



**North Yorkshire County Council
Harrogate and Knaresborough Area Constituency Committee
21 March 2019**

Briefing on changes to mental health services in Harrogate and the surrounding area

1.0 Purpose of Report

- 1.1 To update the committee on changes to mental health services in Harrogate and the surrounding area.

2.0 Background

- 2.1 The development of mental health services in Harrogate and the surrounding area has been scrutinised by the North Yorkshire County Council Scrutiny of Health Committee over the past 2 years, as part of a broader piece of work on mental health services in the county as a whole. The proposal that was being developed by Harrogate and Rural District Clinical Commissioning Group (HRD CCG) and Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV), was for the build of a new, mental health in-patient facility at Cardale Park in Harrogate. This has previously been publicly announced in 2016.
- 2.2 The new build was planned to have 36 beds and was intended as a replacement for the mental health in-patient beds at the Briary Wing at Harrogate District Hospital (Rowan Ward and Cedar Ward with a total of 34 beds).
- 2.3 The building of the new mental health in-patient facility was 'paused' in July 2017. Subsequent to this pause, the CCG and TEWV undertook a public engagement exercise that posed the question 'how do we spend the money that we have in the best possible way to improve outcomes?'
- 2.4 The Scrutiny of Health Committee were then kept informed of progress being made with the public engagement and the options that were being developed for the provision of mental health services.

3.0 Scrutiny of Health Committee

- 3.1 At the Scrutiny of Health Committee meeting on 14 December 2018, a paper was presented by the CCG and TEWV which had three options: 1) do nothing; 2) build new in-patient facilities in Harrogate; and 3) re-provide in-patient care elsewhere and invest in community services. The committee was also told that the only viable option was that of option 3. This preferred option was agreed by NHS England, the Clinical Senate for Yorkshire and Humber and the CCG Governing Body.
- 3.2 The Scrutiny of Health Committee raised a number of concerns with the commissioner and provider, as summarised below:
- It was not clear why the plan to build the new mental health in-patient facility at Cardale Park in Harrogate was paused and subsequently stopped
 - Investment in community-based services, particularly crisis care, is needed but some in-patient care will also be needed, particularly for older people with

advanced dementia or similar complex organic needs who cannot be cared for in other, community-based settings at all times

- How the transition from in-patient beds to community care is going to be managed.
- How all of the different in-patient and community mental health services fit together across North Yorkshire and York.
- The impact upon individuals, loved ones and carers associated with longer journey associated with visiting people in York or Darlington. Where people are reliant on public transport or community transport, this may prove to be a significant barrier.
- The impact upon the Wetherby population appears to have been overlooked.
- The impact of both a growing and an ageing population appears has been overlooked, particularly increases in local populations in Harrogate and Leeds associated with large scale house building.
- Questions were raised about the impact upon Yorkshire Ambulance Service and its ability to respond to the longer and more complex journeys that would result from the need to transport people from Harrogate and Wetherby to York.

3.3 The committee resolved to work with the NHS locally and scrutiny at Leeds City Council and the City of York Council to hold a joint health overview and scrutiny meeting in early 2019 to review the impact of the proposed changes across the whole area affected.

4.0 Joint Health Overview and Scrutiny meeting, 15 February 2019

4.1 The committee was made up of councillors from North Yorkshire County Council, City of York Council and Leeds City Council. The North Yorkshire County Councillors on the committee were: Jim Clark (Chairman), Liz Colling, John Mann and Zoe Metcalfe.

4.2 There were a number of issues identified and points of clarity gained during the course of the meeting, as follows:

- The decision to 'pause' to build the new mental health in patient facility at Cardale Park in Harrogate was taken by the Tees, Esk and Wear Valley NHS Foundation Trust
- A new mental health in-patient facility would not be built in Harrogate and the Cardale Park site would be used for an alternative health/social care purpose
- The overall number of mental health in-patient beds available in the county would reduce
- Every effort would be made to ensure that in-patient treatment was provided as close to home as possible
- Confirmation that 'out of area' meant out of the area covered by the Tees, Esk and Wear Valleys NHS Foundation Trust.

4.3 There remained some confusion as to what the impact of the changes would be upon the new 72 bed, mental health in-patient hospital that is currently under construction at Haxby Road, York. There were also some concerns about how the (system-wide) transition from in-patient treatment to enhanced community-based treatment would be managed.

4.4 The Joint Health Overview and Scrutiny meeting will be reconvened once the public engagement process by Tees Esk and Wear Valleys NHS FT and the Harrogate and Leeds Clinical Commissioning Groups has been completed and there is a better understanding of: 1) what the model of enhanced community mental health

care will be; 2) what the demand for in-patient beds will be; and 3) how the transition between in-patient care and enhanced community care will be managed.

4.5 In the interim, the Scrutiny of Health Committee will continue to receive updates from the commissioner and provider.

5.0 Scrutiny of mental health services

5.1 The North Yorkshire County Council Scrutiny of Health Committee has been scrutinising mental health service provision and commissioning in the county for the past 2 years. This has involved informal and formal meetings with commissioners, providers, service users and the voluntary and community sector. This extended scrutiny revealed that there had been a sustained period of underinvestment in mental health services in the county, the result of which has been that services in the county lag behind those provided in neighbouring areas, such as the Tees Valley and West Yorkshire.

5.2 It has been estimated that the current level of total spend on mental health services in the county is approximately 9% of total health spend as opposed to 12% in the Tees Valley. It is also clear that there are significant gaps in community-based service provision in the county, when compared to what is available in neighbouring areas.

6.0 Recommendation

6.1 That the committee notes the report and identifies any specific, local issues of concern that could be referred to the North Yorkshire County Council Scrutiny of Health Committee for consideration.

Daniel Harry
Democratic Services and Scrutiny Manager
North Yorkshire County Council
13 March 2019

Transforming Adult and Older Peoples' Mental Health Services in Harrogate and Rural District

1. Purpose

The purpose of this paper is:

To use the detail contained within the document: '*Transforming Adult and Older Peoples' Mental Health Services in Harrogate and Rural District – a case for change*' that can be found at <http://www.harrogateandruraldistrictccg.nhs.uk/6-december-2018/6-december-2018-item-84-mental-health-transformation/> to discuss with the Joint Health Overview and Scrutiny Committee North Yorkshire, Leeds and York the rationale and process undertaken to date to develop the preferred solution and seek support to proceed to consultation with stakeholders and the public on the options for an enhanced community mental health services model.

2. Background

Since the decision to pause the development on the Cardale Park site in July 2017, Tees, Esk and Wear Valley NHS Foundation Trust (TEWV) and Harrogate and Rural District Clinical Commissioning Group (HaRD CCG) have engaged with our patients, their families and carers, our staff and our partners to identify some of the main issues and priorities for specialist mental health services provided for patients in Harrogate and Rural District.

Our patients and the public have told us that we need to improve the responsiveness of services provided while remaining true to the principle of providing care and support close to people's homes, enabling them to remain at home as long as possible and continuing to put quality of care, patient and carer experience and patient safety at the heart of what we do.

The NHS Long Term Plan (2019) highlights the need for new and integrated models of primary and community mental health care to support adults and older adults with severe mental illness. It recommends that local areas should invest, redesign and re-organise core community mental health teams towards a new place-based, multidisciplinary service across health and social care aligned with primary care networks.

What we already know:

- With the rising prevalence of mental ill health and the associated health needs services cannot continue to be delivered in their current form;
- Service users tell us that they are dissatisfied with current services including the crisis response, particular out of hours;
- There is a lack of capacity and very limited range of community services;
- Current inpatient facilities that serve Harrogate and Rural District do not adequately meet the privacy and dignity needs of our patients;
- Building a stand- alone unit that meets CQC requirements would require staffing to be removed from the community teams.

Why do we need a case for change?

- A stand-alone unit would not be clinically viable from a clinical quality, safety and workforce availability perspective.
- Referral and contact rates for adults and older people from Harrogate are some of the highest in the Trust, again greater than the level of need indicates.
- Services need to be more recovery focussed and support people to stay well.

- There are more admissions to mental health inpatient beds from the local population than the level of need would indicate.

The case for change fully describes why and how we wish to transform the way in which mental health services for adults and older people in the Harrogate and Rural District are provided and this has been reviewed by independent clinical experts in the Yorkshire and Humber Clinical Senate who fully support the proposal.

3. Update on work undertaken to date

Using the information we received in the pre engagement and engagement phase of this project we developed a range of possible solutions that described ways in which we could develop safe and sustainable services into the future for our local population. We have worked through the range of potential solutions to identify those that best meet the four locally identified essential criteria that have underpinned this work, to ensure:

- Services are designed around effective clinical pathways
- People are cared for as close to home as possible
- Care is delivered in a way that supports recovery and builds resilience
- Services are both clinically and financially sustainable for the future

Within the development of these solutions, we have considered the wider needs of people who experience mental health problems, for example those with long term conditions, learning disabilities and dementia, frailty and social isolation and their carers. We have thought about how we can ensure that the physical and mental health needs are met and how we can work with partners in adult social care, the wider community, primary care teams and the voluntary sector to integrate the support and care people with mental health needs require in a timely and clinically effective manner.

Importantly we have also looked at how we can support wider work to prevent mental illness, intervene early when further support is needed and ensure easy access to a responsive specialist community service.

The solutions that we developed and considered are:

- Solution 1: Do Nothing.
- Solution 2a: Build new like for like inpatient unit as a stand-alone mental health acute assessment and treatment facility in Harrogate.
- Solution 2b: Build a new hospital that provides full EMSA* and privacy and dignity standards on the Cardale Park site.
- Solution 3: Invest in an enhanced community service model which will enable a reduction in the number and utilisation of inpatient beds and re-provides inpatient care from a specialist facility.

* EMSA – eliminating mixed sex accommodation

The detail of these solutions can be found in the Case for Change document <http://www.harrogateandruraldistrictccg.nhs.uk/6-december-2018/6-december-2018-item-84-mental-health-transformation/>

Through a lengthy process of solution development, it became clear that the only viable solution that could meet the essential criteria and provide an effective response to what the engagement process told us was important to members of our community was solution 3.

The aim of solution 3 will be to enhance the level and intensity of community services in order to reduce the need for people to be either admitted to or have extended stays in hospital and

where hospital admission is required, for this to be provided from state of the art specialist facilities.

In summary by implementing this solution we will be able to:

- Improve specialist mental health services delivered to people in Harrogate and the surrounding areas
- Increase capacity in community teams to allow them to support joint working with other teams such as Local Authority and voluntary sector staff and primary care
- Develop specialist in-patient facilities
- Combined with the Local Authority look at providing a model for step up and step down care for people with dementia
- Improve timely access to services that will support people before they reach a point of crisis
- Provide community alternatives to a place of safety within Harrogate to support people if a crisis does arise
- Continue the work that is already underway to address any issues that relate to a reduction in Section 136 provision across North Yorkshire and York.

4. Next Steps

At the beginning of December 2018 Harrogate and Rural District CCG Governing Body approved the recommendation to proceed with implementation of Solution 3 and to work in partnership with TEWV to carry out further consultation with the public, service users, their families and carers and clinicians to develop the options for an enhanced community model for provision of specialist mental health services in Harrogate and Rural District.

A consultation strategy is now being developed to outline how over the next 12 weeks we will consult and co-produce the next stage of the work with service users, their families and carers, members of the public, clinical staff and other key stakeholders.

Governing Body, TEWV Trust Board and Overview and Scrutiny committee will continue to receive updates as this work progresses.

Following a minimum of 12 weeks consultation TEWV Trust Board and HaRD CCG Governing Body will receive a report on the findings and a proposal which will include a detailed implementation plan to progress with the recommended changes to the community model.

5. Recommendations

For Joint Health Overview and Scrutiny Committee to consider and comment on the proposal to now consult with our patients, their families and carers, our staff and our partners on the options for the enhanced community model in Harrogate and Rural District and Wetherby.