

Kentmere Mental Health Unit

Views on possible changes

July 2016



Introduction

In the summer of 2016, Healthwatch Cumbria (HWC) was asked to independently assist Cumbria Partnership NHS CPFT in gathering community views on the proposed closure of the Kentmere mental health unit in Kendal.

The decision to close the Kentmere unit at Westmorland General Hospital (WGH) has been delayed until the end of the summer pending a fuller assessment of quality and safety concerns. The delay was also brought about because of significant concerns expressed by patients, carers and the community.

As part of its inspection of the Trust the Care Quality Commission (CQC) had raised a number of concerns around the quality and safety of care on the Kentmere unit:

- Beds are in dormitories and the unit is mixed sex. According to national standards patients should have access to single sex accommodation in single rooms.
- There are no outside spaces provided at Kentmere and patients have to be accompanied by a member of staff if they do wish to go outside.

A series of actions have been implemented over the years to address these issues yet they have not fully addressed the risks and are not sustainable in the long term. The Cumbria Partnership NHS Foundation CPFT (CPFT) has considered alternative locations for the unit on the current hospital site and a location has not been found. The CPFT has also considered changing current arrangements on Kentmere by providing accommodation in single sex rooms, on single sex wards or creating an outside space but is unable to do so due to lack of space.

In May a decision was brought about by CPFT to temporarily close the Kentmere unit. On June 8th CPFT delayed the decision pending further investigation.

Methodology

The HWC team made use of SurveyMonkey when designing the survey. As well as collecting responses electronically paper copies of the survey were also available. However, it was anticipated that overall the majority of people would respond to the survey electronically. The survey comprised of 11 questions with a mix of question types to allow for both quantitative and qualitative analysis. The survey opened on Friday 24th June at 5pm and closed at 5pm on 8th July 2016. Completed paper copies were collected and transferred manually onto the electronic version for ease of analysis.

Postcards were also distributed to the public as another method of engagement, to encourage people to fill in the questionnaire.

HWC hosted drop in session was held on the 30th June in Kendal between 1pm and 7pm and was open to the public. There were over 70 people who attended the drop in event. This event gave members of the public an opportunity to express their concerns, ideas and anxieties about the changes to the Kentmere unit. The CPFT were available to answer questions and to talk one to one with people. HWC were in attendance to welcome people and encourage people to fill in the questionnaire.

Representatives from South Lakeland Youth Council also attended. They attended because they have adopted mental health as a key theme for this year and wanted to understand more about the proposed closure of the Kentmere unit.

Press releases were provided to the media and through this attention and encouragement to fill in the survey were brought about.

From the extensive engagement that was done 319 surveys were completed. Once the survey was closed the results were then analysed by HWC leading to a report.

Analysis

An independent analysis of the Kentmere survey was undertaken; this provided a quantitative analysis complimented by some qualitative analysis. The qualitative analysis documents the main themes found from a content analysis of the three 'open box' questions that prompted more qualitative information.

There was a variety of question types asked including multiple choice, order ranking and open text boxes.

There were strong messages to be taken from the open box questions and it was clear people had a great deal to say on the proposed changes to the Kentmere unit.

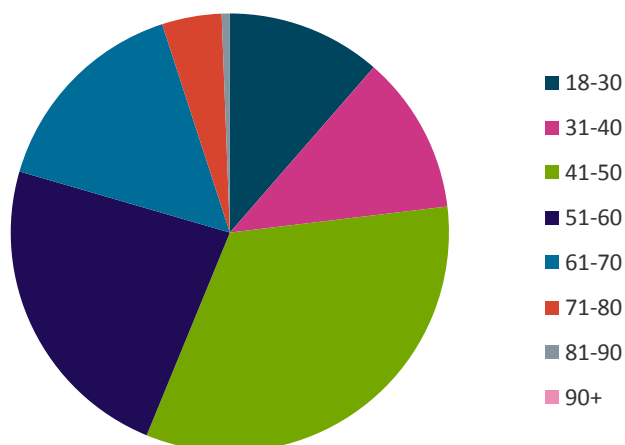
The overall analysis has produced some interesting results and themes that capture what people's views are on possible changes to the Kentmere unit. These findings provide useful information for further discussion.

The results presented below are the findings of the electronic survey with the main themes of the qualitative analysis presented in a bullet point approach for ease of identifying main views.

Q1-What age group do you belong in?

There were 105 respondents (33%) aged between 41-50 years. There were 74 respondents (23%) aged 51-60 and 49 respondents (15%) aged 61-70. These age groups had the highest number of respondents.

Fig 1. Shows which age groups respondents are in.



Q2-What is your gender?

Of the 319 respondents 316 replied to the question asking their gender. 214 (68%) of those who responded were female.

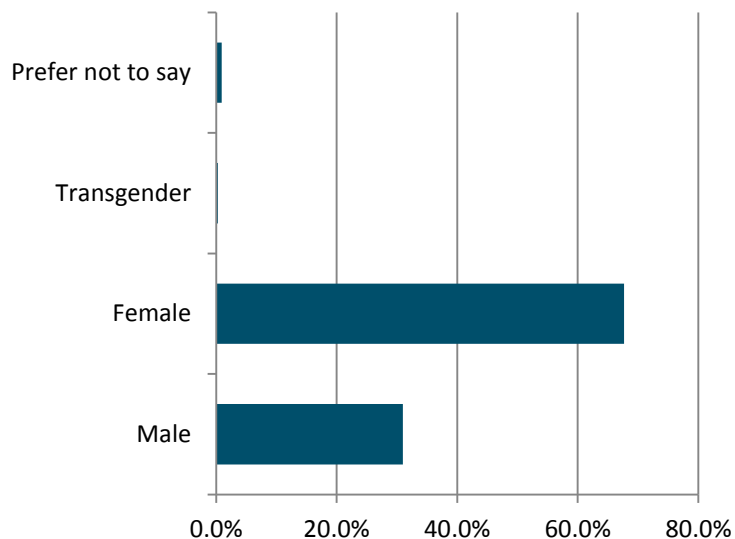


Fig 2. Gender of respondents.

Q3-Which district do you live in?

The highest response rate was from those in South Lakeland, this was likely because this is their local mental health unit and the closure of Kentmere will impact those living in this area the greatest. There was an 80% response rate for South Lakeland. Although it is understood that patients of Kentmere unit do come from other areas.

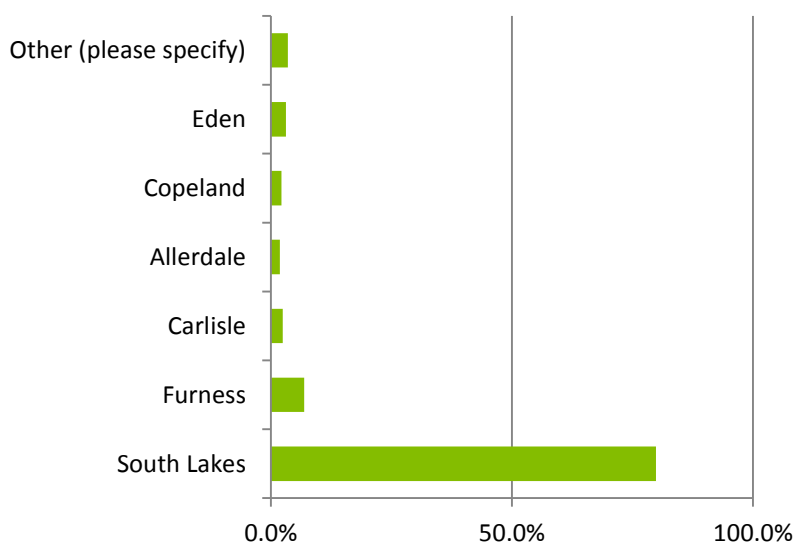


Fig 3. Showing responses by district.

Q4- Have you ever used the services at the Kentmere Unit or are a carer/family member of someone who has used the services?

63% of respondents said that they had not used the services at Kentmere. There was only 16% of respondents that had used Kentmere as a service user.

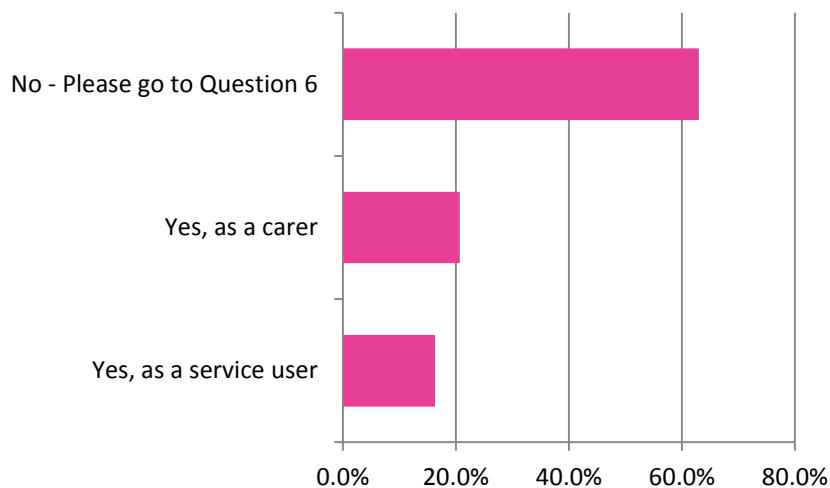


Fig 4. Showing whether respondents have used or know of someone who has used the services at Kentmere.

Q5- Overall, how satisfied were you with the services at the Kentmere Unit?

When respondents were asked how satisfied they were with services at Kentmere nearly 71% of respondents felt 'very satisfied' and 16% replied 'somewhat satisfied'. Overall, 87% were either somewhat or very satisfied with the services they received at Kentmere.

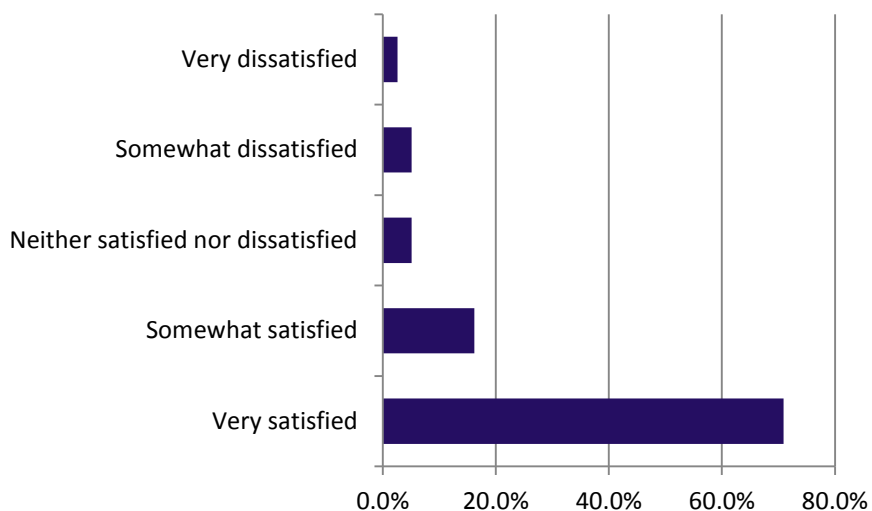


Fig 5. Satisfaction with services at Kentmere.

Q6-Do you think the Kentmere unit should close?

When asked whether respondents felt Kentmere should close, the overwhelming majority (94%) said that it should not be closed. Only 6% answered yes to the close of Kentmere.

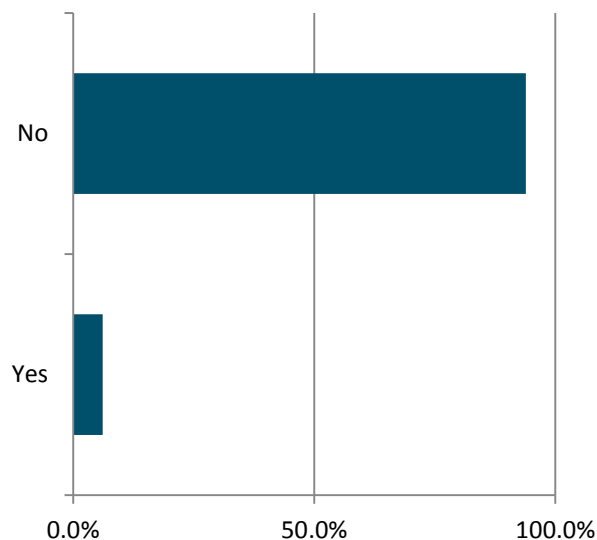
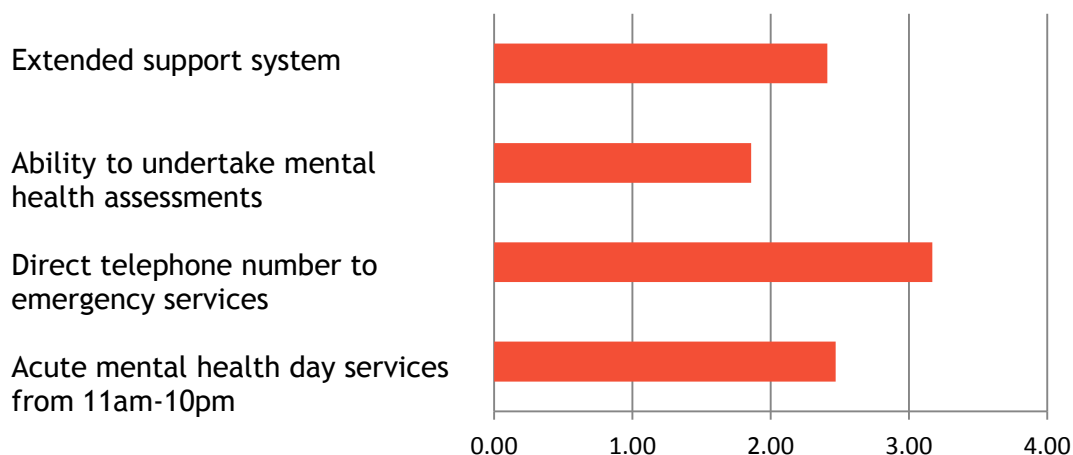


Fig 6. Respondents views on whether they think Kentmere should close.

Q7-If the unit was to temporarily close, what would be most important? (please rank in order of importance)

In regards to respondent's preferences about what should happen in the event Kentmere closes, the highest rating average was for a direct telephone number to emergency services. This could be inferred to mean this is people's first ranked choice. Acute mental health day services had the second highest rating average inferring this option is ranked second. This is followed closely by an extended support system which is ranked as respondent's third choice. The ability to undertake mental health assessments at Westmorland General Hospital had the lowest rating average, inferring it is ranked lowest. These findings suggest that if Kentmere closes having a direct telephone number to emergency services would be of most importance with the ability to undertake mental health assessments being of least importance.

Fig 7. Shows average ratings of options if Kentmere closes



Q8-If the unit closes, what would be your main concerns?

Responses to this question had the main themes as follows:

- Travel/Distance
 - Concerns that people will have to travel a much greater distance to access the mental health care they need.
 - Concerns about patients then being too far away from their support networks of family and friends.
 - Concerns about how likely is it family and friends would still be able to visit patients if there was no local mental health service.
 - Reasons given on why family and friends may struggle to visit patients were related to:
 - Accessing transport
 - Cost of travel
 - Distance needing to be travelled being too far.
 - Respondents raised concerns that if service user's had to travel to access care where would they go to access services.
- Concerns for people's mental well-being if they cannot access mental health care locally.
 - There were 18 concerns raised that the closure of Kentmere would result in an increased risk of suicides and a higher rate of suicides occurring.
 - Concerns raised that if patients are not treated locally this could lead to these individuals becoming isolated which could impinge on their recovery.
 - Respondents then raised concerns about what would happen to a service user's mental health and recovery if their support network was not close by.
 - Concerns that this closure will be stressful for patients due to the uncertainty and unfamiliarity of not being somewhere familiar.
 - Concerns were also raised that this closure will be stressful for family and friends, other mental health services and the emergency services.
- Lack of local alternative service
 - Concerns that at present there is no other local mental health inpatient unit
 - Other mental health services being too far away.
 - Concerns over the availability of mental health services in the area.

Q9-Are there any other ideas that you think that the CPFT should be considering when making the decision on Kentmere?

Responses to this question had the main themes as follows:

- Alternative Facility
 - Comments that were made suggested using other wards or utilising other areas in the hospital
 - Comments suggested building a new mental health inpatient unit

- Keeping Kentmere open
 - All of the comments made suggested that Kentmere should remain open and for the unit to be improved. Key words around improving Kentmere mentioned: upgrade, refurbish and extend.
 - Comments also suggested that improvements should be made to the layout of the unit in relation to situation of male and female accommodation areas.
 - Comments also suggested creating new facilities at Kentmere such as creating activities for patients, exercise areas and creating a shop and café area.
 - There were comments made about the lack of outdoor space at Kentmere.
- Alternative services
 - There were a number of comments made about crisis care.
 - Have a crisis house run by charities
 - Create a crisis house in Kendal
 - Make improvements to crisis cover
 - Ensure crisis teams have the capacity to care for those with mental health needs
 - Re-invest in crisis support
 - Provide crisis care 24/7
 - Comments made suggestions on improving community facilities.
- Funding
 - Comments made asked for the focus to be on patients and their care and not focus on meeting financial targets.
 - Suggestions made commented on ensuring mental health services are not subject to further cuts and that money remains invested in mental health.

Q10-Is there anything else that you would like Healthwatch Cumbria to feedback to the CPFT concerning the Kentmere unit?

Final feedback from respondents was:

- To keep the Kentmere unit open. The overall majority of comments made insisted on Kentmere not being closed and for it to stay open.
- The consequences if it were to close.
 - Local people not having access to a local mental health unit
 - Having to travel a much greater distance to access mental health care
 - Anxiety and distress caused by closing
- Mental health services not receiving the funding they need and not being on parity with physical illness.

Summary of report findings

The information discussed above represents the views of patients, carers and members of the public on possible changes to the Kentmere unit at WGH.

The most significant findings were:

- 80% of people who responded were from South Lakeland.
- Respondents of the survey do not want the Kentmere unit to close. 94% replied 'No' the question on whether they thought Kentmere should close.
- 87% of respondents were either somewhat or very satisfied with services at Kentmere.
- The main reasons against the closure of Kentmere were:
 - Travel/ distance to alternative mental health services
 - Lack of alternative service locally
 - Concerns for peoples mental health if the unit closed and concerns for their mental health if these individuals have to receive care outside of their local area
- The main ideas put forward as alternatives if Kentmere closes were:
 - Providing an alternate facility locally. Either in another ward or create a new facility.
 - Keep Kentmere open and make improvements to it.
 - Improve community and crisis services
 - Ensure that money is spent on alternate mental health provision

Overall, the main view expressed is that people want Kentmere to remain open.