
Report To: Health & Social Care Committee **Date:** 1 December 2009

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Subject: Mental Health Service Redesign – Progress Report

1.0 PURPOSE

- 1.1 This report outlines progress made in developing proposals for the reprovisioning of Mental Health Services currently provided on the Ravenscraig Hospital site to a new facility on the Kempock site in Gourrock which will meet the NHS continuing care and Local Authority residential care requirements on the closure of Ravenscraig Psychiatric Hospital.
- 1.2 Following the issuing of a PIN notice to identify market interest approval is sought to proceed with the formal process of procurement.

2.0 SUMMARY

- 2.1 The closure of Ravenscraig Hospital has been formally agreed by the Scottish Government.
- 2.2 Considerable preparatory work has been undertaken by both NHS GG&C and the Council's Officers to explore the scope and viability of the proposed development to replace the current inpatient continuing care wards for adults and older people suffering from a mental illness.
- 2.3 This has resulted in proposals as follows:-

Agreement to jointly commission an external partner organisation to provide on one site in Inverclyde a new build development to the highest environmental and care standards providing:-

- 33 NHS continuing care beds for older people with mental ill health.
- 10 NHS continuing care adult mental health beds
- 24 specialist care home places for older people
- 8 residential adult beds
- 2 NHS funded further adult crisis response beds.

Circa £2.8m annually will be transferred to the CHP and Inverclyde Council when the new facilities are available.

- 2.4 In terms of the procurement process, consideration of both restricted procedure and competitive dialogue has taken place, and it is recommended that the use of the restricted procedure would be more appropriate given the scale of the capital element of the contract.
- 2.5 The Council and NHS Greater Glasgow & Clyde will contract separately for the bed configuration outlined earlier and options over 20/25/30 years will be considered for the purpose of financial viability and value for money as part of the tender process. As there is a finite financial envelope for this development this sum will be identified within the OJ notice to ensure affordable tender returns.
- 2.6 It is anticipated that the award of contract could be achieved by May 2010 and that the timescale for opening the new facilities is likely to be achieved by December 2011. A general timeline can be seen at page 10 of appendix 1.

Appendix 1

3.0 RECOMMENDATION

- 3.1 Note that a report relating to the disposal of the Kempock site will be presented to the next Policy and Resource Committee on 15 December 2009.
- 3.2 That the Council and NHS partners proceed to a full OJEU notice and that restricted procedure is adopted in selecting the successful contractor.
- 3.3 That the Council note the requirements for specialist care in a residential care home setting for 8 adult places and 24 older adult places to meet the needs of adults with mental health problems and that a further report will be submitted to members for detailed approval of the proposal based on the successful tender.

Barbara Billings
Head of Community Care and Strategy

4.0 BACKGROUND

- 4.1 The decision to close Ravenscraig Hospital has been formally agreed by the Scottish Government and the redesign proposals have been the subject of external scrutiny by the independent group led by Professor Angus McKay and confirmed as being appropriate.
- 4.2 This offers a once only opportunity to provide alternative services on a significant scale to meet both the current and projected needs of Inverclyde residents with long term mental health problems who would have been treated in a Psychiatric Hospital setting.
- 4.3 Members of the Health and Social Care Committee have previously received reports on the redesign of mental health services and the Regeneration Committee have approved the use of the Kempock site in principle for this important element of the re-provision. It is intended that a report relating to the property disposal aspects of the proposals to the next meeting of the Policy and Resource Committee on 15 December 2009.
- 4.4 Members have agreed a previous report which approves the procurement process and since then the PIN notice has been issued and a market awareness day took place on the 23rd October 2009. Of the 42 organisations who expressed interest in the proposed development 22 attended on the day. As the purpose was to determine whether there was sufficient interest, this has been confirmed.
- 4.5 The Information Guide for potential developer partners is attached at appendix 1 for Members interest, and includes an ambitious timescale with the objective of an operational service to be delivered by December 2011. A schematic of the proposal is also outlined in appendix 1 which indicates the possible extent of development within the site. It should be noted however that this is purely indicative and the final scheme will be presented to members prior to the award of contract. Appendix 1
- 4.6 The facilities identified for the site include a total of 77 beds comprising:
- Older People with Mental Health Problems
- 33 NHS Continuing Care Older Adults Beds
 - 24 Older Adults Care Home Places
- Adults with Mental Health Problems
- 10 NHS Continuing Care Adult Beds
 - 8 Adult Residential Places
 - 2 NHS funded Adult Crisis Response Beds.
- 4.7 Contracts will be agreed separately by the Council and NHS GG&C covering a period of between 20 and 30 years for the provision of high quality care services which will incorporate the necessary facilities management arrangements.
- 4.8 The next stage in the process is to proceed to the OJEU Restricted Notice inviting tender submissions. In order to proceed with the European Journal Notice the land (approximately 1.516 hectare site) will be made available at a cost to be determined by the Council for inclusion in the notice.
- 4.9 The finances related to the Local Authority contract are wholly funded from resources transferred by NHS Greater Glasgow and Clyde to Inverclyde Council, and will be made fully available on completion of the accommodation and initiation of the residential service contract.

The annual uplift to the resource transfer figure has been agreed for the coming year at 2.5%. Future years uplift will be subject to existing processes relating to resource transfer funds.

- 4.10 Although this report specifically relates to the reprovision of inpatient services it should be noted that in order to ensure effective support for people with mental health problems in the community enhanced services from the Older People's Mental Health Team, Adult Community Mental Health Team and Primary Care Team will all benefit from additional qualified staff.

The specialist Mental Health care provision delivered through third sector organisations locally will be further developed over the coming period and aligned to the reduction in bed numbers.

- 4.11 Important aspects of the care contract for the Local Authority include regular review which should occur at 3 to 5 year intervals to ensure services continue to meet user needs and to provide flexibility for adjustment. There is an opportunity to build in an element for social benefit at the preparatory stage and this will be incorporated in the tender evaluation criteria.

Further, a legal agreement between the Council and NHS Greater Glasgow and Clyde, will be necessary.

5.0 PROPOSALS

- 5.1 That the procurement process is undertaken utilising the restricted procedure and officers of the Council be remitted to progress the invitation of tenders for a 20, 25 or 30 year contract through the OJEU.
- 5.2 In selecting the provider organisations consideration will be given to the close relationship between services and the need for a well integrated service network which best meets the needs of our population.

6.0 IMPLICATIONS

- 6.1 Legal:

This is a significant piece of work for Legal Services and will require continuing legal advice over a protracted period.

- 6.2 Finance:

The cost of the development and ongoing care contract will be met from Resource Transfer funding from the NHS Greater Glasgow & Clyde of £1.3m per annum, with £1m relating to this contract and £0.3m relating to community resource.

It should be noted that any cost over run on the contract will be funded from the community resources funding.

Financial implications – one-off costs

Cost Centre	Budget Heading	Budget Year	Proposed Spend this Report	Virement From	Other Comments
Capital Works	Feasibility	2009/10	£25,000	n/a	Fund from receipt

Financial implications – annually recurring costs

Cost Centre	Budget Heading	Budget Year	Proposed Spend this Report	Virement From	Other Comments
		2010/11			
EMI	Annual Contract Costs Funded by: Resource transfer income Client Contribution		£857,333 (£729,288) (£128,045)		Subject to tender receipt and evaluation
Adult	Annual Contract Costs Funded by: Resource transfer income Client Contribution		£289,778 (£262,904) (£26,874)		
	Net Cost to the Council		Nil		

6.3 Personnel:

None.

6.4 Equalities:

The proposed developments offer vastly improved living and care arrangements for adults with mental health problems, a traditionally marginalised and excluded group.

7.0 CONSULTATION

7.1 The proposals for Mental Health Redesign have been subject to formal consultation. The public engagement process concluded on 3 July 2008, and current patients/families meet on a very regular basis with NHS staff directly involved in the commissioning process to ensure positive communication.

7.2 The Kempock development will require further consultation in relation to planning regulations.

8.0 BACKGROUND PAPERS

8.1 Health and Social Care Committee ref: SW/04/09/BM/BK

8.2 Policy and Resources Committee ref. SW/36/09/BMcL/AM

Inverclyde Council & NHS Greater Glasgow & Clyde
Residential Health & Social Care Services
High Level Information Guide for
Potential Developer Partners



- 33 NHS Continuing Care EMI Beds
- 24 Local Authority EMI Care Home Beds
- 10 NHS Continuing Care Adult Beds
- 10 Local Authority Residential Places



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The Purpose of High Level Information Guide

The purpose of this High Level Information Guide is to provide prospective developer partners with information regarding the Inverclyde Council and NHS GG&C proposals for Residential Health and Social Care Service Provision and the invitation to tender process.

Inverclyde Local Authority

Inverclyde is located in West Central Scotland and is one of the most attractive places in Scotland to live and work, with 61 square miles stretching along the south bank of the estuary of the River Clyde.

The area offers spectacular views and scenery, a wide range of sporting and leisure opportunities, a vibrant housing market and well developed transport links to Glasgow and the rest of Scotland.

Inverclyde is one of the smaller local authorities in Scotland, with a population of 81,540. The main towns of Greenock, Port Glasgow and Gourock sit on the Firth of the Clyde. The towns provide a marked contrast to the small coastal settlements of Inverkip and Wemyss Bay, which lie to the South West of the area, and the picturesque rural villages of Kilmacolm and Quarrier's Village which are located further inland.

A strong sense of community identity exists in Inverclyde and local residents are proud of the area and its history, which is steeped in centuries of maritime and industrial endeavour. We want to develop and enhance the strong community spirit that exists in Inverclyde.

Inverclyde is going through a period of transformation with improvements taking place in the physical infrastructure. Along the waterfront area old industrial sites are being cleared and new residential developments are being built with further leisure and retail facilities and opportunities being created. Elsewhere, new housing, new and refurbished schools and areas for development are being established that will help further renew and regenerate Inverclyde and more importantly, its communities.

Inverclyde Council is the democratically elected and accountable body for the area, focused on promoting a better quality of life for the people of Inverclyde. The Council delivers or facilitates a wide and diverse range of services to local communities such as education, social work, refuse collection, libraries, road maintenance and street lighting – it is also the largest employer in the area with almost 5,000 employees.

By working with our partners in the Health Service through Community Health Partnership, we are committed to improving the health and wellbeing of residents in Inverclyde, helping them to access appropriate services.

NHS Greater Glasgow and Clyde

In April 2006 the NHS Greater Glasgow and Clyde (NHS GG&C) was created following the dissolution of NHS Argyll and Clyde.

The NHS GG&C Board committed to build on the strengths of the previous NHS Argyll and Clyde plans, whilst reviewing them in the context of experience of developing comprehensive mental health services, both within the NHS GG&C area, and also throughout the UK. Since then, local joint health and local authority planning groups, involving service user representatives, have been working with frontline staff to review the way existing services are organised with a view to developing plans that will achieve service improvements and modernisation.

In particular, this work has looked at how best the Board can redesign current services to shift the balance of care more towards enhanced community services, which better meet individual's needs.

A Clyde Mental Health Strategy Group was commissioned to progress the overall development of the strategy. The strategy is based on a framework and principles applicable across the whole of the NHS GG&C area. The scope of the Strategy includes:

- Adult mental health services
- Older peoples mental health services
- Addictions inpatient services

In 2006 the then Scottish Executive Health Department (SEHD) set out in HDL 58 "A Policy on Design Quality for NHS Scotland" the requirement for all Health Boards to produce a Design Action Plan in recognition that good design in healthcare buildings makes a measurable difference to the experience of staff, patients and visitors.

NHS GG&C are committed to ensuring partnership residential and healthcare buildings are cornerstones within our communities. The concept of design established within the Action Plan has been defined locally and reflects the views of many stakeholders and partners. The definition is comprehensive and reflects a balance between the aesthetic and the functional, the ambience, the accessibility and the environment impact of new and refurbished buildings. The plan is also mindful of the need to ensure that projects deliver best value and that the overall affordability of the scheme is not compromised. The importance of good design is paramount to the development and delivery of efficient and effective health and social care services.

Partnership residential and healthcare buildings need to be functional, with the needs of patients, public and staff at the heart of this. Buildings should be fit for purpose, but also be flexible, progressive and adapt alongside advancing health care developments and the changing needs of the population. There should be an emphasis on therapeutic design which includes imaginative use of light, access to green space, intelligent arrangement of internal spaces and facilities, use of sustainable materials and the inclusion of art and creative activity. Partnership buildings should provide an environment that reduces anxiety, improves health, retains staff and encourages healthier habits.

Partnership buildings will be paramount to the effective and efficient delivery of 21st century health care, where the role of good design and a clear process to support good design will be a vital factor in ensuring the needs of staff, patients and the public are met now and in the future.

Clinical Strategy

The strategic imperatives outlined in the policy papers *The Scottish Framework for Mental Health (1999)*; *Modernising Mental Health (2000)*; *Delivering for Mental Health (2006)* and *Better Health, Better Care (2007)* provide the focus for ensuring that services are redesigned from a patient's perspective and across a whole pathway. Mental Health service delivery should be effective and efficient for patients and service providers.

Throughout the UK there has been a major shift away from providing long stay continuing care in hospital settings, towards providing the majority of long stay care in a range of community placements, supplemented by retention of a much smaller number of inpatient continuing care beds. Services in Inverclyde cannot be sustained in their present form and there is more to do to enhance, support and improve people's mental well-being and increase awareness that there is no health without good mental health.

For local achievement of a modern comprehensive mental health service consideration has been given to the best way that services can be redesigned to shift the balance of care more towards enhanced community services, which better meet individual's needs.

The strategic building blocks include:

- Development of community services;
- Closure and re-provision of long stay continuing care beds shifting the balance from hospital based care to long stay care in the community:
- Reconfiguration of inpatient services
- Specialist services development;
- Investment of resources released from the redesign of inpatient and continuing care services to fund the service developments set out above.

In summary, radical change and investment is needed to meet the needs of mental health service delivery in Inverclyde in the 21 Century, providing patients and carers with the high, quality, modern and dependable care that they and their carers have a right to expect.

Partnership Approach

This section provides a strategic overview of the joint arrangements between Inverclyde Council and NHS GG&C to select a developer partner for the provision of specialist residential and partnership beds to meet the needs of adults and older people with mental health needs. Also to put in context the preferred joint arrangements between Inverclyde Council and NHS to contract with a developer partner for this provision on the Kempock House site in Gourock.

This is a joint scheme made possible as a result of the planned Ravenscraig Hospital closure, and is a once only opportunity to provide alternative services on this scale to meet current and future needs of Inverclyde residents with significant mental health needs and who would previously have been placed in NHS continuing care wards on Ravenscraig Hospital site.

Inverclyde Council and NHS GG&C will each enter into separate contracts with the developer partner for the required provision but these will be jointly commissioned. It is proposed that the invitation to tender will include options of 20, 25 and 30 years for contract duration and each option will be assessed for financial viability and value for money in accordance with criteria stated in the tender documents. Each contract will be for the same duration.

Location of the Scheme

Use of the Kempock House site in Gourock is being considered by the local authority who owns the site as the location for the development. It is proposed that the land (approximately 1.516 hectare site) will be made available at cost to the developer to build the accommodation required.

Outline ground and site information will be made available as part of the tender process. Developer partners will be required to satisfy themselves in respect of site characteristics.

Overview of the Project

The Facilities Required

On the site Inverclyde Council and NHS GG&C will commission jointly but contract with the developer separately for bed contracts for 77 (45 NHS & 32 LA) bed places over a period of up to 30 years (exact term to be agreed) depending on affordability of the annual revenue costs for each bed.

The initial scheme projects are outlined as follows:

Older People with Mental Health Problems

- 33 NHS Continuing Care Older Adults Beds
- 24 Older Adults Care Home Beds

Adults with Mental Health Problems

- 10 NHS Continuing Care Adult Beds
- 10 Adult Residential Places

The Council requires fully inclusive service contracts for the provision of care home and residential beds.

Clinical services including nursing input will be provided directly by the NHS in continuing care beds.

Support Services

All other support staff (facilities, housekeeping, catering) will be provided by our developer partner or their agent.

We would like to secure a partner organisation that would be able to provide the building, equipment, facilities and care elements where they are required

Overview of the Project

Procurement Arrangements

Restricted Procedure has been agreed by Inverclyde Council and NHS GG&C. This will result in a PQQ exercise.

Project Brief

The facility will provide a platform for integrated service delivery between health, local authority and partners. It will support a partnership approach between service delivery bodies and the community they serve. There should also be consideration as to how the unit engages with the local community, creating opportunities for service users to remain in contact with their existing networks.

The design of the unit should be an integral part of the local community promoting social inclusion for both service users and staff.

The local authority and the health board are looking for a creative and innovative design approach to the scheme. Providing a dementia friendly environment throughout the facility will promote a holistic care setting that nurtures the client's spiritual needs and wellbeing.

Our joint vision is that the scheme will become an icon of quality whilst delivering a functional and efficient state of the art dementia friendly environment. Incorporation of the Dementia Design Audit Toolkit will be a requirement.

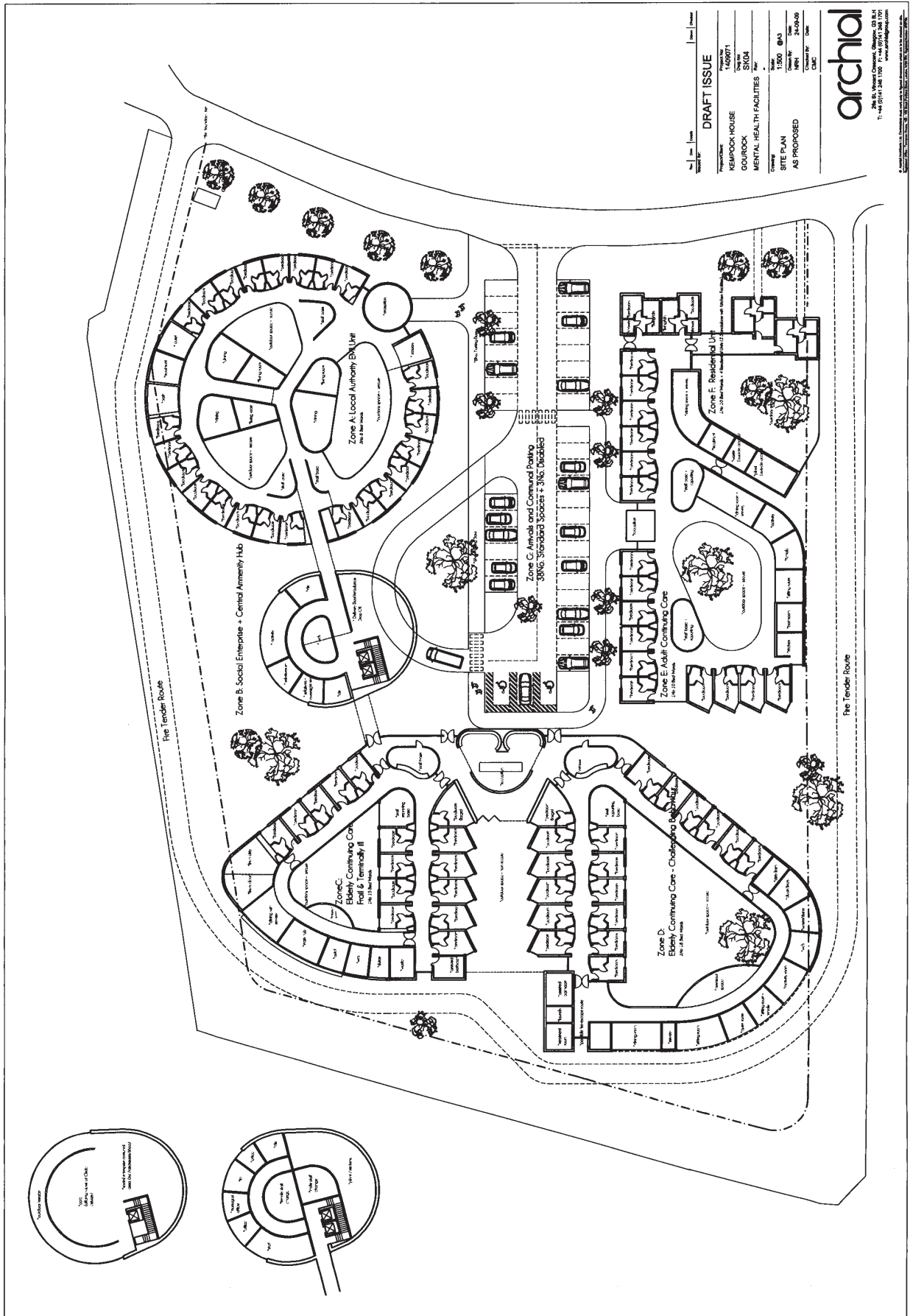
Sustainability and reduction of the local authority and NHS board's carbon footprint is important and the scheme will be expected to meet the BREEAM "Excellent" status. HAI-Scribe, AEDET and ASPECT reviews will be a requirement of the development process.

Overview of the Project

Outline Master Programme

It is anticipated that the local authority and NHS board will jointly appoint their preferred developer partner in line with the following timetable:

Action	Date
PIN Notice	29 September 2009
Market Awareness Day	23 October 2009
High Level Information Guide sent out	23 October 2009
Planning in Principle Consent – Application	14 November 2009
OJEU Restricted Notice – Call for Competition	1 December 2009
PQQ – Close	14 January 2010
Planning in Principle – Approval	3 February 2010
Invitation to Tender (ITT) – Close	14 March 2010
Assessment of Tenders – Close	30 April 2010
Contract Award	14 May 2010
Service Operational	1 December 2011



DRAFT ISSUE

Project No:	14/06/2011
Client:	KEIMPOCK HOUSE GOURROCK MENTAL HEALTH FACILITIES
Scale:	1:500
Issue No:	0/03
Issue Date:	03/06/2011
Issue Description:	AS PROPOSED
Author:	JACKSON
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