

Developing COVID-19 resilient services at Mile End Hospital,
including relocation of inpatient dementia assessment services to East Ham Care
Centre

Eugene Jones
Director Service Transformation

1.0 Introduction and Summary

- 1.1 The response to Covid-19, has created the need for emergency transformation of Healthcare services to protect patients and the public, unfortunately these urgent and unprecedented circumstances has meant it is not possible at this time to utilise the normal processes regarding service change, this would ordinarily involve full and thorough engagement of patients, public and the respective health and scrutiny committees.
- 1.2 We recognise our duty to protect the health, safety and welfare of patients, we also recognise our duty and the legal framework regarding proposed service change and the importance of engaging service users, the public and the respective health and scrutiny committees. In different circumstances we would be arranging briefings and stakeholder engagement events, however in this period of emergency response and rapid service change we are operating within a constrained timeframe and have tailored our engagement accordingly, to those directly affected, patients, their families and carers using the Columbia ward services and its staff.
- 1.3 The emergency transformation and urgent service change proposal of Columbia ward in response to Covid -19 detailed within this document is an interim arrangement for a period of 12 months.
- 1.4 The longer term arrangements for this service would be reviewed through full and robust engagement, patients and public, this will provide the appropriate checks and balances and fully consider the impacts, whilst observing the statutory legal powers of the respective health and scrutiny committees regarding any proposal for a longer term (non-emergency) service change.
- 1.5 The purpose of this document is to outline the service and clinical changes required on the Mile End Hospital (MEH) site in order to restart some services and continue providing safe and effective services in response to the continued threat and impact of Covid 19 this includes
 - the essential and urgent restructuring required on the MEH site to reduce the spread of any future infection
 - the risks associated with this change and the controls put in place to manage them
 - the process of engagement with patients, public and health scrutiny committees both now and in the future
- 1.6 East London Health Care Partnership (ELHCP) have proposed in their system-wide Covid-19 second phase planning submission to NHS London that Mile End Hospital (MEH) provide covid-protected services for extremely clinically vulnerable (shielded) patients.
- 1.7 Barts Health, in response to the continued threat of Covid -19 and at the request of ELHCP and in agreement within the ICS and NHS London, are to restructure services by introducing colour-coded zones, specifically creating a 'green' zone (Covid -19 free area) on the MEH site.

- 1.8 The Covid -19 free 'green' zone, planned for the MEH site is designed to keep patients, staff and family/carers safe, reducing the risk of cross infection and will allow the hospital to comply with social and physical distancing guidance and contain the spread of any future infection.
- 1.9 Managing and restricting the movement of staff and patients within the green zone will require stringent access controls, this will include staff deployed solely to work within the 'green' zone and patients access restricted to those with a confirmed Covid negative presentation. This approach is critical if we are to provide confidence to patients to attend essential appointments to keep them healthy and to identify and treat life-threatening conditions early.
- 1.10 This document identifies the rationale, proposed change and planned future location for Columbia ward, a 21 bed, Organic (Dementia) Assessment unit, that provides an inpatient function on behalf of all 3 CCG's (Newham, Tower Hamlets and City & Hackney), Columbia ward is currently located within the Bancroft Unit, MEH.
- 1.11 Barts Health provide a range of out-patient services on the MEH site, the remainder is leased to a variety of local partners that include NHS providers such as; East London NHS Foundation Trust (ELFT), GP - Care Group, Moorfields Eye Hospital.
- 1.12 ELFT provide a range of services on the MEH site including mental health community and inpatient services.

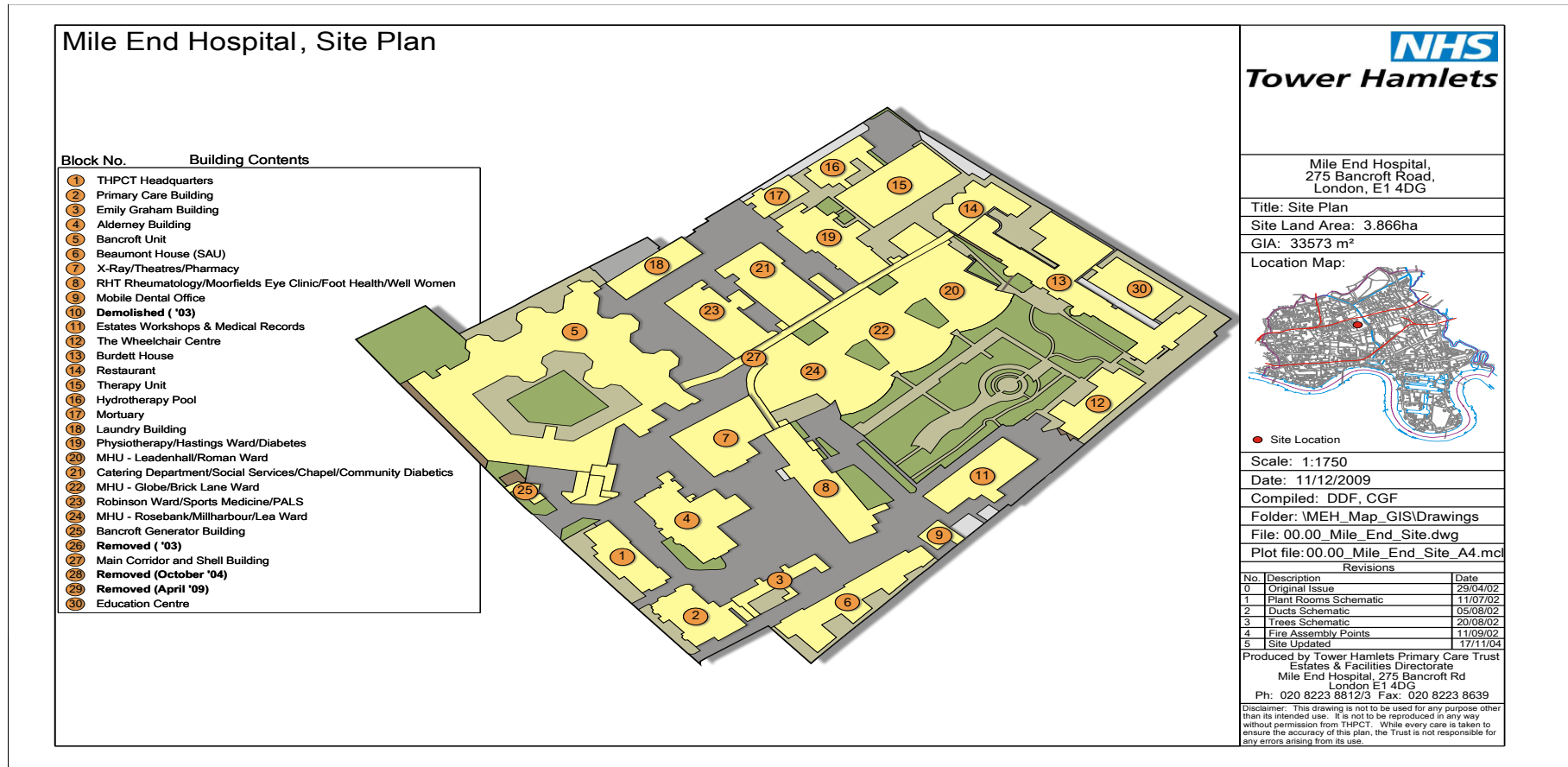
2.0 Service Proposal

2.1 The Green Zone at MEH is required to be a Covid-19 free area, this will ensure people in the clinically extremely vulnerable group can continue to safely access and receive treatment from the NHS services they need, it will have restricted public access and controlled staff movement. Patients will enter the 'green' zone at MEH via a dedicated entrance and exit. Specific checks and testing of staff working in the 'green' zone will also be undertaken.

2.2 The cohort of patients at risk 'clinically extremely vulnerable' is described by NHS England as:

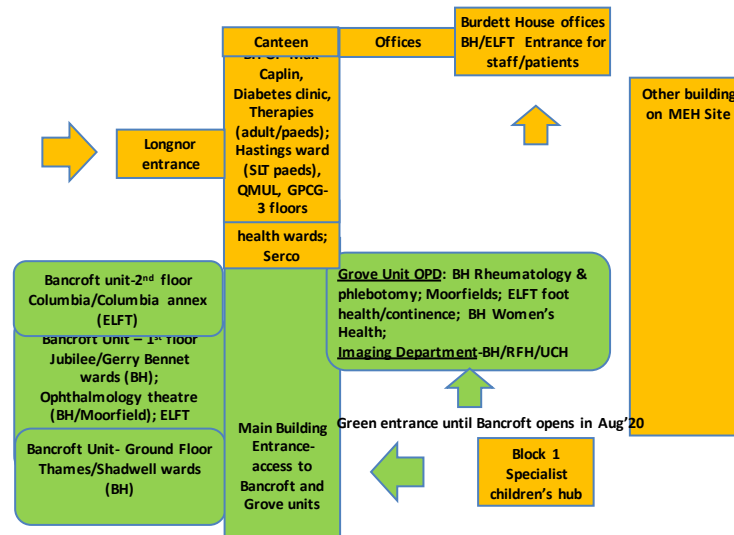
- Those undergoing active treatment for specific cancers
- Those with an underlying haematological malignancy or inherited blood disorder
- Those living with a solid organ transplant
- Those on current immunosuppression at a level thought to engender risk
- Pregnant women with associated cardiac disease

2.2 An analysis of the MEH site (site plan below) and options to create a safe 'green' zone area has been undertaken in collaboration with partners including ELFT.



2.3 The analysis and review of the potential MEH site options for a safe and Covid free 'green' zone has identified the Bancroft area of MEH (zoning map below) as the most suitable location. This area currently provides the base for the Cancer Diagnostic Centre and will allow the hospital to function safely and appropriately and provide future safeguards in controlling the spread of infection.

MEH zoning map, with current services in main building:



2.4 Columbia ward is situated within the Bancroft area of MEH, the entry and exit from Columbia ward requires access through the designated 'green' zone site, Columbia ward remaining within the 'green' zone presents significant challenges and health risks and will need to be re-sited for the following reasons in order to create the 'green' zone area on the hospital site.

- Patients that need to leave the ward for medical appointments (e.g hip X-ray, CT scan, A&E) they would not be able to return unless re-swabbed and would need to occupy an acute medical bed until they were tested and confirmed as Covid negative.
- Patients would not be able to receive visitors unless they were confirmed as Covid negative, lengths of stay on this ward can be for long periods and this could impact on contact with carers/family.
- Covid positive patients would not be able to be admitted to the NHS Dementia Assessment ward for East London as this would be located within the Covid free 'green' zone.
- Various specialists who need to visit the ward eg OTs, Psychology and GPs would all need to be guaranteed to be Covid negative to attend.
- If staff were sick and temporary staff were required out of hours we would not be able to guarantee their Covid status.

- If the ward needed support staff backup - ie if there was a psychiatric/safety emergency staff would not be able to attend as access to the 'green' zone is restricted
- The inpatient unit is 24 hrs and the access to the green site will be available 9-5 Mon to Fri – there would need to be an additional check in for night staff starting at 9pm and staffing working weekends to ensure that staff did not access non green areas out of hours.

2.5 ELFT and partners have reviewed the options available to relocate Columbia Ward, inpatient care for people suffering with Dementia requires a specialist environment, safe and well designed, we have identified that there is only 1 vacant ward available to relocate Columbia Ward, the vacant Cazaubon ward (a ward designed for Dementia patients) at East Ham Care Centre (EHCC).

2.6 ELFT have recently vacated Thames ward situated within the Bancroft area, the move of Thames ward involved engagement over many months with patients and their carers and the respective health and scrutiny committees. Thames Ward services have now moved to EHCC, this was a key step in the strategic ambition for the care of dementia and frail elderly patients, to bring these services together, to create a Centre of Excellence.

2.7 Cazaubon ward is a vacant ward situated within EHCC, it has the capacity to accommodate Columbia ward, there is adequate space and the Cazaubon environment is an improvement upon that currently provided within Columbia ward. An additional benefit of this proposal is the clinical adjacencies of the wards, all Dementia and frail elderly wards would be located at EHCC (see next section for details).

2.8 It is therefore proposed that Columbia ward situated within the Bancroft area (MEH) moves to Cazaubon ward (EHCC) to achieve the following benefits

- Provision of safe patient services - the creation of a 'Green' Covid free zone at Mile End Hospital to lessen the risk of future Covid related infections, with the potential to realise significant quality benefits for patients and staff, whilst also reducing the treatment costs associated with Covid 19 infection.
- Improved quality of service for patients - the colocation of Cognitive Impairment & Specialist Dementia wards at East Ham Care Centre on a single site will improve quality and influence care and support arrangements, enhancing and optimising the current inpatient service configuration.

3.0 Impact of Changes to Columbia Ward and the new site at East Ham Care Centre

3.1 East Ham Care Centre is purpose-built, patients would be accommodated in a dementia-friendly unit. Cazaubon ward provides an improved environment (a step up from Columbia Ward), with en suite bedrooms, offering natural light, it is dementia friendly, there is a restaurant on site, there is therapy space and private secluded gardens and activity areas, the environment uses effective colour and design with dementia patients in mind, providing a feeling of space, clear lines of sight, with increased provision for privacy and dignity.

- 3.2 The move of Columbia ward to EHCC provides an opportunity to maximise the benefit and consolidate the different streams of the older adult inpatient pathway, these new clinical adjacencies achieved through the colocation of the dementia and frail elderly inpatients on one site would allow for smooth transition between settings for a patient group for whom change can be unsettling. This proposal would also create a critical mass of expertise, resources and support of the care of the elderly and frail at this location. Patients could transition from the day hospital to the continuing care ward and if required, transition to the end of life ward within the one site at EHCC providing seamless pathway of care.
- 3.3 EHCC has extensive gardens and unlike the MEH site, the gardens are private and for the sole use of EHCC residents and their carers and are used frequently.
- 3.4 There is an Activity Centre at EHCC which runs from Monday to Friday every week and includes weekly music therapy sessions. Patients also have access to faith and fellowship services, including multi-faith prayer meetings each week, and a sensory room.

4.0 Families and Carers

- 4.1 We are talking with all families involved and discussing with them individually the proposed move, addressing concerns and responding to these, making any adjustments as necessary.
- 4.2 It is recognised that that the proposed move of Columbia ward to EHCC may be unsettling for individual patients and for their families. In each of these cases the Consultant Psychiatrist and nursing staff, who know and are currently caring for the patients, will work closely with patients and their family to re-assess their specific needs, agree individualised transfer plans and prepare them for the move. Family and carers will also be given the opportunity to visit EHCC.
- 4.3 ELFT recognises the importance of providing accessible services for Family & Carers, the continued contact, care and support of loved ones whilst someone is an inpatient is a key component in their journey of recovery.
- 4.4 We appreciate that for residents and family members of Tower Hamlets and City & Hackney moving the services to EHCC will increase the travel distance. Transport times comparing travel to MEH and to EHCC for residents are outlined in (Table 6) for Tower Hamlets and (Table 7) City & Hackney. Newham residents will no longer have to travel to MEH, and will in general benefit from a reduction in travel time as outlined in (Table 8) for Newham. The journey times represent an average (route planner), some journeys will be shorter, others longer, depending on a number of factors including traffic conditions and peak hour travel.

Table 6 Tower Hamlets travel to Mile End/ East Ham	Current Travel to Mile End Hospital Driving	Current Travel to Mile End Hospital Public Transport	Future Travel to East Ham C.C Driving	Future Travel to East Ham C.C Public Transport
Stouts Place	13 mins	24 mins	34 mins	41 mins
St. Katherines Dock	16 mins	24 mins	32 mins	38 mins
Docklands	15 mins	36 mins	28 mins	56 mins
Island	13 mins	37 mins	25 mins	52 mins
Aberfeldy	14 mins	30 mins	24 mins	36 mins
Strudley Walk	12 mins	16 mins	21 mins	25 mins
Ruston Street	10 mins	23 mins	27 mins	37 mins
Spitalfields	12 mins	17 mins	43 mins	33 mins

Table 7 City & Hackney travel to Mile End/ East Ham Care Centre	Current Travel to Mile End Hospital Driving	Current Travel to Mile End Hospital Public Transport	Future Travel to East Ham C.C Driving	Future Travel to East Ham C.C Public Transport
Abney House	25 mins	45 mins	38 mins	60mins
Green Lanes	32 mins	50 mins	45 mins	60mins
Southgate Road	19 mins	40mins	50 mins	55 mins
Half Moon Court	25 mins	30 mins	40 mins	52 mins
Broadway Market	12 mins	30 mins	36 mins	48 mins
Lower Clapton Road	23 mins	40 mins	31 mins	60 mins
Wick Road	15 mins	40 mins	30 mins	49 mins

Table 8 Newham travel to Mile End/ East Ham	Current Travel to Mile End Hospital Driving	Current Travel to Mile End Hospital Public Transport	Future Travel to East Ham C.C Driving	Future Travel to East Ham C.C Public Transport
Mandeville Street				
Stratford & New Town	14 mins	25 mins	12 mins	31 mins
Little Ilford	25 mins	51 mins	11 mins	22 mins
Royal Docks	17mins	45 mins	14 mins	38 mins
Beckton	23 mins	58 mins	15 mins	40 mins
Canning Town North	17 mins	30 mins	11 mins	30 mins

4.5 Carers and family members may themselves be elderly and/or frail and we would wish to reduce the impact of travel for them. There is free visitor car parking at EHCC, this is not available on the MEH site. We propose to offer travel assistance to support carers with the journey to EHCC which we recognise for some will be a more complex/longer journey than previously encountered visiting Columbia Ward.

4.6 The criteria for travel support would be 'self-assessed' by the carer/family member themselves, it will not be means tested or subject to any other criteria, where a carer wishes to avail themselves of transport support this will be provided, the care co-coordinator will determine with the carer the type and range of support required to maintain visiting arrangements to Cazaubon ward. This might include the provision of taxis, payment towards parking costs or provision of hospital transport.

5.0 Staffing

5.1 We have met and engaged staff and their representatives regarding this proposal, these discussions have provided an open and honest dialogue, this has been received positively by staff, who are receptive and understanding of both the urgency and the need to move Columbia Ward to EHCC.

5.2 The proposed change and the immediacy required to respond to the altered demands placed on services due to Covid 19 will not allow a full staff consultation at this stage, however staff and their representatives on both the EHCC and MEH site have been involved in planning as fully as possible, they are supportive and all the normal staff terms and conditions will be observed such as payment of excess travel costs, etc.

6.0 Risks

6.1 Engagement in emergency and urgent service change is challenging, there is a reduced ability to consult and engage the views of patients and the public, the rapidness of decision making with regard to this proposal has to be weighted against a delay in implementing it which could have serious consequences for patients and the public.

Risk	Controls
Patients and the Public unable to offer views on proposed change of service	Focused engagement with those directly affected, the current patients of Columbia ward and their families has taken place. Briefings to Health and Scrutiny committees, the rationale and need for change arranged in support of the interim plan.

A perception that permanent decisions have been made regarding future services without due process	This proposal is time limited for a period of 12 months, there is a timely review period and timetable to examine future arrangements that will involve patient and public engagement.
Increased journey time or travel costs for carers and family members	Travel assistance to support carers will be provided, it will not be means tested or subject to any other qualifying criteria. This can include for example the provision of taxis, payment towards parking costs or provision of hospital transport.
Disruption for current inpatients of Columbia Ward and impact of continuity of care	For each individual patient and for their families, the Consultant Psychiatrist and nursing staff, who know and are currently caring for the patients, will work closely with patients and their family to re-assess their specific needs, agree individualised transfer plans and prepare them for the move. Family and carers will also be given the opportunity to visit EHCC.

7.0 Financial

7.1 There are no direct financial savings expected as a result of this change, as there is no change to the service model proposed, or reduction in staff numbers, we expect the costs to be revenue neutral.

8.0 New Service Monitoring and Governance

8.1 In order to understand the impact of the change and mitigate/respond to any unintended consequences we intend to continually review and consider the views of patients and their families, feedback from Health and Social Care Partners including Adult Social Care over the coming months.

8.2 We propose that a formal evaluation to review this change in conjunction with Healthwatch is undertaken to evaluate the following measures to understand over time.

- Length of Stay (Trend)
- Staff turnover (monthly – 12 month rolling)
- Staff absence rate (monthly)
- Incidents number and themes (trend)
- Patient experience & Friends & Family responses
- Staff experience
- Travel assistance monitoring/provided

9.0 Conclusion

- 9.1 The creation of a Green Zone area, a safe space away from Covid-19 Red zones (Covid infected areas) within the hospital itself will reduce the likelihood of cross infection and contamination, it will allow care to be delivered safely and proportionately and reduce additional pressure on other parts of the hospital and in so doing help in providing safer services for local residents
- 9.2 This proposal will help to achieve the benefit of providing safe services, through the creation of a Green zone, Covid free space at MEH.
- 9.3 The future need, medium to long term requirements for safe 'green' zones in response to Covid 19 is difficult to assess and quantify at this time, this response could be time limited or temporary or may be superseded by alternative (yet to be determined) safeguards to protect the spread of infection.
- 9.4 East Ham Care Centre provides a modern, purpose built facility specifically designed for the care of Dementia and the Frail Elderly, there is opportunity to utilise the vacant ward space and accommodation at EHCC to greater effect to create a Centre of Excellence.
- 9.5 This proposal will help to achieve the benefit of improving patient experience and quality of care through the consolidation of all Cognitive Impairment Specialist Dementia beds at EHCC.
- 9.6 Family and carers of City and Hackney, Tower Hamlets residents in Columbia Ward will be able to access assistance where travel is an issue to enable them to regularly visit the ward at EHCC.

10. Recommendations

- 10.1 Move Columbia ward to East Ham Care Centre for an initial period of 12 months.

10.2 Continue with the extensive programme of involvement with staff and patients and their carers to ensure a smooth transition.

10.3 Continue the programme of engagement with key stakeholders

11. Review

11.1 The changes made under emergency measures (identified above) in response to Covid-19, should be reviewed within the next 12 months and this review should be used to help determine the long-term need and location for this service.

11.2 The review will be comprehensive and engage patients and public and the respective health and scrutiny committees to ensure all views are fully considered and taken into account before a long term decision is taken.

Timetable for Review	Aug - 20	Sep - 20	Oct - 20	Nov - 20	Dec - 20	Jan - 21	Feb -21	Mar - 21
Implement interim service change moving Columbia to EHCC and creating safe Green zone MEH	x							
Engage Healthwatch in the review of services over time					x			
Local Stakeholder Events examining future need and requirements for Columbia ward						x		
Staff Consultation future plans for Columbia ward						x		
Present to Health and Scrutiny Committees, future plans for Columbia ward							x	
Decision on future need and plan for Columbia Ward								x

