LEEDS CITY COUNCIL

SCRUTINY BOARD (ADULTS, HEALTH AND ACTIVE LIFESTYLES)

7TH January 2020

Tees, Esk and Wear Valleys NHS Foundation Trust –

Transformation of Community Mental Health Services in Harrogate and Rural District, including Wetherby.

Report of: Director of Operations North Yorkshire and York, Tees, Esk and Wear Valleys NHS Foundation Trust

Purpose of this report

1. The report provides an update on the transformation of community mental health services in and around Harrogate including Wetherby and the closure of the inpatient wards at Harrogate Hospital.

Background

1. As part of Transforming Adult and Older People's Mental Health Services in Harrogate and Rural District, TEWV considered a paper in July 2018 outlining the service model delivery solutions that were being formed following a significant period of local engagement and discussions with partners and other stakeholders. Within the current operating context, it has become obvious that there is only one viable local solution which is to invest in increasing the level of community service available through a reduction in inpatient beds and to reprovide inpatient care from capacity in the new hospital Foss Park, York.

2. In November 2018, agreement was given by Clinical Senate to progress to engagement with service users, carers and the wider community across Harrogate and Wetherby town around the proposal to: Invest in extended community services through a reduction in inpatient beds and re-provide inpatient care from capacity in the new hospital Foss Park, York. Engagement commenced 24th June 2019 for a period of 12 weeks.

3. In March 2018, a Full Business Case to build a new specialist hospital for York and Selby was approved by the Trust Board of Directors, TEWV. The new facility will include four 18-bedded wards designed to meet the needs of the patient group with en-suite bathrooms, therapy spaces, wander paths and easily accessed outdoor space. Building work commenced in October/November 2018 with the aim of the new facility being open in April 2020 and this remains on schedule.

4. The proposal is to provide inpatient services for adults and older people from Harrogate and York within the 72 beds of Foss Park. This would provide the required level of inpatient beds required based on 2018/19 data and be supported by the proposed community models for Adult Mental Health (AMH) and Older Peoples (OP) services. The proposals present the current internally agreed model for service delivery and we are now working in partnership with Harrogate and Leeds CCG to provide a response to the engagement programme in the Harrogate and Wetherby district that concluded in September 2019.

Summary

The engagement work that began in June 2019 enables us to work with local people to develop community services that will support more people to remain in their home environment. We anticipate implementing these developments by May 2020.

When people need to spend time in hospital these services will be provided in a specialist facility in York where TEWV is already building a new mental health hospital.

We appreciate that a number of people felt it was important to have an inpatient unit in Harrogate and we explored a range of options for doing this. However, we concluded that the approved model was the only option that will allow us to maximise patient safety and provide the best possible patient experience, whilst remaining true to our commitment to providing care as close to home as possible.

By investing in community services we aim to reduce the number of inpatient admissions as well as the length of time individuals need to spend in hospital (this is what people told us they wanted).

It enables us to reinvest money in community services to focus on supporting people at home whenever possible. It also ensures that when someone needs inpatient care they will receive it in a safe, high quality environment.

The work we did to involve the local community gave us a clear understanding of what people want from their mental health services.

The approved approach releases £500,000 per year to invest in our community services. In addition, we are already looking at how we can improve the way we work to give people the support they need.

The following section outlines our thoughts on what our community services might look like in the future, based on the feedback we've received already.

It also takes into account the success TEWV has had in other areas, such as Hambleton and Richmondshire, where community teams are now supporting many more people in their own homes.

Progress to date

5. The engagement programme developed and agreed for the period of June – September 2019 included 4 large events including 2 in Harrogate, 1 in Ripon and 1 in Wetherby, supported by a series of smaller events in partnership with the voluntary sector, social media engagement and staff engagement sessions.

6. The following table outlines events that have taken place with 228 people attending the sessions:

Event	Date	Venue	No. of attendees
Citizens Advice - Harrogate	09.07.19	Harrogate	16
Dementia Forward	11.07.19	Christchurch on the Stray, Harrogate	30
Harrogate service users group	16.07.19	Community House, Harrogate	11
Over 50s Forum, Harrogate	25.07.19	St Paul's Church, Harrogate	34
OPEN EVENT - Ripon	25.07.19	Ripon Rugby Club	7
Claro/Orb/Harrogate Mind/ Wellspring	30.07.19	Mind, Harrogate	12

HaRD CCG Patient Participation Group	30.07.19	Harrogate Golf Club	12
OPEN EVENT – Harrogate	02.08.19	Fairfax Community Centre	8
Harrogate Mental Health and Wellbeing Network	05.08.19	Chain Lane, Knaresborough	12
Drop in - Boston Spa	05.08.19	Spa Surgery, Boston Spa	31
Drop in - Collingham	12.08.19	Collingham Memorial Hall,	3
Drop in - Thorner	14.08.19	Thorner Victory Hall	1
Drop in - Bramham	19.08.19	Bramham Medical Centre	20
Drop in - Harewood	22.08.19	Harewood Village Hall	4
OPEN EVENT – Knaresborough	02.09.19	Chain Lane Community Hub, Knaresborough	12
OPEN EVENT – Wetherby	05.09.19	Wetherby Town Hall	15

7. TEWV NY&Y Locality managers representing AMH and OP services attended the Leeds OSC 23rd July 19. Following feedback from OSC, the Head of Commissioning (Mental Health & Learning Disabilities) organised a conference call with TEWV on 14th August 2019 so we can jointly review and respond to feedback from these events.

8. Following discussions on wider stakeholder engagement in August 2019 we also had a dedicated engagement session with acute care colleagues and the ambulance service in the Harrogate and Rural District.Conversations with the vast majority of groups have taken place including NY Police, Orb, Citizens Advice, Dementia Forward and NYCC social care staff.

9. The proposed model has generally been well received, particularly from regular service users who recognise the value of preventing admission and helping them to stay well in their own homes wherever possible through a community-based model. As anticipated, the majority of questions and concerns raised throughout the engagement period has focused on the movement of beds from Harrogate to York, with particular concern regarding travel times, distance and access. The difficulties of accessing Foss Park if family members are unable to drive or live in more rural parts of the district has been frequently highlighted (this has also been flagged up previously through service user representation at the HaRD steering group).

10. The engagement events have communicated the intended outcomes of the transformation of services will be that the increased investment in community services will enable us to treat more people for longer out of hospital, and that there will be fewer admissions and these are expected to last for a shorter period of time. We have acknowledged at all meetings that there will be occasions when people will have to travel and the financial support available for all NHS services that may be available for those in need.

11. In total 140 online surveys were completed. Some of the key findings were:

    a. 79.37% of respondents said that they thought that proposals for adult mental health services will help them and/or their loved one stay well / recover at home.

b. 79.65% of respondents said that they thought that proposals for mental health services for older people will help them and/or their loved one stay well / recover at home.

12. To support the engagement activity we produced a range of information to make people aware of our plans and to let them know about the different ways that they could get involved and share their thoughts and views. This included:

    a. A full narrative document. This was shared via:
        - Emailed to a range of partners including local authorities, local community groups and voluntary sector organisations.
        - Copies were left in key public areas such as GP surgeries, libraries, community centres etc.
        - Copies were shared with people who attended the engagement events
        - The documents was promoted and was available on the CCGs and TEWV's website
    - A summary narrative document
    - An easy read version of the narrative
    - Dedicated pages on the CCGs and TEWV's website
    - Two short videos focusing on the proposed plans
    - A letter which was sent to stakeholders including local authorities, councillors, voluntary sector organisations, Trust members
    - Posters detailing the open events and how people could get involved
    - Media releases to raise awareness of the engagement events
    - Event listings in key publications and online
    - Social media – to raise awareness of the engagement event. This included posts on Facebook (47,384 impressions, a reach of 29,986 and 362 engagements) twitter (33,412 impressions with 286 engagements) and Instagram. Facebook events were also use to promote. Targeted updates were also shared in Facebook community groups which included Blow Your Horn Ripon (11k members); Harrogate District Network (13k member); This is Ripon (3.2k members); Wetherby Grapevine (999 members); Northallerton! (2k members); Knaresborough events (1.1k members); and Harrogate and Knaresborough Community (2.3k members).

13. We have worked through the feedback from all of the events and meetings attended, along with the responses and comments submitted via the survey. As expected there have been a number of key themes:

    a. Services closer to home
    - Access to services
    - Joined up working
    - Carer support
    - Prevention and support
    - LD and autism
    - Resource - staff/funding
    - Inpatient care

14. On completion of the engagement programme all themes and comments have been reviewed in partnership with NY and Leeds CCG and considered in line with the proposed community service models.

15. As part of the agreement with Harrogate and Leeds CCG to update scrutiny on the transformation programme and its implication for Wetherby residents, TEWV attended the Leeds OSC on 23rd July; North Yorkshire OSC on 13th September and 13th December 2019 and fed back on the engagement programme to date and the new delivery models for both adult mental health and mental health services for older people. An action plan

has been developed and circulated for comments and amendments to ensure we are responding appropriately to the feedback from the engagement events. Key areas for action identified include:

- Enhancing community services as outlined by the NHS Long Term Plan (LTP) with a key focus on improving the interface between different services for example Community Mental Health Teams (CMHT's), Crisis, Perinatal Mental Health Services, Early Intervention Psychosis, IAPT / primary care mental health teams and developing social prescribing models;
- Working to ensure there is clear information in terms of what support is available and how to access services across the localities;
- Ambition to co-locate with LCPs/PCNs, both from TEVW community and outpatients perspective;
- Leeds CCG look to further develop the VCS market for the Wetherby locality and surrounding villages – linked to the CCG/LCC VCS commissioning review;
- Potentially commission a volunteer driver scheme to mitigate the impact of travel for Wetherby and surrounding villages in addition to developing a pool of volunteers within TEWV.

Proposed Service Models

16. As articulated in the final business case, additional investment outside of hospital services, the changes in service delivery for AMH that will support care in the community as an alternative to admission include:
    - An extended working day for core community teams, better accommodating the need of the working population and escalation of need.
    - An expanded home treatment capability 7 days a week, reducing the need to assessment people in hospital and support a recovery at home post discharge form hospital
    - Introduction of acute hospital liaison 24/7 releases crisis staff capacity overnight and ability to see more face to face assessment in community in a timely manner.
    - Removal of the Section 136 suite & introduction of alternatives to places of safety, reduces patient turnaround therefore releasing capacity to see people and manage them at home.
    - A formal response to our third sector partners when people present in distress or partners have concerns about a person's well-being, preventing them calling the police whose option is to detain under the MHA.
    - Closer working relationship with police partners at the point of presentation allows the crisis teams to offer crisis assessment at home and intensive home treatment for the first 72hours. Crisis café bids will also support people through mental health first aid trained staff in the locality. We have also agreed which sites will be deemed suitable alternatives to places of safety including HDFT, Orchards & base where the crisis team is based. This reflects the current position in Scarborough and the Police are supportive of the plans.

- The Trust's *Right Care, Right Place* programme over the next 3-5 years looks at place-based systems of care (delivering to the patient in their preferred environment). Development of this programme will continue in coming years and further support the populations of Harrogate and Wetherby. The foundation of this approach is to work with social care, primary care networks, third sector partners – as well as service users and carers – to provide support as early as possible in the most appropriate environment. This programme is will support the delivery of the community mental health framework and NHS Long Term Plan. We are currently co-producing plans with key stakeholders and have proposals to work into primary care, develop pathways with social prescribing to facilitate the right care for patients and carers. This work will be monitored closely to ensure

proposed outcomes of improving system wide care, reducing handoffs between services, improving access, recovery and trauma informed care are delivered.

17. For inpatient services, the Trust will monitor closely the out of locality admissions, length of stay and admission rates. Monitoring patient flow within Harrogate and Wetherby is a current focus, looking at stabilising the community and crisis team offer.

18. The planned enhancement of community services in Harrogate and Ripon is dependent on the provision of inpatient services in York and the ability to release the accommodation at the Briary Wing to HDFT.

19. It is anticipated that community and crisis services currently based in the Briary Wing can be relocated without need for an additional lease of accommodation in the Harrogate area, and the proposed options have been considered on that basis.

20. Relocating both inpatient and community services are planned for May 2020.

Implications

- **Financial** – This will be met from transformation.

- **Human Resources –** A management of change process within TEWV will be facilitated and has now commenced involving all staff impacted by the transformation. Group and individual interviews are underway and staff are being provided with information re new roles available within the community. Training and development needs will be identified with staff and opportunities to remain in inpatient services are also being offered to staff.

- **Equalities -** A refreshed equality impact assessment will be completed.

- **Legal –** None identified.

- **Crime and Disorder –** None identified.

- **Information Technology (IT) –** Up to date technology will be utilised to support remote working. This will include Skype to maintain communications.

- **Property –** Following a review of the existing Harrogate and Ripon estate it is agreed and supported that the community services currently accommodated at the Briary Wing in HDFT could be transferred to the remaining established bases in Knaresborough, Ripon and Harrogate. This will ensure that community services continue to provide a locally based service and we are able to retain the level of contacts and activity.

  Jennyfields Health Centre can be more efficiently utilised to provide increased space and to improve accessibility. Changes to Windsor House are minor and could be easily achieved, and those at Alexander House are equally achievable but incur greater cost, time and limited disruption. The proposed changes at The Orchards are significant and require careful consideration. All are necessary if alternative leased accommodation is to be avoided.

Conclusions

The engagement programme has now concluded and we are working in partnership with Harrogate and Leeds CCG's. Emerging themes and responses from the engagement programme have been largely positive and are reflected in proposed service models e.g. additional investment in crisis services and increased joint working with the third sector. It is clear that further work is required to provide assurance in relation to key concerns including transport and a

communications plan will be updated on conclusion of this work. Staff are now being supported to make the transition to the new community model and we will retain all staff in clinical services across North Yorkshire and York. We are working to relocate both inpatient and community services in May 2020 and have a robust plan to ensure that community services are available in the Harrogate and Wetherby locality and new arrangements will sustain the level of activity and accessibility for people who need our services.

Recommendations – **The committee is asked to review and note this paper.**

Author

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