
- 3.16 The Working Group would be chaired by the Clinical Director and would engage the forum in its recommendations. The working group would report to the IJB.

#### **4 POLICY IMPLICATIONS**

4.1 There are no policy implications of the paper.

#### **5 INTEGRATED IMPACT ASSESSMENT**

5.1 This report does not have any immediate implications. Any proposals coming forward would have an integrated impact assessment carried out and the forum would be involved in that work.

#### **6 RESOURCE IMPLICATIONS**

6.1 There are no immediate resource implications of this paper.

#### **7 BACKGROUND PAPERS**

7.1 None.

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