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### **APPENDIX 1**

# FUTURE PROVISION OF PSYCHIATRIC INTENSIVE CARE SERVICES FOR COUNTY DURHAM AND DARLINGTON

# **RESPONSE TO CONSULTATION**

#### 1 INTRODUCTION

- 1.1 On 1 November 2006 County Durham PCT and Tees, Esk and Wear Valleys NHS Trust launched a public consultation on the future provision of psychiatric intensive care services for County Durham and Darlington.
- 1.2 The consultation, which ran from 1 November 2006 to 6 February 2007 was part of an ongoing process of involvement of service users, carers and other key stakeholders in the planning and development of mental health services across County Durham, Tees Valley and North East Yorkshire.
- 1.3 This report describes the proposal and outlines the consultation process. It gives a summary of the verbal and written responses received and responds to the issues raised (see Appendix 1 for detailed responses to comments raised).
- 1.4 On 20 March 2007, following the consultation, the County Durham Primary Care Trust (PCT) approved the permanent relocation of the PICU beds to West Park Hospital.

## 2 BACKGROUND

- 2.1 County Durham PCT and Tees, Esk and Wear Valleys NHS Trust need to ensure that people with mental health problems receive the most appropriate level of care in the most appropriate environment. This means providing a full spectrum of services, from community based care through to psychiatric intensive care.
- 2.2 Only a few people need psychiatric intensive care and they normally only need this for a short period of time. After this they will move on to other types of services, such as special care, recovery and rehabilitation services.
- 2.3 In 2004 County Durham and Darlington Priority Services NHS Trust consulted on proposals to temporarily relocate psychiatric intensive care services from the County Hospital in Durham (the Tony White Unit) to West Park Hospital in Darlington.
- 2.4 The proposed move was prompted by concerns raised, both internally and from external NHS monitoring agencies, about the physical environment of the psychiatric intensive care unit (PICU) in Durham. It was felt to be



unsuitable for the care and treatment of people with severe mental health problems.

- 2.5 The consultation ran from 9 August to 1 November 2004 and overall there was a general agreement that the unit did not provide a suitable environment.
- 2.6 Some people sought assurances on issues relating to bed numbers, staffing levels on the acute wards at the County Hospital, the ability of staff at the County Hospital to safely manage disruptive patients, the safe transfer of patients between hospital sites and the difficulties for patients and their families in travelling to Darlington.
- 2.7 The Trust received some very helpful comments, which enabled them to address these concerns and they agreed to:
  - Monitor the ongoing use of PICU beds in County Durham and Darlington.
  - Monitor complaints or problems experienced by users or their carers.
  - Provide a free taxi service for those carers who have difficulty travelling from north Durham to Darlington.
  - Increase staffing levels on the acute wards at the County Hospital.
  - Create a safe room at the County Hospital for the assessment of new admissions.
  - Put a protocol in place to support the safe transportation of patients from the north of Durham to West Park Hospital.
- 2.8 The temporary relocation of services was agreed and since April 2005 the psychiatric intensive care services for County Durham and Darlington have been provided at West Park Hospital in Darlington.

# 3 REVIEW OF PSYCHIATRIC INTENSIVE CARE SERVICES

- 3.1 As part of the commitments made at the end of the consultation Tees, Esk and Wear Valleys NHS Trust commissioned a review of PICU beds in July 2006. The review covered the period from April 2005 to the end of May 2006 and the key findings were:
  - During the 14 month period 33 patients from Durham and Chester le Street and 16 patients from Derwentside were admitted to the West park psychiatric intensive care unit. This is 7% of the total acute admissions for the north of County Durham.
  - No patients needing intensive care had to travel outside of County Durham and Darlington.
  - The average length of stay did not exceed 30 days, which is well within the recommended maximum of 56 days.



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- There were no formal complaints from service users (or their carers), who
  had been transferred from the north of County Durham to West Park
  Hospital.
- A taxi service for carers was being provided for carers.
- Staffing levels at the County Hospital had been increased.
- A safe room had been created at the County Hospital.
- A protocol was in place to support the safe transportation of patients and Durham Constabulary had not experienced any significant problems.
- 3.2 In addition, the Trust also carried out a telephone survey of the service users from north Durham who had spent time on the PICU at Darlington. Of those contacted, 17 people were willing to answer questions about their experiences and overall the results were positive although the survey highlighted the need to ensure that families are made aware of the free taxi service.
- 3.3 Following the review it was jointly agreed with County Durham PCT and TEWV NHS Trust that a formal consultation be carried out on the future provision of PICU facilities for County Durham and Darlington.

#### 4 THE PROPOSAL

- 4.1 The original plan was for the psychiatric intensive care services to move back to Durham as part of the Lanchester Road Hospital development.
- 4.2 The review demonstrated that the PICU at West Park at Darlington is fully able to meet the needs of the people from County Durham and Darlington.
- 4.3 County Durham PCT and Tees, Esk and Wear Valleys NHS Trust both felt it might be more appropriate, therefore, for the service to remain at Darlington and agreed to consult on this proposal.

#### 5 THE CONSULTATION PROCESS

The 14-week consultation was launched on 1 November 2006. The consultation was extended by two weeks to allow for the Christmas and New Year period.

#### 5.1 Consultation leaflet and information

5000 leaflets were produced and distributed widely to stakeholders, service users, staff and the public.

In addition, the document was available on both trust websites.

Information about the consultation was also included in Tees, Esk and Wear Valleys NHS Trust's monthly briefing note, INFORM, which is distributed to all key internal and external stakeholders.



A press release was issued to coincide with the launch of the public consultation process and to promote the public open meetings. The Northern Echo and Durham FM radio reported on the launch of the consultation.

# 5.2 Public open meetings

Initially four public meetings were arranged:

# Monday, 27 November 2006

1.00pm at Collingwood College in Durham6.00pm at St Mary and St Cutherbert's Parish Centre in Chester le Street

# **Tuesday, 5 December 2006**

1.30pm at Consett Civic Centre

6.00pm at Consett YMCA

The meetings were publicised in the consultation leaflet and advertised in the north Durham editions of the Advertiser newspaper.

Following a request from a service user group in South Durham, an additional public meeting was arranged for the south of the County and this took place on

# Tuesday, 9 January 2007

11.00am in the Dolphin Centre, Darlington.

A second letter was sent out to all stakeholders to advertise this meeting and a press release was issued to the local media. (Coverage: Northern Echo, Alpha Radio, TFM Radio).

Notes were taken at all of the meetings (A full set of notes is available if requested from the communications department, Tees, Esk and Wear Valleys NHS Trust, Flatts Lane Centre, Normanby, Middlesbrough, TS6 OXZ or by emailing Julie.oliver@tney.northy.nhs.uk.)

In total over 30 people attended these meetings.

## 5.3 **Communications with staff**

The consultation leaflet was distributed widely within Tees, Esk and Wear Valleys NHS Trust and a copy of the leaflet was posted on the Trust's intranet. There were also monthly updates via the Trust's monthly briefing system.

There were five open meetings for staff:

15 November 2006, County Hospital, Durham

28 November 2006, West Park Hospital, Darlington

4 December 2006, County Hospital, Durham



4 December 2006, Derwent Clinic, Shotley Bridge 22 January 2007, County Hospital

Over 40 people attended these meetings and in addition it was discussed at the trust's joint consultative committee.

# 5.4 Meetings with stakeholders

The trusts also offered to meet with interested groups or organisations and representatives met with and/or presented the proposals to the following stakeholders:

CANVAS and SURF (service user groups)

Patient and Public Involvement Forum

20 December 2006

Durham Co. Council's Health Scrutiny Committee

8 January 2007

### 5.5 Written communications

The Trusts received 10 written replies to the consultation from individuals and organisations.

# **6 COMMENTS RECEIVED**

There was general support for the proposal. In the main, people understood the reasons behind the proposed relocation of the PICU and agreed that there had to be a balance between providing locally based services and ensuring the best use of resources.

During the consultation a number of concerns were raised and people sought assurances on several issues. The following section summaries and addresses these concerns.

## 6.1 **Public meetings**

Several key themes emerged from the public meetings.

- There was some concern about the future of Lanchester Road Hospital and its ability to meet future clinical needs.
- Assurances were sought that there was sufficient capacity at West Park Hospital to meet the needs of the people of County Durham and Darlington.
- People requested clarification about eligibility for the free taxi service and sought assurances on its continuation.
- There was disappointment about the likely loss of local services, particularly in Derwentside.



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- People asked about the Choice agenda and whether people from the north of County Durham would be able to access services in Newcastle rather than Darlington.
- Some people were sceptical about the consultation process, given that the original commitment had been to move the unit back to Durham.

We were able to respond to these comments as follows:

- We reassured people that the new Lanchester Road Hospital would go ahead and that it would be designed in such a way that future changes to clinical need could be accommodated.
- We confirmed that a further review of admissions for the second half of 2006 demonstrated that West Park Hospital was able to meet the psychiatric intensive care needs of people in County Durham and Darlington.
- We reassured people that the trust would continue to provide a free taxi service to carers, family or close friends and promote the availability of this service.
- We explained that most people will continue to receive their mental health care near to their home. The investment that has been made in developing community based services such as the crisis teams and early intervention services means that more and more people can be treated at home.
- Once the Choice agenda, as it applies to mental health services, becomes clearer the trust and PCT will consider how this could be implemented and built into the commissioning arrangements.
- The original plan was to move the service back to Durham. However, our review demonstrated that the psychiatric intensive care unit at West Park Hospital was fully able to meet the needs of people from County Durham and Darlington. This is due, to a large extent, to the success of our community based services, which have significantly reduced the number of people who need to spend time in hospital.

# 6.2 **Meetings with staff**

Nursing and medical staff raised a number of operational issues, which need to be addressed by the Trust regardless of the outcome of the consultation:

- Some problems with the safe room at the County Hospital, which are in the process of being resolved.
- Difficulties with the transportation of patients from the north of the County to West Park Hospital. The Trust is currently reviewing the transport protocol with a view to enhancing the transport arrangements for patients.
- Access to psychiatric intensive care beds at West Park Hospital.
   Procedures have been tightened and the trust has appointed a consultant lead for psychiatric intensive care services.



• Staffing levels, which we will continue to monitor and review.

Some staff were also concerned that West Park Hospital did not have the capacity to cope with the demand for PICU beds in County Durham and Darlington.

# 6.3 Written responses

Written responses have been received from:

- County Durham and Darlington Acute Hospitals NHS Trust Darlington PCT
- Shildon Town Council
- Edmondsley Paris Council
- Derwentside District Council
- Service Users Reaching Forward (SURF)
- Rethink
- Medical and nursing staff at the County Hospital
- Dr P T Fletcher (Chester-le-Street GP)
- An individual response
- Darlington PCT

Of those who responded in writing, two fully supported the move. The others did not oppose the move but sought assurances, requested clarification or had concerns about certain issues, which we believe we have addressed in this report.

The main issues raised were similar to those raised at the public meetings, namely:

- Would there be sufficient capacity at West Park Hospital to meet the needs of the people of County Durham and Darlington?
- Disappointment about the likely loss of local services, particularly in Derwentside and the distance involved for visitors.
- Clarification of availability of free taxi service.
- Would people from the north of County Durham be able to access services in Newcastle rather than Darlington?
- Concern about impact on staff at the County Hospital.
- Future proofing of Lanchester Road Hospital
- Scepticism about the consultation process and the change to the original commitment to transfer services back to Durham.
- Operational issues safe room, transport, access to PICU beds.



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### 7 CONCLUSIONS AND RECOMMENDATIONS

A full and robust consultation has been carried out. The comments received have been very helpful and have allowed clarity to be brought to the concerns that people had, particularly concerning the future of Lanchester Road Hospital and the capacity of West Park Hospital.

It is clear that there is a desire to maintain local services however, the Trust is confident that because of the development of our community based services many more people will be able to receive the care and treatment they need in their own home.

As a result of the feedback the following issues will be addressed by TEWV NHS Trust:

- The operational issues raised by staff relating to the safe room, patient transfers, access to beds and staffing levels.
- Improve the way in which awareness is raised of the free taxi service and ensure it is made available to family, carers and/or close friends
- Consider how the Choice agenda is implemented as it relates to mental health services.
- Continue to monitor the psychiatric intensive care services and capacity at West Park Hospital.
- 7.1 On 20 March 2007, following the consultation, the County Durham Primary Care Trust (PCT) approved the permanent relocation of the PICU beds to West Park Hospital.

Full details of the comments or copies of the written replies (individual respondents are anonymised) are available on request from the communications department, Tees, Esk and Wear Valleys NHS Trust, Flatts Lane Centre, Normanby, Middlesbrough, TS6 OSZ or by emailing Julie.oliver@tney.northy.nhs.uk.



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	APPENDIX 2		
Сар	Capacity at West Park Hospital		
Comments		Response	
1.	There was concern that West Park did not have sufficient capacity to cope with demand from County Durham and Darlington.	We are confident that West Park Hospital has the capacity to cope with the needs of people in County Durham and Darlington but we want to ensure that the needs of local people continue to be met. The Trust has recently appointed a consultant lead for psychiatric intensive care services, who will closely monitor capacity and we have tightened our admission procedures to further improve access to beds.	
2.	Questions were asked about the impact of the merger and whether there had been an increase in admissions to the PICU since April 2006	The original review covered a period up to May 2006 but following requests made during the consultation, we undertook a further review of admissions for the period 1 June – 23 January 2007. Admissions during this time followed a similar pattern to that of the review period and at no time did we exceed 100% occupancy.	
3.	We were asked to extend the review period to give a clearer picture of how West Park Hospital is able to cope with demand from Derwentside.	As mentioned above, admissions for the period 1 June – 23 January followed a similar pattern to that of the review period. During this eight month period there were 14 admissions from north Durham.	
4.	We were asked whether the delay to Ad>ance would have an impact on the use of beds at West Park.	Progress on the new development in Middlesbrough will not impact on the use of beds at West Park Hospital.	
5.	There was a query about whether anyone had been transferred out of our area for treatment, since June 2006.	Between 1 June and 23 January 2007 we had to transfer 1 person to a PICU outside of our area.	
6.	We were asked to clarify Department of Health guidance on recommended figures for the number of intensive care beds per head of population.	The Department of Health has not produced any recommended figures for the number of intensive care beds per head of population. They have recommended that any intensive care unit should contain between 12 and 15 beds.	



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The	The future of Lanchester Road Hospital		
	Comment	Response	
7.	Some people were worried that this would mean the new hospital would not be built.	The proposal to permanently provide psychiatric intensive care services at West Park Hospital in Darlington will not compromise the plans to build a new hospital in Durham. We are continuing to prepare for the new facility and over £2.5 million is being spent on enabling works – that is work that we need to complete on the Earls House Hospital site before construction work starts. Buildings have already been demolished to make way for the new hospital and improvements to the access road and the electrical and heating services are ongoing.	
8.	We were asked whether the new hospital could be adapted in the future if clinical needs changed – for instance if at some point there was a need for PICU beds.	The Trust and the PCT are both committed to building the new facility, which will be 'future proofed'. This means the building will be designed to allow for future changes in clinical need.	
9.	Some people asked what would happen with any savings that were made through not providing a PICU in Lanchester Road Hospital and whether money would be re-invested in front line mental health services.	To support the transfer of psychiatric intensive care services to Darlington in April 2005, the Trust increased staffing levels on the acute wards at the County and has continued to invest in community based services. The Trust agrees a level of funding with its commissioners (the PCTs) for providing mental health services for the people of County Durham and Darlington. We remain committed to investing in front line mental health services and changes to services will be reflected in future funding.	
10.	We were asked whether there would be a step-down unit at the new hospital.	There is a rehabilitation ward sited at Earls House at the same location as the new Lanchester Road Hospital.	



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Tran	Transport		
	Comment	Response	
11.	Clarification was sought on who would be able to use the free taxi service. There was some concern that we would impose restrictions, which would mean that people who needed it would not be eligible.	The Trust will continue to provide a free taxi service, irrespective of the availability of pubic transport. We will ensure that all service users and their carers from north Durham who are admitted to West Park Hospital are made aware of this as part of the admission and care planning process. We also realise that the people closest to our service users are not necessarily family or carers and, where appropriate, close friends will also be offered a free taxi.	
12	Some people felt that the distance and travelling time was an issue for visitors regardless of the availability of a free taxi service.	We acknowledge that some people will have to travel further to visit their loved ones but in most cases this will be only for a short period of time. We are committed to providing locally based services and for most people this means receiving the care they need in or close to their own home. However, we need to balance the desire to provide local services with the need to ensure we make the best use of our resources. This will mean, as with other specialist health services, that a small number of people will need to travel to receive their treatment.	
13.	There was concern about the impact on a service user of having to travel to Darlington from Durham and Derwentside when they are likely to be in a high state of distress.	We accept that the distance may cause distress to some people although, as previously reported, this only affects small numbers of people. We would also stress that before a service user is transferred a clinical risk assessment is carried out. If this indicates that the risk of transfer is too great, then the patient would be cared for in a safe environment until it was assessed to be safe to transfer them.	



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14.	The need to ensure the safety of both the patient and staff when transferring service users was stressed.	The safety and wellbeing of our patients and staff remains of paramount importance and the Trust is currently reviewing its transport protocol with a view to enhancing the transport arrangements for patients.	
Impa	Impact on other mental health services		
	Comment	Response	
15	Questions were asked about the impact on other services, such as rehab. and special care and whether there would be the right level of support available in these areas.	We agree that that the psychiatric intensive care services should not be seen in isolation. They are part of a much wider spectrum of care which includes rehabilitation services and special care. We need to ensure that we are able to provide the most appropriate level of care in the most appropriate environment and we will continue to review all our services.	
16	We were asked about the impact on demand for low secure beds.	This should not have an impact on demand for low secure beds and our needs continue to be met locally.	
17	Concern was raised about the impact on the acute wards at the County Hospital of not having a PICU and the availability of a safe room.	As agreed following the original consultation, we increased staffing levels and created a safe room at the County Hospital. Since that time staff on the acute wards at the hospital have continued to work well together with no significant negative impact. However, some concern was raised during the consultation about the staffing levels and we are looking into this and will continue to review and monitor recruitment and retention of staff. The safe room has also been reviewed and improvements implemented.	



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Con	Continuity of care		
	Comment	Response	
18	Some people were concerned about the impact on existing relationships that service users have with health professionals in the north, such as the crisis teams.	It has always been the case that small numbers of people have had to travel for treatment, whether this be from the north of the patch to the south, or vice versa. Community teams have been able to maintain contact and provide support to these people and given the low numbers affected we believe this will continue to be managed effectively.	
19	There was a concern about the impact on patients of being in a strange environment and being cared for by clinicians they do not know.	This is a specialist service and people who need psychiatric intensive care will always be cared for by a specialist team of people in a unit that is separate to the acute ward. The aim is always to ensure that the person is able to return to their home ward as quickly as possible.	
20	We were asked for a commitment that people would not be moved from one hospital to another during the period that they need to be cared for in a PICU.	People will only transfer from a PICU when it is clinically appropriate for them to do so.	
21	We were asked how this would affect the transfer of information between north and south Durham, such as information on advanced requests.	As mentioned above, small numbers of people have always had to travel for treatment and there are procedures in place to ensure the necessary information is transferred.	



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Rete	Retention of local services		
	Comment	Response	
22	Some people felt that we were reneging on original promises made during the merger consultation to retain local services. People in Derwentside, in particular, felt they were losing yet more services.	We are committed to ensuring that people receive the care and treatment they need as close to their home as possible. The recent investment in community based services means that we are able to treat more people at home, rather than in hospital. Most people who need hospital care will be able to stay in Durham. However, we need to strike a balance between providing locally based services and ensuring we use our resources efficiently.	
23	There was a feeling that this was merely a cost cutting exercise and not in the interests of the patients and their families.	See 22.	
Con	sultation process		
	Comment	Response	
24.	Some people felt that the consultation was a 'done deal' and that a decision had already been made.	Whilst we believed that permanently relocating the unit at Darlington was the best thing to do, it was important to us to find out what local people felt before a final decision was made. We have received some very useful feedback during the consultation process, which we will use to address the concerns that have been raised.	



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25.	Some people did not understand what had changed since the original consultation. They felt we had reneged on assurances that it was a temporary move and that the PICU would relocate to Durham once the new hospital had been built.	The original plan was for the service to move back to Durham once the new hospital opened. However, our review demonstrated that West Park Hospital was fully able to meet the needs of people from County Durham and Darlington. This is due, to a large extent, to the success of our community based services, which have significantly reduced the number of people who need to spend time in hospital. We have a duty to ensure that we spend public money wisely and this means striking a balance between providing locally based service and ensuring existing resources are used efficiently.	
Pati	ent choice	1	
	Comment	Response	
27	Some people wanted to know whether people from north Durham could choose to go to Newcastle or Gateshead instead of Darlington.	Once the 'Choice' agenda, as it applies to mental health services becomes clearer, the Trust and the PCT will consider how this could be implemented and built into the commissioning arrangements.	
28	It was felt that people in the north of County Durham were being discriminated against. Because there is no 'Choice' in mental health services people are unable to access services, which are much closer to their home, such as in Sunderland	See 27.	
29	We were asked by Derwentside PCT to introduce a pilot project to give service users from Derwentside the choice (by using advance requests) to use a different PICU.	See 27.	



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# **Appendix 3**

## **Consultation stakeholders**

Local community

Tees, Esk and Wear Valleys NHS Trust staff Patient and public involvement forum County Durham Mental Health Partnership Board Darlington Mental Health Partnership Board **Darlington PCT** County Durham and Darlington Acute Hospitals NHS Trust North East Ambulance Service NHS Trust Northumberland, Tyne and Wear NHS Trust **Durham Constabulary** Local MPs **Durham County Council Darlington Borough Council** District, town and parish councils User and carer groups Local union representatives Community and voluntary organisations Prison service Fire Brigade Local media