



Special Adults, Wellbeing and Health Overview and Scrutiny Committee

Date Monday 9 May 2016
Time 9.30 am
Venue Council Chamber, County Hall, Durham

Business

Part A

Items during which the Press and Public are welcome to attend. Members of the Public can ask questions with the Chairman's agreement.

1. Apologies
2. Substitute Members
3. Declarations of Interest, if any
4. Any Items from Co-opted Members or Interested Parties
5. Proposed reconfiguration of Organic Inpatient Wards serving County Durham and Darlington - Reports of the Assistant Chief Executive, Durham County Council; Tees, Esk and Wear Valleys NHS Foundation Trust and North Durham CCG/Durham Dales, Easington and Sedgefield CCG and Darlington CCG (Pages 1 - 134)
6. NHS Foundation Trust Quality Accounts 2015/16 - Verbal report of the Principal Overview and Scrutiny Officer, Assistant Chief Executive's Service
7. Such other business as, in the opinion of the Chairman of the meeting, is of sufficient urgency to warrant consideration

Colette Longbottom
Head of Legal and Democratic Services

County Hall
Durham
28 April 2016

To: **The Members of the Adults, Wellbeing and Health Overview and Scrutiny Committee:**

Councillor J Robinson (Chairman)
Councillor S Forster (Vice-Chairman)

Councillors J Armstrong, R Bell, P Brookes, J Chaplow, P Crathorne, M Davinson, K Hopper, E Huntington, P Lawton, H Liddle, J Lindsay, O Milburn, M Nicholls, L Pounder, A Savory, W Stelling, P Stradling and O Temple

Co-opted Members:

Mrs B Carr and Mrs R Hassoon

Co-opted Employees/Officers:

Dr L Murthy, Healthwatch

Contact: Jackie Graham

Tel: 03000 269704

**Special Adults Wellbeing and Health
Overview and Scrutiny Committee**

9 May 2016



**Proposed reconfiguration of Organic
Inpatient (Dementia) Wards serving
County Durham and Darlington**

Report of Lorraine O'Donnell, Assistant Chief Executive

Purpose of the Report

- 1 To provide members of the Adults Wellbeing and Health Overview and Scrutiny Committee with the results of the statutory consultation exercise undertaken in respect of proposals by Tees, Esk and Wear Valleys NHS Foundation Trust and the three CCGs in County Durham and Darlington to reconfigure Organic Inpatient (Dementia) wards serving County Durham and Darlington.

Background

- 2 At a special meeting of the Adults Wellbeing and Health OSC held on 14 December 2016, members received reports from Tees, Esk and Wear Valleys NHS Foundation Trust and the three CCGs regarding proposals to consult on options for the reconfiguration of Organic Inpatient wards serving County Durham and Darlington.
- 3 Organic illnesses in relation to the proposal are predominantly those conditions we know as being dementia.
- 4 Under Section 244 of the NHS Act 2006, local NHS bodies have a duty to consult local Overview and Scrutiny Committees on proposals for any substantial development of the health service or substantial variation in the provision in their areas. Scrutiny Committees are also required to consider the extent of consultation undertaken.

Future configuration of Inpatient wards for Older people with Organic Mental Illness in County Durham and Darlington

- 5 Tees, Esk and Wear Valleys NHS Foundation Trust and the 3 CCGs provided the Council with a briefing report and communications and engagement plan setting out how they intend to consult on the proposals, and which members of the Committee commented upon at their meeting.
- 6 Representatives of Tees, Esk and Wear Valleys NHS Foundation Trust as well as North Durham CCG (who are leading on behalf of Durham Dales, Easington and Sedgefield CCG and Darlington CCG) also attended to provide members with information detailing:-
 - The rationale for the review of inpatient services for older people with organic mental health illnesses within County Durham and Darlington;

- The proposed options for future configuration of the service that are to be consulted upon; the number of people affected by the proposed changes; admission rates for each CCG and an evaluation completed by the Mental Health Services for Older People service of each option.
 - The proposed consultation, communication and engagement activities that will be undertaken in informing the local community about the review and what is being proposed and how they can input into the review process.
- 7 The formal consultation process commenced on 4 January 2016 and ended on 28 March 2016.
- 8 The attached report from Tees, Esk and Wear Valleys NHS FT sets out the results of the consultation as well as the feedback obtained during the process. Representatives of TEWV and the North Durham CCG (who are leading on behalf of Durham Dales, Easington and Sedgefield CCG and Darlington CCG) will be in attendance to advise members of the consultation response and the views expressed by the TEWV Board at its meeting held on 26 April 2016 when they considered the consultation report.

Recommendation

- 9 The Adults Wellbeing and Health Overview and Scrutiny Committee is recommended to:-
1. receive this report;
 2. note and comment on the report of Tees, Esk and Wear Valleys NHS Foundation Trust and the results of the consultation and engagement detailed therein.

Background papers

Reports to Special Adults Wellbeing and Health OSC – 14 December 2016

Contact: Stephen Gwilym, Principal Overview and Scrutiny Officer
E-Mail: stephen.gwilym@durham.gov.uk Tel: 03000 268140

Appendix 1: Implications

Finance - None

Staffing - None

Risk - None

Equality and Diversity / Public Sector Equality Duty – An Equality Impact Assessment has been undertaken in respect of the proposals and is attached to this report.

Accommodation - None

Crime and Disorder - None

Human Rights - None

Consultation – The proposed consultation, communications and engagement plan for the review has previously been considered by this Committee and the results of the consultation exercise are detailed within the report of TEWV NHS Foundation Trust.

Procurement - None

Disability Issues - None

Legal Implications – None

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MEETING OF:	Adults Wellbeing and Health Overview and Scrutiny Committee
DATE:	9 May 2016
TITLE:	Report on public consultation on future location and configuration of inpatient assessment and treatment beds for people with dementia in County Durham and Darlington

1. INTRODUCTION & PURPOSE:

- 1.1 This report provides information on the public consultation, which was carried out by the above mentioned organisations on the future location and configuration of assessment and treatment beds for people with dementia in County Durham and Darlington.
- 1.2 The report outlines the communication and engagement activity carried out by the three CCGs and Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) and includes the feedback received during the consultation period.
- 1.3 It aims to provide the committee with assurance that a full and robust consultation has been carried out, in line with Section 244 of the NHS Act 2006.

2. BACKGROUND INFORMATION AND CONTEXT:

- 2.1 In December 2015 we shared our proposals for the public consultation, along with the draft consultation document, with the Adults Wellbeing and Health Overview and Scrutiny Committee at Durham County Council, the Health and Partnership Scrutiny Committee at Darlington Borough Council, Healthwatch Darlington and Healthwatch County Durham. In response to the feedback we received we made a number of changes to our proposed consultation document including revising some of the formatting and including additional information (eg expected savings for each option). We also arranged an additional public meeting in the Easington area.
- 2.2 Following approval of the public consultation process with the two OSCs, we launched a public consultation on 4 January 2016, which closed on 28 March 2016.
- 2.3 We consulted on three options which are outlined in the report (Option 1 to consolidate 30 beds at Auckland Park Hospital, Bishop Auckland in separate sex wards; option 2 to have two single sex wards, one at Auckland Park Hospital and one at the Bowes Lyon Unit in Durham; option 3 to have two mixed sex wards, one at Auckland Park Hospital and one at the Bowes Lyon

Unit). The consultation document stated that Option 1 was the preferred option of mental health professionals at TEWV.

3. KEY ISSUES:

3.1 Raising awareness / providing information about the consultation

We used a range of mechanisms to raise awareness of the public consultation and advise people how they could have their say. Full details are contained in the consultation report and include

- Email and postal distribution of consultation document to a wide range of stakeholders/groups with an offer to meet them to discuss options
- Information posted on the four organisations' websites
- Offers to attend pre-existing or specifically arranged meetings
- News release
- Paid advertising
- Social media
- Posters/leaflets in inpatient public areas
- Specific targeting of hard to reach groups via known community links
- Internal (staff) communication mechanisms

3.2 Meetings

During the consultation we held a number of meetings and open events. Full details are contained in the consultation report and include:

- Four public meetings
- Nine open meetings for service users, their carers and families
- Four open meetings for staff at TEWV
- Attendance at three other meetings (by request)

3.3 Responses and feedback

We received 66 written responses to the consultation. People also gave us their feedback during public and staff meetings. Full details are included in the consultation report.

There were two main issues that people raised during the consultation:

- the benefits of single sex accommodation
- the importance of having locally based services

The majority accepted that single sex accommodation for people with dementia would be ideal. However, people also thought that having locally

based services was important and there was a difference of opinion between which of these two factors was **more** important.

There was strong feeling on both sides (for option 1 and option 3) with no clear mandate from local people on a preferred option.

3.4 Mitigation of issues raised

Three main issues were raised as part of the consultation (further detail contained within the report) and the Board of Directors at TEWV has given its commitment to reducing the potential impact of these issues on service users, their family and carers as follows:

Travel – It was recognised during the consultation that options 1 and 2 (and to a lesser degree option 3) would have an impact on service users, their families and carers, and, as part of the consultation, TEWV gave a commitment that they would do all they could to support them. This would include

- flexible visiting times
- support with travel arrangements including developing a pool of volunteer drivers and using taxis if appropriate (support would be agreed on an individual basis)
- maintaining good communications with families (TEWV already have carer link workers on the wards who work closely with families and they would also investigate how technology can be used more to help families keep in touch).

Mixed sex accommodation (option 3) – A number of people fed back that they thought it was important to have single sex wards and that privacy and dignity would be compromised in mixed sex accommodation. TEWV already have male and female zones at Picktree and other areas of the Trust (as required by the Care Quality Commission) and would do the same at Auckland Park under option 3. Currently there is a greater use of flexible additional staffing on older people mixed sex wards in the Trust when compared to wards that are single sex.

Isolated ward - A number of people were concerned that if option 2 or 3 is chosen then there would be an isolated ward at Bishop Auckland, without support from other wards for emergency and short term staffing. To compensate for this TEWV would increase staffing levels on the ward and this is reflected in the estimated annual savings which are greater for option 1 than for options 2 and 3.

3.5 Recommendation of Board of Directors at TEWV

The Board of Directors at TEWV discussed the consultation report at its public meeting on 26 April 2016. There was a robust discussion by the Board, who noted that there was no clear mandate from the public. Following a lengthy debate about the impact and benefits of each of the options, they agreed to recommend option 1 to the CCGs. However, they also recognised the impact on travel this would have and the importance of providing support for families and carers. They therefore stipulated that if this option was agreed by the CCGs that TEWV would take a proactive approach with families and carers to ensure their transport needs were met.

In addition the Board also agreed to implement all relevant mitigation actions outlined in 3.4 to address the concerns raised during the consultation in terms of impact on service users, their families and carers. (Actions will depend on which option is approved by the CCGs).

4.1 Next steps

The Governing Bodies of the three CCGS will formally consider the feedback received via the consultation process as outlined in the consultation report, along with the recommendation from TEWV and decide which option to implement (this is dependent on receiving assurance from the two OSCs that they are satisfied that a robust consultation has been carried out).

5.1 Recommendations

- 1.4 Members of committee are asked to review the consultation report and agree that a robust consultation has been carried out, as agreed at the committee meeting on 14 December 2015, in accordance with Section 244 of the NHS Act 2006.



**Darlington Clinical Commissioning Group
Durham Dales, Easington and Sedgefield Clinical Commissioning Group
North Durham Clinical Commissioning Group
Tees, Esk and Wear Valleys NHS Foundation Trust**

Improving mental health services for people with dementia in County Durham and Darlington

**Report on consultation about location and configuration of
inpatient assessment and treatment beds**

Contents

Background	3
Proposal	3
The consultation process	4
Raising awareness / providing information	4
Meetings	5
Response to consultation	7
Written responses to consultation	7
Verbal feedback from public meetings	9
Summary of additional issues raised and our responses to them	11
Conclusion	15
Appendices	

Background

Most people who are living with dementia are supported at home, including nursing or residential homes. Some people with complex needs may need to spend a short time in hospital where they can be fully assessed and treated before returning to their home environment or moving to more appropriate accommodation.

Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) provides specialist inpatient assessment and treatment services for people who have dementia. There are currently three 10 bed wards in County Durham and Darlington – one ward at Bowes Lyon Unit, Lanchester Road Hospital in Durham and two wards at Auckland Park Hospital in Bishop Auckland.

Developments over recent years to TEWV's community services, such as specialist support for care homes and general hospitals, mean that fewer people with dementia need to spend time in hospital. Although some people will need to be admitted to hospital, most people with dementia benefit from being in familiar surroundings, which are less disorientating. Inpatient care is now the exception rather than the norm and occupancy levels as well as the number of admissions have reduced over the last two years.

TEWV are confident that 30 beds is adequate to meet the needs of the people of County Durham and Darlington. We now need to make sure that we are offering people who have dementia not only the best possible inpatient environment (should admission to a specialist ward be required), but also that we are making the best use of our resources. This means reviewing the current location and configuration of assessment and treatment beds.

We will retain 30 inpatient beds but reduce the number of wards from three to two (it is not cost effective to run three wards with 10 beds each). The purpose of the consultation was to get views on the future configuration of two 15 bed wards.

Proposal

Senior clinical staff and managers from TEWV's mental health services for older people in Durham and Darlington initially identified a long list of options (14) for the configuration and location of two wards of 15 beds (appendix 1).

They discounted 11 of these options (including a new build and refurbishment of other sites). They were all discounted for two main reasons - they were not affordable (would not result in cost savings) and could not be achieved within required timescales.

We consulted on the three options that are deliverable within timescales and finances:

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree Ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham).

This would result in a saving of £454,000 per year (staffing costs).

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham (and close one of the wards at Bishop Auckland).

This would result in a saving of £332,000 per year (staffing costs).*

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland (and close one of the wards at Bishop Auckland).

This would result in a saving of £332,000 per year (staffing costs).*

* Savings for options 2 and 3 are less because additional staffing would be required on the isolated ward at Auckland Park Hospital.

Option 1 was the preferred option of mental health professionals at TEWV.

More information along with the benefits and disadvantages of each option is contained in the consultation document (appendix 2).

The consultation process

We shared our plans for the consultation, along with the draft consultation document, with Adults Wellbeing and Health Overview and Scrutiny Committee at Durham County Council, the Health and Partnership Scrutiny Committee at Darlington Borough Council, Healthwatch in Darlington and Healthwatch in County Durham. As a result we made a number of changes to our proposed consultation document and plans including arranging an additional public meeting in the Easington area.

We launched a public consultation on 4 January 2016, which closed on 28 March 2016.

Raising awareness / providing information about the consultation

We distributed our consultation document (appendix 2), which included details of the public meetings and a questionnaire, to a wide range of stakeholders (see overleaf) and posted information on our four organisations' websites.

We also offered to attend pre-existing events / meetings or to arrange specific meetings with stakeholder groups and organisations.

*Unfortunately, there was an error in the **electronic** version of the document that we initially distributed/posted on the website (the questionnaire at the back, option 2 and option 3 had the same description). This was rectified quickly on the website and a second email sent to stakeholders with the correct version.*

Stakeholders – distribution list for consultation document	
NHS	Local community
• Tees, Esk and Wear Valleys NHS Foundation Trust	• Health Overview and Scrutiny Committees
• North Durham CCG	• Healthwatch
• Durham Dales, Easington and Sedgefield CCG	• Durham County Council, including councillors
• Darlington CCG	• Darlington Borough Council, including councillors
• County Durham and Darlington NHS Foundation Trust	• Local service user and carer groups and organisations
• GPs	• Local voluntary and statutory organisations (including Age UK and Alheimers Society)
	• Area Action Partnerships
	• MPs
	• TEWV governors and members

In addition, we promoted the consultation, the public meetings, how local people could find out more information and have their say in a number of different ways:

- We issued a news release (appendix 3)
- We used social media to signpost people to our websites for more information
- We used paid advertising in the Northern Echo and, as a result of a suggestion by a member of the public, in the Sunderland Echo (appendix 3).
- We distributed information in TEWV's inpatient public areas and via TEWV staff to raise awareness with current service users and their families.
- We specifically targeted other hard to reach groups via known community links (eg the Muslim community, the farming community, the gypsy and traveller community, and the lesbian, gay, bi-sexual and transgender community).
- We used internal communication mechanisms to promote within our own organisations (eg ebulletins and team briefing process)

Meetings

Public meetings - we held four workshop style public meetings:

Date: 5 February, 2016
Time: 2.00 - 4.00pm
Venue: St Patrick's Hall, Victoria Road, Consett, Co Durham, DH8 5AX
No. of attendees: 22

Date: 9 February, 2016
Time: 6.00 - 8.00pm
Venue: Bishop Auckland Town Hall, Market Place, Bishop Auckland, Co Durham, DL14 7NP
No. of attendees: 10

Date: 25 February 2016
Time: 10.00am - 12.00 noon
Venue: The Dolphin Centre, Horse Market, Darlington, Co Durham,
DL1 5RP
No. of attendees: 10

Date: 29 February 2016
Time: 10.00am - 12.00 noon
Venue: The Glebe Centre, Durham Place, Murton, Seaham,
Co Durham, SR7 9BX
No. of attendees: 6

Meetings for service users and their families - we arranged nine open meetings for current service users and their families. These were promoted via TEWV staff and information was displayed in all our inpatient and public areas. We held

- two at Auckland Park Hospital in Bishop Auckland
 - 1.00 – 3.00pm on 27 January 2016
 - 10.00am – 12.00 noon on 7 March 2016
- two at Bowes Lyon Unit in Durham
 - 3.00 – 5.00pm on 20 January 2016
 - 9.30 – 11.30am on 3 March 2016
- one at Derwent Clinic, Consett
 - 1.00 – 3.00pm on 9 March
- two at West Park Hospital in Darlington
 - 2.00 – 4.00pm on 26 January 2016
 - 10.00am – 12.00 noon on 17 March 2016
- two at the Old Vicarage in Seaham
 - 1.00 – 3.00pm on 1 February 2016
 - 10.30am – 12.30pm on 21 March 2016

Only two people attended these meetings (one person at Bishop Auckland and one person at Derwent Clinic). However, we know that family members gave their views in other ways – some attended public meetings and some submitted written feedback about the consultation

Meetings for staff - we also held four open meetings for TEWV staff in Bishop Auckland, Durham and Darlington.

- 2.00 – 4.00pm on 19 January 2016 at Bowes Lyon Unit, Durham
- 2.00 – 4.00pm on 19 January at West Park Hospital, Darlington
- 10.00am – 12.00 noon on 22 January at Auckland Park Hospital, Bishop Auckland
- 9.30am – 11.30am on 27 January at the Old Vicarage, Seaham

Attendance at other meetings – following three requests to attend meetings, members of the CCGs and TEWV attended the following:

17 February 2016 - Durham Dales, Easington and Sedgfield CCG –
Sedgfield patient reference group meeting

24 February 2016 – Darlington Community Council

23 March – Healthwatch Darlington (mental health network)

The consultation was discussed at the following Area Action Partnership (AAP) meetings in County Durham:

27 January 2016	Consett
22 February 2016	Chester-le-Street
9 March 2016	Mid Durham
15 March 2016	Durham

The meeting in Stanley (14 March) was cancelled but information was circulated to members.

The consultation document was distributed to the following AAPs in County Durham:

- 3 Towns Partnership (Crook, Willington and Tow Law)
- Teesdale Partnership (TAP)
- 4 Together Partnership (Ferryhill, Chilton, Cornforth and Bishop Middleham)
- Bishop Auckland and Shildon AAP
- East Durham AAP
- East Durham Rural Corridor AAP (Trimdon and Sedgefield)
- Spennymoor AAP
- Great Aycliffe and Middridge Partnership
- Weardale AAP

The information circulated encouraged board members to comment through the advertised consultation routes.

Response to consultation

Written responses

66 individuals/organisations responded to the consultation in writing (including completing the questionnaire at the back of the consultation document).

We received 57 responses from members of the public and nine responses from stakeholders:

Stakeholder	Preferred option
Bishop Auckland Town Council	1
Dr N Sahoo, GP in Easington locality	3
Blackhall and Peterlee GP practice	3
South Durham CIC (23 GP practices across Easington and Sedgefield)	2
Dementia advisor for Durham County Council	1
Helen Goodman, MP for Bishop Auckland	1 or 2
Public Health Portfolio Lead, Durham County Council	1
Darlington Borough Council Health and Partnership Scrutiny Committee	1
Darlington Borough Council Adult and Housing Scrutiny Committee	1

We received feedback from a number of people who identified themselves as family members who had experience of both Auckland Park and Bowes Lyon Unit. For example:

- A husband of a lady who was being treated at Bowes Lyon Unit in Durham had experience of a mixed sex unit and the problems caused when patients were sexually and socially uninhibited. He felt strongly that single sex accommodation was preferable.
- Someone whose father is currently in Bowes Lyon Unit in Durham felt passionately about maintaining a ward in Durham. This person's mother does not drive and relies on public transport or lifts from family members to visit her husband.
- A visitor to Bowes Lyon felt it would be wiser to close Picktree Ward in Durham because it was too small to have male and female patients together in the same area and that patients needed more space to wander more freely.
- Someone whose mother had been a patient at Bowes Lyon unit and is currently at Auckland Park said that for the dignity and safety of patients it is essential that single sex wards are available. This person felt that although it is further away, the family feels it is a better hospital for the mother's needs.
- The wife of a gentleman who spent several weeks at Picktree in Durham felt that the ward at Bowes Lyon Unit provided excellent care and that there is a need for locally based hospital care.

Some people raised issues that they felt we should consider and gave other suggestions. More detail on page 11.

People were asked to give us their preferred option and the reasons for it. The results are outlined below.

Please note that some people gave more than one reason and some people chose more than one option. One response is not included in these figures (although included in appendix 4) because it was not clear from their comments which option was preferred.

Option 1 - provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

31 individuals/organisations chose this as their preferred option.

The reasons given were:

Reason	Number of times given as a reason
Separate wards for men and women (for safety, privacy and dignity)	15
Better environment with more space	8
Easier to manage / staff single sex wards on one site	8
Location (ease of access)	8

Most cost effective	4
Most appropriate for meeting clinical needs of patients	3
Good hospital	2
Offers greatest flexibility	1

Option 2 – provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

6 individuals/organisations chose this as their preferred option

The reasons given were:

Reason	Number of times given as a reason
Retain some level of service in both the North and South of County Durham	6
Single sex wards	2
Space to expand in Durham if required	1

Option 3 – provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road, Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

29 individuals / organisations chose this as their preferred option.

The reasons given were:

Reason	Number of times given as a reason
Location (ease of access)	24
A good hospital	4
Potential for expansion	2
Mixed sex issues exaggerated	2
Avoid further loss of services for Derwentside	1
Important for men and women to be able to mix	1

Three people also suggested that we consider a fourth option of closing the wards at Bishop Auckland and developing (extending) the Lanchester Road Hospital site. (This was one of the 11 options which were discounted – see appendix 1)

Verbal feedback from public meetings

At the workshop style public meetings we facilitated round table discussions, following a presentation and short question and answer session. A summary of the verbal feedback/comments made at the meetings follows:

Consett

In general, people at this meeting felt that there should be a ward in Durham and that it was too far to Bishop Auckland. They said public transport was poor and there was concern that the impact on carers and family members on travelling long journeys to visit loved ones had not been fully recognised. They challenged the information we provided at the meeting about travel and journeys with public transport. (This information had been produced by using the Traveline* website <http://jplanner.travelinenortheast.info/>. Because of concerns about its accuracy we did not provide this information at subsequent meetings). Attendees also queried how easy it would be to find volunteer drivers.

People were full of praise for the care on Picktree and some people felt that a mixed sex ward was not a problem as long as there were separate bathroom facilities.

People felt very strongly that Derwentside had already lost a number of services and that services in Durham should remain.

**Traveline is a North East Transport Information Service, which is a partnership of local authorities and transport operators throughout the north east of England.*

Bishop Auckland

In general, people at this meeting felt that because the evidence supported separate male and female wards, that option 1 would be the best way forward. Because the numbers of people who need to spend time in hospital is relatively low, people felt it was important that they had the best possible environment.

People understood the need to save money and the rationale for option 1 but they were also aware of the impact this would have on some families. People said that it would be important to do everything possible to support people who needed to travel further and to make sure that staff communicated well with families.

Darlington

In general, people at this meeting felt that option 1 was the best option and that they did not want mixed sex wards. They said it was important to look at what was best for all of County Durham and Darlington and felt that Auckland Park offered the best environment.

People recognised the impact that option 1 would have on some families and said it was important that TEVV and the CCGs gave a commitment to support families. They talked about support for transport and were concerned about how the trust would develop a pool of volunteer drivers. They also talked about other ways of supporting families such as flexible visiting and café opening hours.

Murton

Differing views were expressed at this meeting. People recognised the benefits of single sex wards but were concerned about travel. Someone also talked about the importance of choice (eg being able to access beds provided by Northumbria, Tyne and Wear NHS Foundation Trust in Sunderland) and of involving carers in decisions about where to go. (*People in the Easington area with dementia may choose to be admitted to a bed in Sunderland. This will not change*).

Verbal feedback from meetings with TEWV staff

Bowes Lyon Unit, Durham

In general, staff who attended the meeting felt that option 3 (maintaining the mixed sex ward in Durham) was the best option. They felt that the accommodation and outdoor space at Picktree was good and said there were some benefits to having a mixed sex ward where people could mix, as in everyday life. They were concerned about the travelling for families and that Auckland Park did not have a local accident and emergency department.

West Park Hospital, Darlington

In general, staff who attended the meeting felt that option 1 was the best option. They understood that savings needed to be made and felt that this offered the best way forward.

Auckland Park Hospital, Bishop Auckland

In general, staff who attended the meeting felt that option 1 was the best option. They felt the environment was better at Auckland Park, offering more floor space and room for therapeutic activities. They also felt it was an opportunity to develop a centre of excellence for dementia services. They recognised the impact on families and agreed that we needed to make sure they were supported to be able to visit their loved ones.

The Old Vicarage, Seaham

Staff who attended the meeting unanimously agreed that single sex accommodation was more important than travelling distance to a ward. They expressed concern about travelling for families and stressed the need to support families. They highlighted the additional travelling time for staff and discussed ways of mitigating this (such as conference calls and web based meetings). They felt the facilities were better at Auckland Park and expressed significant concern about stand-alone wards.

Summary of additional issues raised (in writing and at meetings) and our responses to them

Increasing demand for beds and care home pressures

Concerns/issues raised

Some people were concerned that there would not be sufficient capacity to cope with the demand for NHS inpatient assessment and treatment beds. People are living longer and in the future more people will have dementia. Nursing homes are under increasing pressure and some are closing down. Some people had concerns about the quality of care in nursing homes as well as the training and support that's available for staff in care homes.

Our response

Our first priority is to support as many people as possible to remain in their home environment, this includes care homes. Although some people will need and benefit from admission to hospital, people with dementia generally want to stay in familiar surroundings which are less disorientating. To support this we have invested in

specialist support for care homes, including training for staff, and this has been very successful. We will continue to work closely with care homes to make sure people with dementia are getting the care and support they need.

We are confident that we have sufficient care homes within County Durham and Darlington. However, if someone's preferred home is full then that person may need to move into another setting until their home of choice has a vacancy.

Over the last few years we have seen a decrease in the number of admissions to hospital as well as the time people spend as an inpatient. The figures in the consultation document show that since TEWV reduced to 30 beds, on average just 24 beds were occupied. We are confident that 30 beds are sufficient.

On the rare occasions that beds are full, or when there isn't an appropriate male or female bed available, the process would be the same as it is now, ie the individual would be admitted to the nearest appropriate ward. Currently some men from Durham are admitted to Bishop Auckland because they need to be admitted to a male only ward.

Transport and access for visitors and carers

Concerns/issues raised

There was concern about the impact of options 1 and 2 on families. It would mean additional travel to visit their loved ones in all weathers and people wanted to know what consideration we'd given to this and what commitment we would give to providing support for transport and whether there would be a limit put on this. Specific queries and concerns were raised about how we would build up a pool of volunteer drivers and about parking problems. We also received suggestions about what we could do to support people such as linking with other organisations to provide transport and reviewing the café opening times.

Our response

We would do everything we could to support families and we are grateful for the suggestions people have made. TEWV would make sure visiting times are as flexible as possible and would help with travel arrangements. For instance, the Trust is developing a pool of volunteer drivers and is currently advertising and recruiting volunteers. They would also provide taxis if appropriate.

The support that people need would vary from person to person and would be agreed on an individual basis with the family / carers.

We are aware that car parking can sometimes be a problem at Bishop Auckland and, regardless of which option is agreed, TEWV has already agreed to increase the number of parking spaces for patients' visitors at Auckland Park Hospital.

We are grateful for the suggestions about how we can support families, such as café opening times and linking in with other organisations' transport plans and, once we have agreed which option will be implemented we will look at this in more detail, working with families and carers.

We don't underestimate the impact on the individual families of option 1 and 2, particularly in bad weather, and we would do all we can to support them. However, it is also important to remember that the vast majority of people with dementia receive their care in their home environment. Only around 5% of the people that we support need to spend time in hospital, for, on average 60 days.

The financial impact of the changes

Concerns/issues raised

Some people felt that the consultation focussed on financial issues and what would be easier for NHS staff, rather than what would be best for patients and families; we were also challenged about whether it was the best long term solution. Some people also queried the cost of providing support for transport and whether this had been taken into account.

Our response

We also want what's best for patients and that includes making sure we make the best use of our limited resources (tax payers' money). We need to make sure we are using the funding available to us to provide the best possible service for all patients, both in the community and in our hospitals.

We have strengthened our community services and now just 5% of people with dementia that we support need to spend time in hospital.

We are confident that 30 beds is sufficient to meet the needs of people in Durham and Darlington who do need to be admitted (the figures in the consultation document demonstrate this). However, it is not cost effective to manage three wards with 10 beds each (two wards can be managed safely and effectively with fewer staff than it takes to run three wards).

The cost of providing support to families for transport is not included in the savings as it's impossible to quantify in advance. However, we do not believe it will have a significant impact on the savings.

Other options, including the extension of Bowes Lyon Unit

Concerns/issues raised

Some people asked whether we had considered other options such as extending the Bowes Lyon Unit, using nursing homes, using beds at the University Hospital of North Durham, or not making any changes.

Our response

Our first priority is to support as many people as possible to remain in their home environment, this includes care homes. It is much better for them if they are able to remain in familiar surroundings. However, some people will need and benefit from admission to hospital for short periods of time.

Extending Bowes Lyon Unit was on TEWV's 'long list' of options (appendix 1). However, this was discounted because it would have meant a new building, attached

to the existing facility and this was not achievable within timescales or financially viable.

We are not aware that there is space available at the University Hospital of North Durham. However, even if there was available space the wards would require substantial internal modifications to meet the requirements for a ward for people with dementia, and this would not be financially viable.

Staying as we are (3 x 10 bed wards) is not an option because it is not cost effective to manage three wards with 10 beds each. We can manage two 15 bed wards safely and effectively with fewer staff than we need to manage three 10 bed wards.

Communicating with families and carers

Concerns/issues raised

People stressed the importance of good communications between staff and families, particularly when they live further away. We received suggestions on how to improve this such as using Skype and having carer champions on the wards.

Our response

We wholeheartedly agree about the importance of communications between staff and families and are grateful for the suggestions. TEWV already has carer link workers on our wards who work closely with families. The Trust will also look at how they might use Skype to communicate with families.

Managing mixed sex accommodation and/or isolated wards

Concerns/issues raised

Some people were concerned about how we would manage mixed sex wards, ensuring effective segregation, and that there would not be sufficient nurses to do this. Conversely, some people said that having mixed sex wards was not unusual and should not be a problem, if handled correctly. Some people also felt there were some benefits to having mixed sex wards where people could mix, as in everyday life.

Some people were also concerned about the safety of patients in an isolated ward, with no additional staff to call on in an emergency.

Some people felt it was important to be near to an accident and emergency department such as the University Hospital of North Durham. There is no accident and emergency department at Bishop Auckland General Hospital.

Our response

We already have male and female zones at Picktree (as required by the Care Quality Commission*) and would do the same at Auckland Park under option 3. However, it is difficult to manage patients with advanced dementia as they are unlikely to recognise and observe male or female only areas.

TEWV has mixed sex wards in other areas of the trust that adhere to the CQC guidance and which they are able to manage although additional staffing is often needed to do this safely.

The benefits of replicating everyday life (ie having a mixed sex ward) need to be balanced against having vulnerable and sexually uninhibited male and female patients in one ward.

If we choose option 2 or 3 then we would have an isolated ward at Bishop Auckland, without support from other wards that are close by for emergency and short term staffing. To compensate for this we would increase staffing levels on the ward and this is reflected in the estimated annual savings. If we choose option 1 Roseberry Ward will be the only inpatient ward at Bowes Lyon. However, in an emergency the ward could call on colleagues at Lanchester Road Hospital, on the same site,

The nearest accident and emergency department for Auckland Park Hospital is Darlington Memorial Hospital which is 11 miles away. In an emergency the ward would call 999 for an ambulance.

**Care Quality Commission guidance states that “All sleeping and bathroom areas should be segregated, and patients should not have to walk through an area occupied by another sex to reach toilets or bathrooms. Separate male and female toilets and bathrooms should be provided, as should women-only day rooms.*

“It may be acceptable, in a clinical emergency, to admit a patient temporarily to a single, en-suite room in the opposite-gender area of a ward. In such cases, a full risk-assessment should be carried out and the patient’s safety, privacy and dignity maintained. Steps should be taken to rectify the situation as soon as possible.”

Respite care

Concerns/issues raised

The issue of the need for adequate respite care was raised.

Our response

TEWV is not commissioned to provide respite services in older people’s services and this is not part of this consultation.

Conclusion

Summary of feedback received

During the consultation there were two main issues for people:

- the benefits of single sex accommodation
- the importance of having locally based services

The majority accepted that single sex accommodation for people with dementia is preferable. However, there was a difference of opinion between what was **more** important – having locally based services or having single sex accommodation.

There was strength of feeling on both sides of the debate.

Based on the public meetings, people in the north of the county (eg Durham City, Chester-le-Street and Derwentside) were in favour of option three and maintaining locally based services; some people also felt that mixed sex wards were not a problem.

People in the south of county (eg Bishop Auckland and the Wear Valley, Teesdale and Sedgefield) and Darlington were, in the main, in favour of option one and providing single sex wards although they recognised the impact this would have on families/carers and wanted assurance that everything would be done to support families to visit their loved ones.

Based on the written feedback, two more people voted for option 1 over option 3.

Option 1:	31
Option 2:	6
Option 3:	29

The main reason given for choosing option 1 was being able to provide separate wards for men and women but some people also felt this would provide a better, more spacious environment and that it would be easier to manage services on a single site. Some people also chose it because it was more accessible.

Overwhelmingly, the main reason given for choosing option 3 was location (ease of access).

As indicated in the consultation document the preferred option of mental health professionals at TEWV was option 1. The main reason for this is separate wards for men and women. Patients with advanced dementia often display behaviour that is challenging and can be socially and sexually uninhibited and experience shows that separate male and female wards is the best option for these vulnerable patients.

Appendices

Appendix 1 – Long list of options

Appendix 2 - Consultation document

Appendix 3 – Media coverage

Appendix 4 - Copies of written responses, anonymised where appropriate

Appendix 1 – Long list of options

Long list of options for location of two 15 bed assessment and treatment wards for older people with dementia in County Durham and Darlington

- Provide two wards at Auckland Park Hospital (a male and female) and close Picktree Ward at Bowes Lyon Unit
- Provide separate male and female wards on separate sites (one at Auckland Park Hospital) and one at Bowes Lyon Unit
- Provide a mixed sex ward at Bowes Lyon Unit and a mixed sex ward at Auckland Park
- Refurbishment of alternative Trust property eg Lanchester Road Hospital
- Refurbishment of non-Trust property eg Sedgfield Community Hospital –
- New build - existing site
- New build - alternative Trust site
- New build non-Trust site
- Lease of current out of use care home
- Partnership development
- To utilise the vacant space on Oak Ward, West Park to provide 12 organic beds
- To provide 2 x 15 bed organic wards at Bowes Lyon Unit (BLU), LRH (and close wards at Auckland Park and re-locate the current Functional Roseberry ward at BLU)
- Utilise vacant ward at Derwent clinic
- Utilise potential ward availability in Teesside

Appendix 2 – Consultation document



Darlington Clinical Commissioning Group
Durham Dales, Easington and Sedgefield Clinical Commissioning Group
North Durham Clinical Commissioning Group
Tees, Esk and Wear Valleys NHS Foundation Trust

Improving mental health services for people with dementia in County Durham and Darlington

Public consultation
4 January - 28 March 2016

Introduction

The purpose of this consultation is to seek the views of local people on the future location of assessment and treatment beds for older people who have dementia in County Durham and Darlington.

Most people who are living with dementia are supported at home, including nursing or residential homes. Some people with complex needs may need to spend a short time in hospital where they can be fully assessed and treated before returning to their home environment or moving to more appropriate accommodation.

Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) provides specialist inpatient assessment and treatment services for people who have dementia. There are currently three 10 bed wards in County Durham and Darlington – one ward at Bowes Lyon Unit, Lanchester Road Hospital in Durham and two wards at Auckland Park Hospital in Bishop Auckland.

Developments over recent years to TEWV's community services, such as specialist support for care homes and general hospitals, mean that fewer people with dementia need to spend time in hospital. Inpatient care is now the exception rather than the norm and occupancy levels and the number of admissions have reduced over the last two years.

TEWV are confident that they have the appropriate number of beds for the citizens of County Durham and Darlington. We now need to make sure that we are offering people who have dementia not only the best possible inpatient environment (should admission to a specialist ward be required), but also that we are making the best use of our resources. This means reviewing the current location and configuration of assessment and treatment beds.

This document provides more detailed information about a number of options for the future location of inpatient services and explains how you can have your say.

Your views are important to us and will help us decide which option to implement. No decision will be made about the future configuration and location of the wards until after the consultation has taken place.

Background

People are living longer and the number of people who have dementia is increasing. We want to make sure that these people get the best possible care and support.

More people with dementia are able (and want) to receive the care and treatment they need in their home environment. Although some people will need and benefit from admission to hospital, people with dementia generally want to stay in familiar surroundings which are less disorientating. As we strengthen our community services and change the way we work to support patients in their home environment, fewer people need to be admitted to specialist wards and those who are admitted are spending less time in hospital.

Occupancy levels and the number of admissions have reduced over the last two years and between August and November 2014 TEWV reduced the number of inpatient beds on the three assessment and treatment wards from 45 (3 x 15 bed wards) to 30 (3 x 10 bed wards). This is consistent with the number of beds available in other areas of the Trust and other parts of England. Over the last 12 months TEWV has demonstrated that 30 beds is sufficient to meet the needs of the residents of County Durham and Darlington who have dementia (see tables overleaf).

Use of inpatient beds

Time period	Number of admissions	Occupied bed days
1 April 2013 – 31 March 2014	157	13,983
1 April 2014 – 31 March 2015	163	11,113
1 April 2015 – 31 March 2016 <i>(forecast based on eight months data)</i>	145	8,949

Time period	Number of beds	Bed occupancy (%)
1 April 2014 – 30 November 2014	45	75%
1 December 2014 – 30 November 2015	30	81%

The figures show an overall decrease in the number of admissions from County Durham and Darlington over the last two and a half years and a dramatic decrease in the length of time people spend in hospital (occupied bed days), even when the number of admissions increased during 2014/15. This is also reflected in the average bed occupancy rates (% of overall number of beds that are occupied) for the periods immediately before and after the numbers of beds were reduced.

Increasingly, more people are supported in their home environment, whilst those people who are admitted to mental health hospitals have very complex needs, often displaying behaviours that make it difficult for carers to continue to support the person at home.

It is therefore important that the inpatient environment meets the needs of patients who exhibit behaviours that are particularly challenging. This means providing an environment where patients can be cared for safely and with dignity, and where vulnerable patients can be protected. It includes offering spacious accommodation where patients can move around freely, with places where they can be quiet as well as other areas that are more stimulating.

In doing this we must also make sure that we make the best use of tax payers' money and use our limited resources as effectively as possible.



Our current inpatient services for people with dementia

In County Durham and Darlington (shaded in green on map) there are currently three inpatient wards providing assessment and treatment services for people who have a dementia:

- Picktree Ward, Bowes Lyon Unit, Lanchester Road Hospital, Durham (10 beds) – mixed sex ward with designated sleeping areas for men and women
- Ceddesfeld Ward, Auckland Park Hospital, Bishop Auckland (10 beds) – single sex (male) ward
- Hamsterley Ward, Auckland Park Hospital, Bishop Auckland (10 beds) – single sex (female) ward

(At Bowes Lyon Unit in Durham we also have an assessment and treatment ward – Roseberry Ward - for older people with mental health problems such as psychosis, severe depression or anxiety (functional illnesses). There is a second functional ward at West Park Hospital in Darlington. People with different illnesses have very different needs and it is nationally recognised good practice to care for them in different wards. These wards are not part of this evaluation.)

The need for change

We regularly review our services and facilities to make sure that the people who use them are getting the care they need, when and where they need it, and that we are using our limited resources effectively.

As more people with dementia are supported in their home environment, we need fewer beds. It is, of course, important that there are inpatient beds available locally when patients need them but we also need to make sure that we are

- providing the best possible environment and
- making the best use of tax payers' money.

It is much more efficient and cost effective to manage two wards with 15 beds than three wards with 10 beds (two wards can be managed safely and effectively with fewer staff).

Our proposal

We will retain 30 inpatient beds but reduce the number of wards from three to two.

There are three options open to us:

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree Ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham).

This would result in a saving of £454,000 per year (staffing costs).

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham (and close one of the wards at Bishop Auckland).

This would result in a saving of £332,000 per year (staffing costs).*

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland (and close one of the wards at Bishop Auckland).

This would result in a saving of £332,000 per year (staffing costs).*

* Savings for options 2 and 3 are less because additional staffing would be required on the isolated ward at Auckland Park Hospital.

Option 1 *(the preferred option of clinicians)*

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Benefits

- Separate wards for men and women. Because more people are being supported at home, those who are admitted to hospital have more complex needs. Patients often display behaviour that is challenging and can be socially and sexually disinhibited. Clinical experience shows that having single sex wards is the best option for these vulnerable patients, some of whom are admitted from male only care homes.
- These two ground floor wards offer the best physical environment for people with dementia and challenging behaviour. They are larger than the ward at Bowes Lyon Unit in Durham and space is a crucial factor in caring for people whose behaviour can be challenging. Patients have more room to move about freely, which reduces aggression, and there is also more space to offer a choice of quiet or socially stimulating areas (in line with nationally recognised standards set by the Dementia Services Development Centre at Stirling University).
- Having two wards on one site would mean staff would be able to make more efficient use of clinical time.
- This option provides the most flexibility in terms of adjusting the wards to respond to the ratio of men and women needing to spend time in hospital. For instance, if required we could have 16 men in one ward and 14 women in the other.

Disadvantages

- Some patients and their families would have further to travel. For instance, people from Consett have 12 miles to travel to Lanchester Road Hospital and this increases to 23 miles to Auckland Park. The Trust recognises the impact this could have and would do everything possible to support families. This includes having flexible visiting times and helping with travel arrangements, using taxis if appropriate.

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Benefits

- There would be inpatient services at both Durham and Bishop Auckland.
- Separate wards for men and women. Because more people are being supported at home, those who are admitted to hospital have more complex needs. Patients often display behaviour that is challenging and can be socially and sexually disinhibited. Clinical experience shows that having single sex wards is the best option for these vulnerable patients, many of whom are admitted from male only care homes.

Disadvantages

- Some patients and their families would have further to travel. For instance, people from Consett have 12 miles to travel to Lanchester Road Hospital and this increases to 23 miles to Auckland Park. The Trust recognises the impact this could have and would do everything possible to support families. This includes having flexible visiting times and helping with travel arrangements, using taxis if appropriate.
- The ward in Durham has less internal space than the wards in Bishop Auckland. Effective use of space is a crucial factor in caring for people whose behaviour can be challenging.
- This would leave one isolated ward at Auckland Park Hospital without support from other wards that are close by for emergency and short term staffing. Additional staffing would be required due to its isolation.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland

Benefits

- We would retain wards at Durham and Bishop Auckland and there would be no increase in travel for patients and their families.

Disadvantages

- We would have to provide mixed sex wards. Because more people are being supported at home, those who are admitted to hospital have more complex needs. Patients often display behaviour that is challenging and can be socially and sexually disinhibited. Clinical experience shows that single sex wards is the best option for these vulnerable patients. Although we could introduce male and female zones it would be difficult to manage as patients with advanced dementia are unlikely to recognise and observe male or female only areas. The Care Quality Commission requires Trusts to provide single sex accommodation and, despite providing male and female zones, moving from a single sex ward to a mixed sex ward (at Auckland Park) will be perceived as a backward step.
- The ward in Durham has less internal space than the wards in Bishop Auckland. Space is a crucial factor in caring for people whose behaviour can be challenging.
- This would leave one isolated ward at Auckland Park Hospital without support from other wards that are close by for emergency and short term staffing. Additional staffing would be required due to its isolation.

Impact on people with dementia who need to spend time in hospital

On average 11 people with dementia per month are admitted to our hospitals in Durham and Bishop Auckland and stay for 60 days. Based on last year's data (1 December 2014 – 30 November 2015) there were 135 admissions to Ceddesfeld and Hamsterley Wards in Auckland Park Hospital in Bishop Auckland and Picktree Ward at Bowes Lyon Unit in Durham. The table below provides more detail about where these people live, based on their registered GP practices.

As the data shows, there have been occasions when patients from the Durham and Derwentside areas have been admitted to Auckland Park Hospital and, although less frequently, when people from Durham Dales have been admitted to Picktree Ward. This has been because of the complexity of the illness, the need for some men to be admitted to a male only environment or that the nearest ward has been full.

Use of inpatient beds

GP practice area	Admissions to Auckland Park Hospital	Admissions to Picktree Ward, Bowes Lyon Unit	Total number of admissions
Chester-le-Street	3	6	9
Darlington includes Middleton St George and Sadberge	22	0	22
Derwentside includes Consett, Stanley, Burnopfield and Lanchester	4	19	23
Durham City includes Coxhoe, Bowburn and Brandon	2	13	15
Durham Dales includes Bishop Auckland, Barnard Castle, Teesdale and Weardale	23	2	25
Easington includes Peterlee, Seaham, Wingate and Wheatley Hill	6	14	20
Sedgefield includes Spennymoor, Newton Aycliffe, Shildon and West Cornforth	21	0	21

The views of mental health professionals at TEVV

The preferred option of mental health professionals at TEVV is option one because the clinicians firmly believe that having separate wards for men and women is highly beneficial. Patients with advanced dementia often display behaviour that is challenging and can be socially and sexually disinhibited. Clinical experience, gained over the last ten years, shows that separate male and female wards is the best option for these vulnerable patients. Carers have also raised concerns and made complaints to the Trust about mixed sex wards.

Have your say

We would like your views on our proposals for continuing to improve services for people with dementia in County Durham and Darlington.

The public consultation will run from 4 January to 28 March 2016.

We are holding four public meetings.

You can give us your feedback by completing the attached form or emailing your comments to nduccg.northdurhamccg@nhs.net

Your can also send the completed attached form or comments to:

Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham DH1 5TS

If you would like more information or, if you are part of a group or organisation and would like someone to come and talk to you about these proposals please contact 0191 389 8617.

The deadline for responses is 28 March 2016 when the consultation closes.

Public meetings

Date: 5 February, 2016
Time: 2.00 - 4.00pm
Venue: St Patrick's Hall, Victoria Road, Consett, Co Durham, DH8 5AX

Date: 9 February, 2016
Time: 6.00 - 8.00pm
Venue: Eden Room, Bishop Auckland Town Hall, Market Place,
Bishop Auckland, Co Durham, DL14 7NP

Date: 25 February 2016
Time: 10.00am - 12.00 noon
Venue: Central Hall, The Dolphin Centre, Horse Market, Darlington,
Co Durham, DL1 5RP

Date: 29 February 2016
Time: 10.00am - 12.00 noon
Venue: Main Hall, The Glebe Centre, Durham Place, Murton, Seaham,
Co Durham, SR7 9BX

It would be helpful if you could confirm your attendance by emailing nduccg.northdurhamccg@nhs.net or phoning the engagement team on 0191 389 8617.

What happens next?

We will use the information you provide to help us make a decision on our proposals. No decision will be made until the consultation has ended.

All comments, views and feedback will be considered by the CCGs and TEWV and a decision will be made once the feedback gathered through the consultation process has been considered. It will also be reviewed by the local authorities' Health Scrutiny Committees and shared with the public.


Darlington
Clinical Commissioning Group


Durham Dales, Easington and Sedgefield
Clinical Commissioning Group


North Durham
Clinical Commissioning Group

Tees, Esk and Wear Valleys 
NHS Foundation Trust

Questionnaire

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

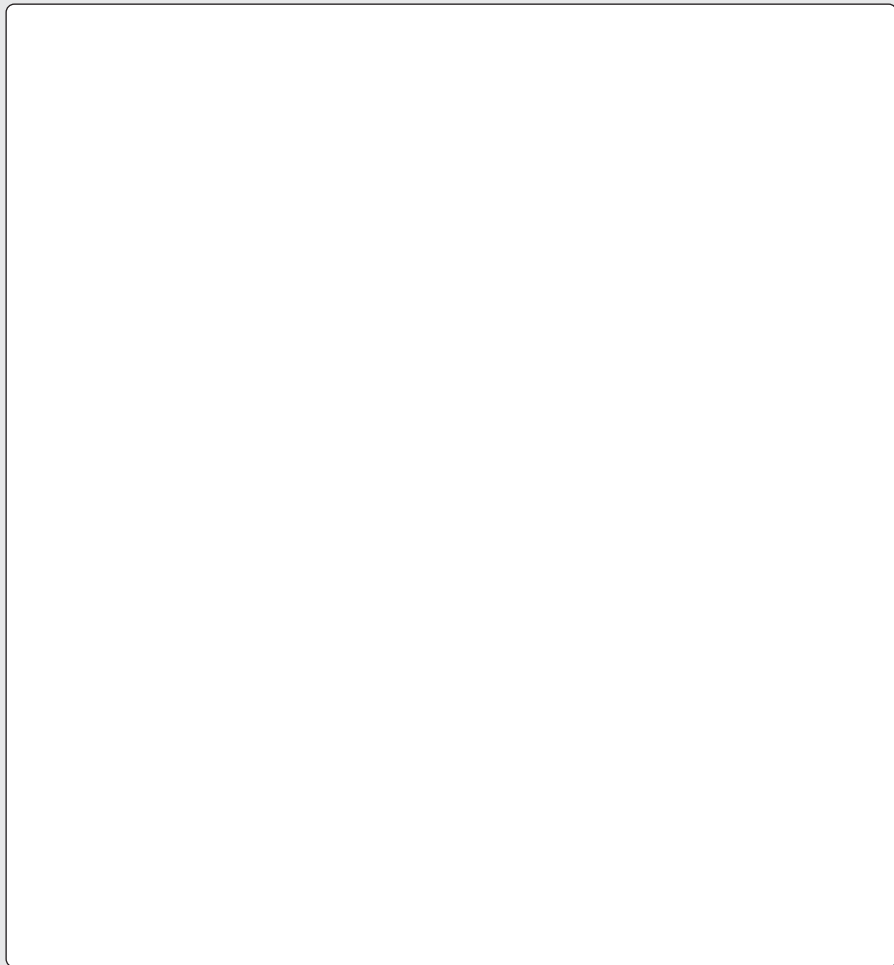
Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option





The closing date for responses is 28 March 2016.

Please send this form to:
Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

Your can also email your comments to nduccg.northdurhamccg@nhs.net

Appendix 3 – Media coverage

Media release

4 January 2016

NHS consults with local people on proposed changes

The NHS in County Durham and Darlington is seeking the views of local people about proposed changes to hospital inpatient services for older people with dementia.

Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) currently provides assessment and treatment beds across three inpatient wards. There are two 10-bed wards at Auckland Park Hospital in Bishop Auckland and one 10-bed ward at the Bowes Lyon Unit, Lanchester Road Hospital in Durham.

The trust will maintain 30 beds but plans to reduce the number of wards from three to two.

Mrs Elizabeth Moody, director nursing and governance at TEWV, said: “Most people with dementia receive the support they need in the familiar surroundings of their own home, nursing or residential home.

“Some people, often those with very complex needs, need to spend short periods in hospital and it’s important that we provide them with the best possible environment, as near to their families as possible.

“However, we must also make sure that we make the best use of tax payers’ money and use our limited resources as effectively as possible.

“By reducing the number of wards from three to two, whilst maintaining the same number of beds, we can save up to £454,000 per year.”

The local NHS clinical commissioning groups (Darlington CCG, Durham Dales, Easington and Sedgefield CCG and North Durham CCG) are consulting on three possible options.

- Option 1 is to locate both wards (one male and one female) at Auckland Park Hospital at Bishop Auckland and close Picktree Ward in Durham.
- Option 2 is to provide separate male and female wards on separate sites (one ward at Bishop Auckland and one ward at Durham and close one of the wards at Bishop Auckland).
- Option 3 is to provide a mixed sex ward at Bishop Auckland and a mixed sex ward in Durham and close one of the wards at Bishop Auckland.

The preferred option of mental health professionals at TEWV is to have separate male and female wards at Bishop Auckland. The clinicians firmly believe that having separate wards for men and women is highly beneficial.

They say that patients with advanced dementia often display behaviour that is challenging and can be socially and sexually disinhibited. Their experience has shown that having separate male and female wards is the best option as they provide environments where patients can be cared for safely and with dignity and where vulnerable patients can be protected.

The main disadvantage of this option is that some patients and their families would have further to travel.

Dr Neil O'Brien, clinical chief officer at NHS North Durham CCG, said: "We have not yet made a decision on the location of these wards and we need the views of local people to help us decide.

"We recognise how important it is that families can visit their loved ones and want to provide inpatient services as locally as possible.

“We also want to provide inpatient accommodation that meets the needs of people with advanced dementia.

“Alongside all of this, we need to make sure that services are as cost effective as possible.”

The public consultation runs until 28 March 2016 and the NHS are holding public meetings in Derwentside, Bishop Auckland, Darlington and Seaham.

Information about the meetings, additional information on the options and how people can have their say is available online at www.northdurhamccg.nhs.uk, www.darlingtonccg.nhs.uk, www.durhamdaleseasingtonsedgfieldccg.nhs.uk or www.tewv.nhs.uk or by contacting North Durham CCG’s engagement team on 0191 3898617.

ENDS

Notes to editor:

Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) was formed in April 2006 and was authorised as a foundation trust on 1 July 2008. The Trust took over responsibility for services in York and Selby on 1 October 2015. TEWV provides mental health and learning disability services for the people of County Durham, Tees Valley and most of North Yorkshire. It also provides a range of specialist mental health and learning disability services to other parts of northern England.

For more information please contact the communications team on 01325 552223 or email tewv.enquiries@nhs.net

**Future location of inpatient assessment
and treatment beds for people with dementia in
County Durham and Darlington.**

5 February 2016 2.00 – 4.00pm St Patrick's Hall,
Victoria Road, Consett, DH8 5AX

9 February 2016 6.00 – 8.00pm Eden Room, Bishop
Auckland Town Hall, Market Place, Bishop Auckland,
DL14 7NP

25 February 2016 10.00 am – 12.00 noon Central Hall,
The Dolphin Centre, Horse Market, Darlington, DL1 5RP

29 February 2016 10.00 am – 12.00 noon Main Hall,
The Glebe Centre, Durham Place, Murton, Seaham,
SR7 9BX

For more information Tel. 0191 3898617 or to confirm
your attendance nduccg.northdurhamccg@nhs.net

Client: Tees Esk and Wear Valleys NHS Foundation Trust Yellow News
Source: The Northern Echo (North Edition) (Main)
Date: 05 January 2016
Page: 5
Reach: 36740
Size: 208cm2
Value: 1316.64

Consultations start on the changes to dementia care

By Helen Russell
Staff Reporter

helen.russell@nne.co.uk

DISCUSSIONS has started on proposed alterations to dementia care services at two hospitals.

The Tees, Esk and Wear Valley (TEWV) NHS Foundation Trust currently provides assessment and treatment beds across three inpatient wards – two ten-bed wards at Auckland Park Hospital, in Bishop Auckland, and one ten-bed ward at the Bowes Lyon Unit, at the Lanchester Road Hospital, in Durham.

Under the new proposals, the number of wards would reduce from three to two, but would still maintain 30 beds.

The local NHS clinical com-

missioning groups Darlington CCG, Durham Dales, Easington and Sedgfield CCG and North Durham CCG are consulting on three possible options.

Option one is to locate both wards - one male and one female - at Auckland Park Hospital and close the Picktree Ward in Durham; option two would provide separate male and female wards on separate sites - one ward at Bishop Auckland, one ward at

Durham and closing the second one at Bishop Auckland; option three would provide a mixed gender ward at Bishop Auckland and a mixed gender ward in Durham, closing the other ward at Bishop Auckland.

The preferred option of mental health professionals at TEWV is to have separate male and female wards at

Bishop Auckland.

Clinicians say that patients with advanced dementia often display challenging behaviour that can be socially and sexually disinhibited and that having separate gender wards provide environ-

ments where patients can be cared for safely, with dignity, and where vulnerable patients can be protected.

Elizabeth Moody, director of nursing and governance at TEWV, said: "Some people, often those with very complex needs, need to spend short periods in hospital and it's important that we provide them with the best possible environment, as near to their families as possible.

"However, we must also make sure that we make the best use of taxpayers' money and use our limited resources as effectively as possible.

"By reducing the number

of wards from three to two, whilst maintaining the same number of beds, we can save up to £454,000 per year."

Public consultation runs until March 28 and public meetings will take place in Derwentside, Bishop Auckland, Darlington and Seaham.

For information about meetings or providing feedback, visit northdurhamccg.nhs.uk, darlingtonccg.nhs.uk, durhamdaleseasingtonccg.nhs.uk or tewv.nhs.co.uk.

Call North Durham's CCG's engagement team on 0191-389-8617.

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PUBLIC NOTICES

PUBLIC NOTICES

LICENSING ACT 2003 NOTICE OF APPLICATION FOR A PREMISES LICENCE

Premises: Bavaria, 24 Vine Place, Sunderland, SR1 3NE

Notice is given that Bavaria Bars Limited has applied to the Sunderland City Council Licensing Authority to vary a Premises Licence under the Licensing Act 2003.

The proposed variations to the Premises Licence are: Provision of late night refreshment; Supply of alcohol; Provision of regulated entertainment; Live music; Recorded music; Performance of Dance; Anything of a similar description to that falling within the above.

The licensing register of Sunderland City Council is kept at: Sunderland City Council, Licensing Section, Jack Crawford House, Commercial Road, Sunderland, SR2 8QR.

A record of the application may be inspected by appointment during the hours Monday to Thursday 8.30 - 5.15 and Friday 8.30 - 4.45 at the City Centre Customer Services Centre at 31-32 Fawcett Street, Sunderland, SR3 1RE.

Representations regarding this application must be made in writing to the Council no later than 18/03/16

It is an offence under Section 158 of the Licensing Act 2003 knowingly or recklessly to make a false statement in connection with an application and the maximum fine for which a person is liable on summary conviction for the offence is level 5 on the standard scale (£5000).

MARY SYBIL KIRTLEY (Deceased)

Pursuant to the Trustee Act 1925 any persons having a claim against or an interest in the Estate of the aforementioned deceased, late of 71 Carlton Crescent East Herrington Sunderland SR3 3PH, who died on 04/10/2015, are required to send particulars thereof in writing to the undersigned Solicitors on or before 06/05/2016, after which date the Estate will be distributed having regard only to claims and interests of which they have had notice.

MORTONS SOLICITORS
41 Church Street
Seaham SR7 7EJ

T464805

BRIAN HOLMES (Deceased)

Pursuant to the Trustee Act 1925 any persons having a claim against or an interest in the Estate of the above named, late of 3 Bude Square, Murton, Seaham, County Durham, who died on 29/11/2015, are required to send written particulars thereof to the undersigned on or before 02/05/2016, after which date the Estate will be distributed having regard only to the claims and interests of which they have had notice.

Mulcahy Smith, 23 Regent Terrace, Gateshead, Tyne & Wear NE8 1LU. Ref: CHSS/HOLM17/1

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Christiana Bell Hindmarch
Pursuant to the Trustee Act 1925 any persons having a claim against or an interest in the estate of the aforementioned deceased late of Glenholm House 4 Park Avenue Roker Sunderland SR6 9PU formerly of 20 Woodstock Avenue Grangetown Sunderland SR2 9QD who died on 11.10.2015 are required to send particulars thereof in writing to the undersigned Solicitors on or before 25.04.2016 after which date the Estate will be distributed having regard only to claims and interests of which they have had notice.
Peter Dunn & Co.
20 Athenaeum Street
Sunderland SR1 1DH

NHS

Public Consultation Meeting
Future location of inpatient assessment and treatment beds for people with dementia in County Durham and Darlington.

29 February 2016
10.00 am – 12.00 noon
Main Hall, The Glebe Centre, Durham Place, Murton, Seaham, SR7 9BX

For more information Tel. 0191 3898617 or to confirm your attendance nduccg.northdurhamccg@nhs.net

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Appendix 4 – Copies of written responses, anonymised where appropriate

Option 1

Questionnaire

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08 MAR 2016

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

My mother has been a patient at Bowes Lyon and is currently a patient at Auckland Park. Mixed sex wards are inappropriate for people with this type of illness. As a family we have observed in our relative + other patients, disinhibited behaviours and often patients not being aware of

Continue overleaf if required

Please detach and return to the address overleaf



boundaries/removing their own clothes.
For the dignity and safety of patients
It is essential that single sex
wards are available.

Also having experienced both sites,
we feel that the building and its
layout/facilities at Auckland Park
is far superior than Bowes Lyon
which we feel is not fit for
purpose - no ensuite toilets + not
enough space for patients like our
mother, no separate dining room,
not enough quiet rooms/private
rooms to use when required.

Although Auckland Park is much
further away for our family to visit than
Bowes Lyon, we feel it is a better hospital

The closing date for responses is 28 March 2016.

for our mother's
needs.

Please send this form to:
Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

You can also email your comments to nduccg.northdurhamccg@nhs.net

Questionnaire

Please tick your preferred option

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

After being at the meeting the speakers and public questions confirm my decision. I also do Vol Work at Auckland Park so know the case and very good help given to users.

Continue overleaf if required

Please detach and return to the address overleaf



Questionnaire

Please tick your preferred option

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Please explain why you have chosen this option

Continue overleaf if required

Please detach and return to the address overleaf



Questionnaire

Please tick your preferred option

RECEIVED

16 MAR 2016

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

I am a member of nursing staff + have serious concerns about leaving one isolated ward at Auckland Park.

The only other MHSOP ward like this is Springwood, but they do not accept direct admissions

Continue overleaf if required

Please detach and return to the address overleaf



so therefore they can plan for additional nursing staff because patients' needs are already understood. This would not be the case at Auckland Park - and most admissions occur in the late afternoon / evening now due to the time it takes to arrange Mental Health Act Assessments.

Many of our patients would require two nurses to escort them to A+E if they became unwell - this would be impossible on an isolated ward

If a member of staff became unwell during a shift the situation would be impossible for staff.

The risks of the other two options are too great
The closing date for responses is 28 March 2016.

Please send this form to:
Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

fr patients and staff. -
Aside from my view that
if single sex wards can
be provided then they should
be provided.

Your can also email your comments to nduccg.northdurhamccg@nhs.net

Please choose the safe option which
will mean patients get the best possible
care.

Questionnaire

Please tick your preferred option

RECEIVED

10 10 AM MAR 2015



Option 1

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Option 2

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

WITHIN AREA. NOT TOO FAR FOR FAMILIES TO KEEP IN TOUCH

Continue overleaf if required

Questionnaire

RECEIVED

01 MAR 2016

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

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Option 3

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Please explain why you have chosen this option

Continue overleaf if required

Questionnaire

RECEIVED

01 MAR 2015

Please tick your preferred option



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Option 3

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Please explain why you have chosen this option

Easy to get to.

Continue overleaf if required



Questionnaire

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

SINGLE SEX WARDS:
LARGER WARDS.

FOR PEOPLE NORTH OF
COUNTY IF VISITING TIMES
AREN'T LIMITED VISITORS
CAN STAY LONGER

Continue overleaf if required

Please detach and return to the address overleaf



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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

It will make things a lot easier for the staff to manage
a lot of people do not like to be in mixed wards they do not feel safe.
They must avoid travelling out.

Continue overleaf if required

Please detach and return to the address overleaf



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Option 3

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Please explain why you have chosen this option

not enough nurses to cover mixed wards.

Continue overleaf if required

Please detach and return to the address overleaf



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Option 3

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Please explain why you have chosen this option

PREFER. SEPARATE M/F
WARDS. - BETTER OPTION.

Continue overleaf if required

Please detach and return to the address overleaf



Questionnaire

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Option 3

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Please explain why you have chosen this option

- Separate wards for men and women
- Size of Facilities
- Same site especially if both husband/wife have dementia
- Offer of free help with travel either by volunteer drivers who will be paid a mileage rate or by taxi. Assured support funds would enable to just to cover this
- More work needed on transgender patients.

Continue overleaf if required

Please detach and return to the address overleaf



Questionnaire

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Please explain why you have chosen this option

Continue overleaf if required

Please detach and return to the address overleaf



Questionnaire

Please tick your preferred option

RECEIVED
10 MAR 2016



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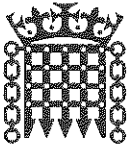
Option 3

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Please explain why you have chosen this option

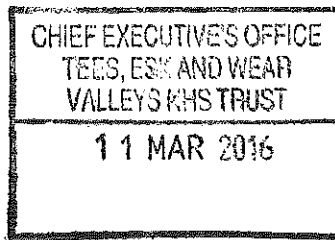
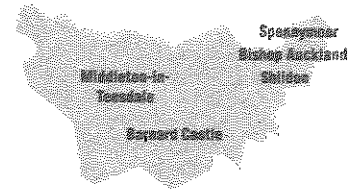
Wards suited to nursing both male + female as one single sex - also the environments are much better suited to caring for those with dementia -

Continue overleaf if required



HELEN GOODMAN MP

Standing up for all in the Bishop Auckland Constituency



Mr Martin Barkley
Chief Executive
Tees, Esk & Wear Valley NHS
Foundation Trust Headquarters
West Park Hospital
Edward Pease Way
Darlington
County Durham
DL2 2TS

10 March 2016

Dear Martin

I am writing in response to the *Improving mental health services for people with dementia in County Durham and Darlington* public consultation.

I do not really like any of these options, but prefer 1 or 2. I think you should also be providing respite for families as people can cope at home for a time, but need a rest.

I think you should think more about family need and less about saving money. I would have a small number of beds also at the Richardson in Barnard Castle where there is a large elderly population and under-used resource.

I also think you should organise dementia training for those who work in care homes, where many sufferers live and where in my experience the care is totally inadequate.

Yours Sincerely

Helen Goodman
Member of Parliament for Bishop Auckland Constituency

Questionnaire

Please tick your preferred option



Option 1

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Option 2

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

In my opinion as a past visitor, I think it would be wiser to close Picktree ward, Bowes Lyon and keep two single sex wards at Auckland Park hospital. I think Picktree ward is too small to have mixed patients, with both male and female bedrooms in the same corridor. Patients were wandering into each others bedrooms, and becoming more agitated and distressed when staff tried to lead them

Continue overleaf if required

to their own rooms. The patients need more space to wander and move about freely as a lot of admissions have challenging, sexual and violent behaviours.

Their needs to be areas for patients who are less challenging, also more quiet areas for visitors to visit relatives and not feel afraid, by aggressive patients.

The closing date for responses is 28 March 2016.

Please send this form to:
Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

You can also email your comments to nduccg.northdurhamccg@nhs.net

Questionnaire

Please tick your preferred option



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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

Although Option 1 is the preferred option far too many dementia patients are being admitted and cared for in general hospitals. This is not satisfactory as it is not meeting elderly dementia patient needs.
Foundation Trust Member, 9.2.16.
900007626

OPTION 1 WOULD BE MY PREFERRED OPTION

- DIGNITY WITH SEPARATE WARDS
- AUCKLAND PARK HOSPITAL IN A MORE BUILT UP AREA — LANCHESTER HOSPITAL IS IN AN ISOLATED SITUATION.
- ? COULD BECOME A CENTRE OF EXCELLENCE (AUCKLAND PARK)

The closing date for responses is 28 March 2016.

Please send this form to:
Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

You can also email your comments to nduccg.northdurhamccg@nhs.net

From: Binns Christopher (TEES, ESK AND WEAR VALLEYS NHS FOUNDATION TRUST)

Received: Monday, 07 Mar 2016, 13:39

To: Bashford Carl (TEES, ESK AND WEAR VALLEYS NHS FOUNDATION TRUST)

Subject: Consultation Organic Beds APH

Only 1 person attended this morning she was a Dementia Advisor Nicky Tulloch. She will share information with colleagues and promote return of comments on the leaflets. Her own comments are noted as below

- Preferred option 1
- Felt that single sex accommodation was more preferable
- Not good use of space if isolated ward at APH
- Felt travel would be a big issue thou for all options and would welcome flexibility around visiting times and meeting any additional costs

Regards

Chris

Sent: 28 January 2016 11:52

To: northdurhamccg (NHS NORTH DURHAM CCG)

Subject: Public consultation on location of assessment and treatment beds for older people with dementia

Good Morning

With regards to the Questionnaire I would like to choose option 1.

The reason for this is because it will save money, be more efficient on one site and there will be separate male and female wards which I think is very important for the dignity of the patients.

I note that this consultation is for 'older people with dementia' and would be very interested to know what happens to people with Young onset dementia? Where do they go for assessment and treatment?

Regards

Assistant Town Clerk

Bishop Auckland Town Council
The Four Clocks Centre
154A Newgate Street
Bishop Auckland
Co. Durham
DL14 7EH

Tel: 01388 609852

Web: www.bishopauckland-tc.gov.uk



I'm a Dementia Friend
Join me at dementiafriends.org.uk



Leading the fight
against dementia
**Alzheimer's
Society**

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Hello

Agree with option 1

Reasons

- Clinically effective (although not convinced this was stressed enough in the document)
- Most cost effective (although not sure this was explained)
- Important that Trust recognises the impact on residents ability to travel and, importantly, how this can be mitigated/supported through travel options. However, I would urge the trust before supporting people through taxis, you give serious consideration to helping build the capacity of the local voluntary and community sector's volunteer car driver scheme models. I believe the Trust (Lanchester Road Hospital ?elderly mental ill service) have set up a system internally for supporting carers and patients access appointments/visits. It could be more effective to looking first at what provision already exists within the local communities and build on/utilise that.

Regards.

Public Health Portfolio Lead
Durham County Council
County Hall
Durham
DH1 5UJ

Tel: 03000 267673
Mob: 07799 431904
Fax: 0191 580 1601

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Like us at facebook.com/durhamcouncil



Questionnaire

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Please explain why you have chosen this option

Offers separate wards for men and women.
Physical environment more suited to people with dementia.
Most efficient use of resources.

Continue overleaf if required



Sent: 05 January 2016 09:27

To: northdurhamccg (NHS NORTH DURHAM CCG)

Subject: Consultation - Improving Mental Health Services for People with Dementia

Hi,

I would prefer Option 1 – most cost-effective and appropriate to meet the social/clinical needs of the individuals.

Regards,

 **Council of the Year**

The Members of Darlington Borough Council Adult & Housing Scrutiny Committee support **Option 1** of the public consultation:

To provide 30 beds in two 15 bed wards (a male and a female ward) at Auckland Park Hospital, Bishop Auckland(and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham) for the following reasons:

- There will be separate wards for men and women which is best practice. There will be flexibility to adjust the ratio of men to women in the wards depending on need at the time
- These wards are larger than Picktree ward at Lanchester Road and will provide a better environment for patients to move about more freely but will also provide space for a quiet area or social engagement areas.
- To have two wards on one site will make better use of staff time and expertise

Yours sincerely

Chair Adult & Housing Scrutiny Committee

Darlington Borough Council

Questionnaire

RECEIVED

02 Feb 2003

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

I don't think it is appropriate to have a mixed ward with dementia patients, and if everyone is at one site its more cost effective.

Continue overleaf if required.

Questionnaire

RECEIVED

02 FEB 2008

Please tick your preferred option



Option 1

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

I have chosen this option
Because it is easier to get to
and it is a well run Hospital
and the food is nice.

Continue overleaf if required

Questionnaire

RECEIVED

22 JAN 2016

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

I think it is very important to have separate male + female wards. Also having both wards in the same hospital must be much easier to manage.

Continue overleaf if required

Questionnaire

RECEIVED

02 FEB 2015

Please tick your preferred option

Option 1

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Option 3

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Please explain why you have chosen this option

The suggestion that a mixed sex ward is acceptable for people with dementia is appalling, so Option 3 is definitely out. Option 1 is probably better than option 2 as it will keep expertise on one site.

Continue overleaf if required

RECEIVED

02 FEB 2016

Questionnaire

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Option 3

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Please explain why you have chosen this option

ease of visiting.

Continue overleaf if required

Please detach and return to the address overleaf



RECEIVED

02 FEB 2016

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

NEARER FOR THE FAMILY

Continue overleaf if required

Please detach and return to the address overleaf



Questionnaire

RECEIVED

02 Feb 2016

Please tick your preferred option

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

The Auckland Park Hospital is more accessible by public transport than the Lanchester Road Hospital which is in an isolated place with exposed bus stops very difficult for elderly relatives and friends. Few buses, heavy speeding traffic past stops. Lack of space is stressful for patients and staff alike, the largest space is always preferable. I read that single sex wards are preferable.

Continue overleaf if required



Couples or opposite sex friends wishing to be together would lose out however, it may be very uncommon.

I have heard of heartbreak of couples not allowed to be together in Privately Owned and operated Care Homes.

(It was on T.V.)

The closing date for responses is 28 March 2016.

Please send this form to:
Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

You can also email your comments to nduccg.northdurhamccg@nhs.net

The Members of Darlington Borough Council Health & Partnership Scrutiny Committee support **Option 1** of the public consultation:

To provide 30 beds in two 15 bed wards (a male and a female ward) at Auckland Park Hospital, Bishop Auckland(and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham) for the following reasons:

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- These wards are larger than Picktree ward at Lanchester Road and will provide a better environment for patients to move about more freely but will also provide space for a quiet area or social engagement areas.
- To have two wards on one site will make better use of staff time and expertise

Yours sincerely

Chair Health & Partnerships Scrutiny
Committee Darlington Borough Council

Option 2

Questionnaire

Please tick your preferred option

Option 1

Provide 30 beds in two 15-bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland

Please explain why you have chosen this option

Option two provides some cover for both areas of Co Durham, people in Teesdale etc. may find it difficult to access Lanchester Road + likewise people living in Durham + above may find transport (clinics + visiting) the same.

It is questionable as to whether or not there is sufficient cover for respite care within the County since in our village alone I could identify at least six dementia sufferers, some

Continue overleaf if required

P.T.O.

RECEIVED

20 FEB 2016

Please detach and return to the address overleaf

with serious difficulties.

I am not so au fait with procedures for identifying dementia within Co Durham but I certainly am with the workings within the West Riding of Yorkshire since my 87 year old brother-in-law is an advanced sufferer.

He was admitted to Field Head Psych. Hospital for four weeks, was assessed twenty four hours a day, medication was monitored followed by a spell in a "half way hospital" before a Nursing Home to cover his needs was found, this procedure was of great comfort to his family; do we have the same coverage?

I'm sorry not to be able to attend in person and at almost 81 years of age with other issues, not dementia, please excuse my absence.

Apologies -

The closing date for responses is 28 March 2016.

Please send this form to:
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The Rivergreen Centre
Aykley Heads
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Option 3

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.



These are the same!

Please explain why you have chosen this option

This is the most patient/family friendly option. If space is lacking at Bowes Lyon Unit, expand it with an extension

Please detach and return to the address overleaf



Sent: 08 February 2016 09:47

To: northdurhamccg (NHS NORTH DURHAM CCG)

Subject: Response to Improving Mental Health Services for people with Dementia in County Durham and Darlington. Response to consultation.

South Durham Health CIC is a Community Interest Company which represents 23 GP Practices across Easington and Sedgefield. The Board of Directors, who are all GPs working in Easington and Sedgefield localities, considered the consultation document at their meeting on 19th January 2016. The Board strongly supported having single sex wards which option 2 achieves. The Board are also concerned about accessibility for dementia patients and their families and having 2 locations as in option 2 gives better access than option 1.

Kind regards,

Administrator

South Durham Health C.I.C. registered in England 07807964

Murton Medical Group
20 Woods Terrace East
Murton
County Durham
SR7 9AB

Please note my working hours are:

Monday&Thursday 8.30am-12.30pm

Tuesday&Wednesday 8.15am-3.15pm

Tel: 0191 5209920

web: <http://www.southdurhamhealth.co.uk>

Board Members: Robert McKinty GP (Chair), Rajiv Mansingh GP, Diane Robinson GP, Nitish Sahoo GP, Kamal Sidhu GP, Edward Staines GP

ESH CIC is a GP-led community interest company (Social Enterprise) delivering improved health to the people in Easington and Sedgefield, County Durham



Questionnaire

RECEIVED

22 JAN 2016

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

I have spent many hours visiting my wife who was being assessed in the Bowes Lyon Unit. This unit as you know is a mixed sex unit. The men were much louder and stronger than the women some who were frail and disturbed by the antics of the men.



Continue overleaf if required.

I witnessed men exposing themselves and after violently shaking the doors trying to get out. Bedroom doors were not locked, so this is a further reason for gender separation.

Both sexes with the mental conditions in these units can have no inhibitions and can be improperly aroused, before staff become aware.

I am sure that women would be much more content & feel more secure in a same sex unit.

The greater the distance of separation the greater the wellbeing of the patients.

The closing date for responses is 28 March 2016.

Please send this form to:
Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

You can also email your comments to nduccg.northdurhamccg@nhs.net

RECEIVED

02 FEB 2016

Questionnaire

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Please explain why you have chosen this option

Keep both hospitals open for
some form of amenment
and atleast there is still
amenment service in North
and South.

Continue overleaf if required

Please detach and return to the address overleaf



Option 3

Questionnaire

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

As a volunteer with the Carers Support I know just how important this decision is to those who need this help.

Dementia is of more pressing

over

Continue overleaf if required

Concern to all of us now, as one already over 80, I fear that one day I may need help too! Like all patients whose problems are not diseased or in need of care after an accident, dementia sufferers need specialised care in an environment suitable to their treatment.

The closing date for responses is 28 March 2016.

Please send this form to:
Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

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Option 3

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Please explain why you have chosen this option

I have chosen this answer due to the undeniable standing benefits and the overly exaggerated upon disadvantages. The mixed sex wards would not be a tremendous problem if they were handled with the correct care and procedures that should be in effect. And also I do not think it fair to comment that there wouldn't be absolutely no increase in travel, but it would be at a better grading stage.

Continue overleaf if required

Please detach and return to the address overleaf



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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

I would rather have Bowes Lyon

Continue overleaf if required

Please detach and return to the address overleaf



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Option 3

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Please explain why you have chosen this option

Service at Bowes Lyon Unit Lanchester Road
is clearly a well used. Families need this
option

Continue overleaf if required

Please detach and return to the address overleaf



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Option 3

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Please explain why you have chosen this option

Dementia services are needed in cases at Bowes Lyon Unit, Travel is better for Dementia side. Also staff are all ready there at no extra costs

Continue overleaf if required

Please detach and return to the address overleaf



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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

I chose Option 3 although I feel all Options are flawed. Bowes Lyon is on a site that can expand & accommodate the needs of the future. Durham is the centre of the County & the whole facility should be completely located here. No feasibility study appears to have been considered, yet alone undertaken

Continue overleaf if required

Please detach and return to the address overleaf



Please detach and return to the address overleaf

Questionnaire

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Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

only with the limited choice given

Please explain why you have chosen this option

Desventside + surrounding area is missing out - everything is moving south to the detriment of clients in this area + their carers. Lanchester Road has potential + good facilities a wider approach needs to be made. If it means changing/buildup this would still be beneficial financially in long run to benefit the patient. The savings made (on paper) do not cover costs



for outcome of wrong decision. I hope Continue overleaf if required it is not a decision made with tunnel vision but it is a holistic approach covering patients + carers' needs.

Questionnaire

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Please explain why you have chosen this option

Mixed sex wards (with separate
abortion facilities) would be OK.
Transport difficulties from N.W.
Durham to W. Auckland would
bring many difficulties to families
even with voluntary drivers & taxi
arrangements (costly in themselves).
There would still be 75% public expenditure
savings with this option

Continue overleaf if required

Please detach and return to the address overleaf



Please detach and return to the address overleaf

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Please explain why you have chosen this option

The distance for carers is intolerable from Consett & District Services should be in the centre of the County i.e. DURHAM

Continue overleaf if required



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Please explain why you have chosen this option

The issues this causes are much less important to people in the area than having relatives in a hospital which is inaccessible to us.

Continue overleaf if required

Please detach and return to the address overleaf



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Please explain why you have chosen this option

There is a ~~found~~ option to close Auckland Park Hospital extend Lanchester RD Hospital on 1-2nd floor. Provide existing building on site.

Continue overleaf if required

Please detach and return to the address overleaf



RECEIVED

09 FEB 2015

Questionnaire

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PICKTREE

Please explain why you have chosen this option

OUR FAMILY WOULD LIKE TO KEEP THE PICKTREE WARD OPEN. THE WARD PROVIDES THE BEST POSSIBLE CARE. IT IS NOT ALWAYS POSSIBLE TO SUPPORT PEOPLE IN THEIR HOME. TAXPAYERS WOULD RATHER THEIR LOVED ONES BE MANAGED SAFELY, RATHER THAN HAVE LIMITED STAFF ON A WARD. WE SAY DO NOT CLOSE PICKTREE WARD. P.T.O.

Continue overleaf if required

Please detach and return to the address overleaf



MY HUSBAND HAS BEEN IN PICKTREE WARD 4 MONTHS, IF THAT UNIT HAD NOT BEEN THERE, I WOULD HAVE HAD TO TRAVEL FURTHER. IT IS A GOOD SIZE BUILDING, AND IN A GOOD LOCATION FOR PEOPLE TO TRAVEL. (EVEN BY BUS.) I WOULD ALSO LIKE TO COMMENT ON THE PICKTREE WARD MANAGERS AND NURSES, WE SAW HOW EXCELLANT AND PROFESSIONAL THEY WERE. THEY HELPED MY HUSBAND, AND I KNOW THEY SUPPORTED ME, THROUGH SUCH A LONG JOURNEY. THEY TRULY ARE SPECIAL PEOPLE WHO WORK THERE. I WILL NEVER FORGET THEM.

(HOPE YOU CONSIDER MY VIEWS)

REGARDS

The closing date for responses is 28 March 2016.

Please send this form to:
Engagement Lead
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The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

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Questionnaire

Please tick your preferred option

RECEIVED
25 FEB 2018

Option 1

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Please explain why you have chosen this option

Because it is more central
and families can see their
relatives more regular
which would benefit everybody

Continue overleaf if required

Please detach and return to the address overleaf



RECEIVED

20 FEB 2018

Questionnaire

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Please explain why you have chosen this option

IT WILL BE MORE CONVENIENCE
FOR FAMILY AND FRIEND
TO TRAVEL TO AND FROM

Continue overleaf if required

Questionnaire

RECEIVED

25 FEB 2016

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picketree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

This option means people in the Durham area i.e. Consett, would be able to visit regularly. Most people needing this service would be elderly & travelling difficult.

Continue overleaf if required

Please detach and return to the address overleaf



Questionnaire

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

Nearer home, convenient for visitors.
Patient will have better representation.

Continue overleaf if required

Please detach and return to the address overleaf.



Questionnaire

Please tick your preferred option

25 FEB 2018

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please detach and return to the address overleaf

Please explain why you have chosen this option

IT WILL BE MORE
CONVENIENT FOR VISITORS
WITH NO TRANSPORT
OF THEIR OWN

Continue overleaf if required



Questionnaire

RECEIVED

23 FEB 2013

Please tick your preferred option

Option 1

Provide 30 beds in two 15-bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

Need locality.

Continue overleaf if required

Questionnaire

Please tick your preferred option

RECEIVED
25 FEB 2016

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital; Bishop Auckland (and close Picktree ward at Bowes Lyon Unit; Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites -- one ward at Auckland Park Hospital; Bishop Auckland and one ward at Bowes Lyon Unit; Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit; Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital; Bishop Auckland.

Please explain why you have chosen this option

Want to be able to choose
using a local hospital near
Chaster-le Street

Continue overleaf if required

Questionnaire

RECEIVED

27 FEB 2008

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please detach and return to the address overleaf

Please explain why you have chosen this option

NEEDS TO BE LOCAL FOR PEOPLE
IN NORTH WEST DURHAM TO USE
AND TO VISIT.
IF EVERYTHING WAS IN BISHOP
IT MIGHT AS WELL BE 100
MILES AWAY FOR THOSE OF US WHO
DON'T DRIVE AND HAVE TO USE
PUBLIC TRANSPORT.

Continue overleaf if required



- IMPORTANT FOR MEN AND WOMEN TO BE ABLE TO MIX AS THEY WOULD IN EVERYDAY LIFE.
- IMPORTANT FOR "PATIENTS" TO SEE, AND BE SUPPORTED BY, FRIENDS AND FAMILY.

The closing date for responses is 28 March 2016.

Please send this form to:
Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

You can also email your comments to nduccg.northdurhamccg@nhs.net

Questionnaire

RECEIVED

26 FEB 2016

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

EASE OF ACCESS TO THIS SITE A MORE CENTRAL THAN BISHOP AUCKLAND FOR FAMILY WHO DO NOT HAVE TRANSPORT.

Please detach and return to this address overleaf



Continue overleaf if required

Questionnaire

RECEIVED
14 MAR 2016

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

My husband spent several weeks in Picktree ward in the Autumn of 2014. The care was excellent and attitudes towards relatives was excellent. The ward good, provide a good role model countrywide as to how E.M.I.

PTA

Continue overleaf if required

patients could be treated. It would be an absolute shame in Pocktree Ward was closed. Local nursing homes have mixed wards and the care in such establishments in some instances is dreadful. I know the money comes from different pots, but often an amount of £5,000 is paid to private nursing homes for dreadful care. There is a need for locally based hospital care to treat C.M.I. patients when nursing homes fail to provide adequate care. There has been a lot in the press recently about the need for relatives and friends to keep in close contact with patients with Alzheimer's. This is difficult if people without transport have to keep in touch. Figures given out by the ~~Food~~ are not adequate.

The closing date for responses is 28 March 2016.

Please send this form to:
Engagement Lead
North Durham CCG
The Rivergreen Centre
Aykley Heads
Durham
DH1 5TS

You can also email your comments to nduccg.northdurhamccg@nhs.net

Sent: 14 January 2016 15:41

To: northdurhamccg (NHS NORTH DURHAM CCG)

Subject: Adult Mental Health bed provision at Bowes Lyon Unit and Auckland Park

With regards to the situation of the adult mental health wards, my preferred option would be Option 3 – provide separate male and female wards on separate sites. Closing a ward means more patients in one ward which will eventually mean fewer beds available . What would happen when the ward is full to capacity, where would patients that need admission go. My father has been a patient at Auckland Park twice in the last 2½ years my fear would be if he needs further admission and Auckland Park is full to capacity where would he go?.

PLEASE NOTE THAT THIS RESPONSE WAS DISCOUNTED AS IT WAS UNCLEAR WHICH OPTION WAS PREFERRED.

From: Sahoo Nitish (NHS DURHAM DALES, EASINGTON AND SEDGEFIELD CCG)
Sent: 05 February 2016 17:40
To: northdurhamccg (NHS NORTH DURHAM CCG)
Subject: Dementia beds.

Hello,

I am a GP in Easington locality and one of the directors of SDH.

Having looked at the options - ideally option 3 would be appropriate both at Bishop Auckland and Durham but have male and female separated as much as practically possible . We do appreciate that this is not the ideal answer. The patients and their families would struggle to travel all the way down to Bishop Auckland.

Thank you
Dr N Sahoo

Sent: 18 January 2016 12:29
To: northdurhamccg (NHS NORTH DURHAM CCG)
Subject: proposed closure

I am extremely disappointed to hear of the proposed closure of one of the dementia wards. I find it so awful that it has come to this and allow families and patients to suffer anymore than they currently do.

These wards are literally life savers for patients and families. These wards are a massive help to people and without them I dread to think what would come of the patients.

My father is currently in Bowes Lyon Unit, Lanchester Road. When my father was admitted there we, as a family were at our absolute lowest. Without this ward I can not imagine and don't even want to imagine how things would have turned out for us.

The staff on this ward are amazing, I can not stress this enough. On behalf of my mother and sister, we can not be anymore thankful to them for the care and attention that my father has received. It is a difficult time enough knowing that your father, a wonderful man who cared for his family has ended up with this dreadful disease. However, knowing that he is so close to us, especially as my mother now is in her 70's, is a comfort to us. My mother visits him everyday. She does not drive and either has to travel on a bus or relies on a lift from my sister or myself. We both work full time so I'm sure you can appreciate that further travelling for my mother will be out of the question.

It is totally unfair that it even be considered to close this ward. This ward is a place for patients when they are most desperate for help. I feel very passionate about this not only because my father is in there but because now I have witnessed the care that patients receive in there.

PLEASE DO NOT CLOSE THIS WARD

I am choosing OPTION 3

Regards

Sent: 05 February 2016 13:13
To: northdurhamccg (NHS NORTH DURHAM CCG)
Subject: Dementia beds consultation

Dear Sir/Madam

I write on behalf of Blackhall and Peterlee practice, a GP surgery with a registered list of approx 9500 patients.

We appreciate the opportunity to be able to feedback into the consultation on the future of dementia beds in the area. Easington usage of these beds is significant despite a lot of support from the community teams.

Whilst we appreciate the need for savings, we are very concerned about the distances our patients and their families are having to travel already which will get significantly worse by going along with the option 1 and options 2. Hence, we do not support these two options.

We also agree that at times, it can be challenging to deal with complex behavioural challenges in mixed wards.

Hence, we suggest that a modified option 3 be considered where there is availability of inpatient facility both at Bishop Auckland and Durham but have male and female segregated as much as practically possible. We do appreciate that this is not the ideal answer. However, we are optimistic that this will be the best solution in the context and the challenges.

This will help reassure our concerns and the concerns from the people we serve.

We shall be happy to provide any assistance as needed.

Best Wishes

Questionnaire

RECEIVED

11 MAR 2016

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

because it is more convenient
for people to visit family
and friends closer to home
rather than traveling

Please detach and return to the address overleaf



Continue overleaf if required

Questionnaire

11 MAR 2016

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

Because there should be different places for this so people don't have to travel travelling puts people off when going into hospitals, and getting visitors to come is even harder.

Continue overleaf if required

Please detach and return to the address overleaf



Questionnaire

RECEIVED

21 JAN 2015

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

Transport for hospital visiting is sparse & expensive. We need good care provisions in our local area.

Continue overleaf if required

Please detach and return to the address overleaf



Having read the consultation leaflet, I want to express my concern if the Bowes Lyon service was closed. My preferred option would be option 3 as long as patients were monitored and not put in a vulnerable position in a mixed sex ward. Due to travel implications, this option is much better for Durham patients.

Questionnaire

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

OPTION 4
DEVELOP LANCHESTER.
CONSETT (DEWENTSIDE) IS THE
HIGHEST POPULATION ITS NOT
REASONABLE THAT THEY SHOULD
BE FARTHEST AWAY.

Continue overleaf if required

Please detach and return to the address overleaf



Questionnaire

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

consider another option 4
develop Lanchester site and
close Auckland Park.
More patients from Derwentdale
for treatment

Continue overleaf if required

Please detach and return to the address overleaf



Questionnaire

Please tick your preferred option

Option 1

Provide 30 beds in two 15 bed wards (a male and female ward) at Auckland Park Hospital, Bishop Auckland (and close Picktree ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham)

Option 2

Provide separate male and female wards on separate sites – one ward at Auckland Park Hospital, Bishop Auckland and one ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham.

Option 3

Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

- Consider an option 4 - Develop
UNWENTON ROAD (CLOSE BISHOP)
- 1) DERWENTSIDE HAS HIGHEST NUMBER OF PATIENTS (BY YOUR BOOKLET)
 - 2) LOTS MORE HOUSES BEING BUILT)
YOUR TRAVEL TIMES ARE FOR
WOOD A ROADS (GOOD WEATHER)
 - 3) BUT TRIP TO BISHOP GETS +
3 CHANGES.

Continue overleaf if required

Please detach and return to the address overleaf

