

North Yorkshire Scrutiny of Health Committee An Update on our Care Quality Commission (CQC) Action Plan

Following an unannounced Care Quality Commission (CQC) inspection on some of our adult inpatient wards in January, the CQC published a report from those inspections on Friday 26th March 2021. You can read the full report here <https://www.cqc.org.uk/provider/RX3>

In January the CQC visited three wards at Roseberry Park in Middlesbrough, one ward at Cross Lane Hospital in Scarborough and one ward at West Park Hospital, Darlington. Following the inspections we received correspondence from the CQC relating to concerns about our risk management processes, which they felt were complex and difficult to follow. This is detailed in the report.

Due to these concerns, and subsequent enforcement action, the CQC has rated our acute wards for adults of working age and psychiatric intensive care units 'inadequate' for both safe and well-led. This rating is an individual service rating and does not affect our overall trust CQC rating which remains 'requires improvement'.

I wanted to share with you some of the significant steps we have taken over the last few months.

Whilst work to address a number of these concerns was already underway, making rapid progress has been a priority for us and we have made improvements across both inpatient and community services in all of our localities.

Embedding such large-scale change quickly – and in the midst of a pandemic - is clearly a challenge and I am hugely grateful to our staff for their hard work and to our partners for your ongoing support.

I thought it would be helpful to summarise just some of the work that we have been doing as part of our action plan, which is overseen and reviewed by an external quality assurance board including representatives from NHS England and Improvement, commissioners and the CQC.

We have:

- Introduced new, simpler, safety (risk management) summaries and safety plans for our patients in both inpatient and community settings. We've also reviewed safety summaries and plans for approximately 56,000 patients who are currently under our care.
- Ongoing assurance schedules and more regular ward safety audits, which are carried out by different groups of staff – both senior management and staff peers – to ensure the new procedures are being fully implemented.
- Introduced masterclasses about the simpler processes, with over 1,500 frontline staff attending sessions. We have also developed a new mandatory and statutory training package, which will be delivered via e-learning and we are delivering suicide prevention training.

- Extended the use of Oxehalth Digital Care Assistant, which provides sensory monitoring of patients in their rooms, from three wards to a further 12 wards.
- Launched a recruitment programme. We have committed £5.4 million for extra staffing for our inpatient wards and these posts are currently being advertised.
- Established a practice development team, a new clinical supervision working group and additional leadership development.

We have provided the CQC with evidence of our improvements. As with all enforcement action, the notice will remain in place until the CQC is able to re-inspect and review the particular areas of concern. However, we have already made great progress and we are committed to making continued improvements across our services.

We were also already well underway developing Our Journey to Change, our new strategic direction, which has now launched. This has improving the experience for people who use our services, families, carers, staff and partners at the heart of everything we do and will help us to embed this work. Ultimately our focus is to work collaboratively, to promote and uphold a culture of compassion, respect and responsibility and importantly, to ensure we deliver safe and personalised care, which means a great experience for the people who use our services, their families and carers.

We'll continue to keep you updated but please do get in touch if you'd like to talk about this in more detail with me or a member of the team.

Many thanks

Brent Kilmurray
Chief executive
Tees, Esk and Wear Valleys NHS Foundation Trust

Item 6 part 2

Care Quality Commission (CQC) Improvement Actions

June 2021

The CQC inspections in January

- In January, CQC inspectors visited:
 - three wards at Roseberry Park
 - one ward at Cross Lane Hospital and
 - one ward at West Park Hospital
- The CQC had concerns about our risk management processes, which they felt were complex and difficult to follow.

Our action plan

- Whilst work to address these concerns was already underway, making rapid progress has been a priority for us.
- We developed an improvement programme, which is overseen and reviewed by an external quality assurance board which includes representatives from NHS England and Improvement, commissioners and the CQC.
- We have made improvements across both inpatient and community services in all of our localities.
- Embedding such large-scale change quickly – and in the midst of a pandemic - is clearly a challenge. We are hugely grateful to our staff for their hard work and to our partners for your ongoing support.

Actions

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Actions

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- Launched a recruitment programme. We have committed £5.4 million for extra staffing for our inpatient wards and these posts are currently being advertised.
- Established a practice development team, a new clinical supervision working group and additional leadership development.

Assurance and oversight

- We have provided assurance to the Care Quality Commission (CQC) that effective systems are in place in our wards to help keep patients safe - and that further improvements are already underway.
- The Trust's improvement programme is overseen and reviewed by an external quality assurance board which includes representatives from NHS England and Improvement, commissioners and the CQC.
- New assurance schedule launched in April includes ongoing supportive audit and programme of improvement
- Directors visits monthly focussed on learning from incidents
- Peer review took place in May

Further actions

Launch of Our Journey To Change



Item 6 part 3

NORTH YORKSHIRE COUNTY COUNCIL SCRUTINY OF HEALTH COMMITTEE

18th June 2021

**Tees, Esk and Wear Valleys NHS Foundation Trust –
A brief update on the implementation, development
and running of the enhanced community services
model as part of the York and Harrogate
transformation process with emphasis on Harrogate
and Rural district.**

Report of

Naomi Lonergan, Director of Operations, Tees, Esk and Wear Valleys NHS Foundation Trust

Purpose of this report

1. This paper provides a brief update the implementation, development and running of the enhanced community services model as part of the York and Harrogate transformation process with emphasis on Harrogate and Rural district.

Background

2. As part of Transforming Adult and Older People's Mental Health Services in Harrogate and Rural District, EMT received a paper in July 2018 outlining the service model delivery solutions being formed following local engagement and discussions with partners and other stakeholders. The most viable local solution identified was to invest in increasing the level of community service available through a reduction in inpatient beds and to re-provide inpatient care from capacity in the new hospital Foss Park, York.
3. In support of this in November 2018 agreement was given by Clinical Senate to progress to engagement with service users, carers and the wider community across Harrogate and Wetherby town regarding the proposal. Engagement commenced 24th June 2019 for a period of 12 weeks.
4. Foss Park Hospital was opened in April 2020, in the height of the worldwide pandemic, one week ahead of schedule. The closure of the Briary Unit and subsequent re-provision of inpatient services released transformation funding for implementation of the enhanced community services model.

5. MHSOP Community Mental Health Development:

- 5.1 The service is now working through its restructured operating model following establishment of 3 GP Aligned Care Cells (GPACC), which overlay the Primary Care Networks in Harrogate and Rural District. This has led to closer relationships on an operational level with partner agencies.

- 5.2 The Covid pandemic has impacted plans to have designated staff working to share the new model with partner agencies and linking in to MDT forums such as frailty meetings.
- 5.3 The team recently reviewed the GPACC model in addition to a caseload review. The resulting learning has informed a number of amendments to the model. Staff in all three GPACC reported benefits in working with a small consistent staff group with a defined group of surgeries and care homes. Benefits identified include good communication, supportive relationships and a shared understanding of service user needs and treatment plans supporting consistency for service users and carers irrespective of care coordinator or lead professional being on leave.
- 5.4 Substantial work has been ongoing developing the community model to provide intensive support and treatment at home, avoiding admissions where safe to do so. Forums have been established to enable Community and Crisis teams to discuss those people requiring admission with inpatient colleagues on a regular basis to support discharge planning and minimise length of stay.
- 5.5 The work has been impacted by the need to implement a cohorting approach to admissions in North Yorkshire and York. Harrogate and Wetherby patients were being initially admitted to Rowan Lea in Scarborough until a negative Covid test was confirmed and then transferred to either Moorcroft Ward (for functional patients) or Wold View Ward (for organic patients) at Foss Park Hospital.
- 5.6 The table below shows Admissions and ALoS positions at year end for the 3 years to 30th April 2021 in the context of development of the community mental health provision.

	FUNCTIONAL						ORGANIC					
	18/19 baseline from transformation paper		2019/20 Remeasure		2020/21 Remeasure		18/19 baseline from transformation paper		2019/20 Remeasure		2020/21 Remeasure	
ADMISSIONS	49		34		32		33		35		21	
Gender Split	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
	16	33	12	22	8	24	16	17	22	13	11	10
LENGTH OF STAY	55.05		49.23		48.07		61.35		65.46		74.46	
Gender Split	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
	33.66	65.67	46.38	50.27	38.75	51.45	55.67	67.54	64.95	66.31	73.07	74.46

6. AMH Community Mental Health Development

- 6.1 Community and Crisis Team – As reported previously following the closure of the Briary Unit the Adult Crisis Team relocated to The Orchards community hub in Ripon with no disruption to services on the 28th April 2020.
- 6.2 From a staff experience perspective, despite the disruption and relocation of a number of staff due to the move, feedback has been very positive, with limited staff movement occurring since the move. The maintenance of this workforce has supported continued delivery of a place based which was a concern given the impact of the current pandemic.
- 6.3 With reference to the Crisis Team, the Consultant Psychologist, Advanced Nurse Practitioner and Crisis Community Support Workers additional posts have been recruited into although there has been limited staff movement that is being managed through normal on-going recruitment.

6.4 As previously reported additional funding secured outside the transformation process was used to recruit 5.48wte Senior Crisis Practitioners to enable provision of the All Age Crisis Helpline which remains fully recruited into. To maximise value from the roles they have been integrated into the larger Crisis Team and rotate between supporting the All Age Crisis Line and acting in Senior Clinician roles within the Crisis Team. The helpline has seen a significant rise in both calls and referrals logged into the Crisis Team that aligns incrementally with the pandemic and lockdowns.

6.5 With reference to the Harrogate Integrated Community Team there has been some successful recruitment in to the remodelled team however there are still some recruitment challenges. In particular the Band 6 Community Practitioner and Band 5 Higher Assistant Psychologist roles have been recruited. The Band 5 Community practitioners remain vacant and are now being advertised as Band 6 roles to encourage applications. The Band 6 Occupational Therapist role could not be recruited to but has now been filled as a Band 5 developmental post.

6.6 In terms of our Wetherby provision TEWV planned to host with Leeds CCG a mental health adult and older people's service mapping event over a number of sessions using MS Teams in November and December 2020. However due to COVID Lockdown two and requests from primary care GP's who's were struggling to attend, it was agreed with Leeds CCG to facilitate the 3 sessions w/c 21/1/21. This was again unable to proceed due to the third lockdown however the proposal is run the event in September 2021 with partner reengagement commencing in June 2021. To maintain engagement in the interim we have sent representative to Leeds CCG to review services and examine potential transformation.

6.7 Section 136 Suite – As previously reported the Section 136 suite located at The Briary closed as planned with provision being facilitated primarily in Foss Park 136 Suite with additional capacity at Cross Lane Scarborough. The 136 Suite has not experienced and significant rise in demand across the period of the pandemic.

6.8 With regard to Inpatient Provision in the context of transformation and the current pandemic Harrogate and surrounding area residents who required admission have been accommodated in Foss Park Hospital as planned. COVID cohorting plans previously implemented across the facilities in Scarborough at Cross Lane and Foss Park remain in place.

6.9 The table below shows Admissions and ALoS positions at year end for the 3 years to 30th April 2021 in the context of development of the community mental health provision.

AMH	18/19 baseline from		End 2019/20 Remeasure		2020/21 Remeasure	
Admissions	184		185		168	
Gender Split	Male	Female	Male	Female	Male	Female
	72	112	86	99	76	92
Length of Stay	31.58		22.25		19.94	
Gender Split	Male	Female	Male	Female	Male	Female
	25.2	36.43	21.23	23.61	20.2	19.74

Implications

- **Financial** – N/A in these recent changes.

- **Human Resources** – Recruitment is continuing into a number of the transformed service roles
- **Equalities** – N/A.
- **Legal** – N/A
- **Crime and Disorder** - N/A
- **Information Technology (IT)** – The opportunity has been taken to support improved IT access including sustainable solutions for remote working.
- **Property** – N/A

Conclusions

The transfer of services out of the Briary Wing at Harrogate District Hospital has been a significant change for service users, carers and clinical staff.

In making these changes TEWV has been mindful of the need to retain service delivery commensurate with individual clinical needs and ensure improved access to help where and when required.

The transformed services are delivering continued place based and crisis care despite the impact of the pandemic and restriction imposed by lockdowns. Admissions and ALoS trajectories are on the whole achieving or continuing towards achieving transformation targets again despite the impact of the pandemic.

Recommendations

The committee is asked to review and note this paper.

Author

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NORTH YORKSHIRE COUNTY COUNCIL SCRUTINY OF HEALTH COMMITTEE

18th June 2021

**Tees, Esk and Wear Valleys NHS Foundation Trust –
Update on the development of North Moor House: A
new community mental health hub in Northallerton
for Hambleton and Richmondshire.**

Report of

Martin Dale, Strategic Project Manager, Tees, Esk and Wear Valleys NHS Foundation Trust

Purpose of this report

1. This paper provides an update regarding the proposed community mental health hub for Hambleton and Richmondshire in Northallerton, and provides detail of recent developments and progress made. A previous paper was presented to the committee in September 2019, and December 2020.

Background

2. Mental health services across Hambleton and Richmondshire have been provided across a range of premises including health centres, GP surgeries, acute general hospital facilities and on business parks. It has long been identified that the services need to work more closely together and that this could be best supported by locating them alongside each other.
3. The removal of the Northallerton mental health inpatient beds in early 2019 enabled investment into community services which sought to significantly improve access for service users and carers, and to extend the mental health service offer to better meet people's needs, especially when experiencing emotional distress. These developments were funded through the reinvestment of finance which was previously required to maintain the inpatient bed provision.
4. Alongside the enhanced provision of community mental health services, the work to develop a new community mental health hub has been underway since 2018. The provision of a hub aims to join services more efficiently, increase the consulting / interview room space available (and thus improve access and reduce waiting) and to enable a more therapeutic environment in which people can be safely and comfortably seen. The Trust's capital investment in this scheme is approximately £5.5m.

5. The hub will co-locate services from all 4 mental health specialties (Adults, Older Persons, Children and Young People and Learning Disabilities) within the same premises to enable effective communication and support joint working which will encourage safe transfers of care, such as the transition from children's services to adults.
6. Children and Young Persons services have a separate entrance, reception and consulting spaces but staff will have access to shared facilities such as meeting and training rooms, dining facilities and break out spaces. This is to ensure safeguarding compliance, whilst retaining an "*under one roof*" ethos.
7. To help illustrate the facilities on offer, in addition to the team spaces and formal meeting rooms, we are providing 19 consulting rooms for Adults, Older Persons and Learning Disability Teams, and a further 6 consulting rooms for our Children and Young Persons services. Additionally we have provided a Carer's space which can be accessed via the main reception and a family room in the Children's and Young Person's area. There is also a dedicated garden space for both Memory services and Children's and Young Persons services to provide safe access to garden environments.
8. Despite the limitations caused by the pandemic, including restrictions to number of workers permitted on site, furlough arrangements for some sub-contractors, etc., progress has been positive and the scheme had experienced only minor delays until very recently.
9. The construction programme was originally intended to complete in late February 2021 but it was previously acknowledged that due to a small number of Covid-19 related delays (such as the delivery of steel to site) the build would be completed and handed over to TEWV in early April 2021.
10. Unfortunately, a further delay was recently experienced which has further impacted the planned handover. The delivery of the electricity meter to site was significantly delayed and a number of key construction and installation actions could not be completed until the meter had been installed. This was something that could not be controlled by ourselves, or by our construction partners. ESH.
11. The meter arrived on site Friday 14th May and the construction team are now busy coordinating the installation and safety checking of the site. It is anticipated that this will take approximately 6 weeks with a provisional handover to TEWV planned for late June 2021, though potentially subject to further minor changes.
12. In between time we are looking to complete any actions we can with regards commissioning work prior to handover, to try and reduce the impact of this delay. We acknowledge that the majority of actions cannot be completed until we take formal handover, but where we can we are working to get ahead of schedule.
13. Once we have had the building formally handed over to us we will then fully commission the building over a six week period, after which we will be transferring services from the Friarage site, from Brompton House and from Gibraltar House, in Northallerton.

14. As part of the commissioning process we will be spending time helping staff to become fully orientated to the layout and management of the new site, and to ensure everyone is fully aware of all core protocols such as fire and emergency response procedures.
15. Communications are being prepared to alert our service users, carer and staff about the change of premises and to provide all necessary contact details in good time. For a number of our teams the telephone numbers will not change, and for the small number that will we have secured permission to retain the existing numbers for 3 months to ensure that everyone can continue to access services.
16. The Friarage and Gibraltar House accommodation currently used by our teams are managed under leasing arrangements and will be returned to the respective landlords. Brompton House is owned by TEVV and will be sold on the open market.
17. We have previously reached agreement with South Tees Hospitals NHS Trust and have received assurance that the Acute Hospital Liaison (mental health) Team will remain on site within the hospital over the 24 hour period, 7 days per week – this is essential to comply with the requirements of Core 24.
18. Additionally we have assurance that the Adult Crisis and Home treatment Team will be able to access accommodation at the Friarage Hospital out of working hours (after 8pm to 8am the following day) to ensure safe access for service users. Within working hours the Crisis and Home Treatment Team will be based at North Moor House, as intended.
19. We are hoping to facilitate some site visits for the Scrutiny of Health Committee in the week prior to our team transfers. Once we have a confirmed handover date we will look to make arrangements, offering as much notice as possible.
20. The architect's illustration of the proposed hub is pictured below...



...and here is the completed building (taken on a dull day in May 2021!)...



Implications

- **Financial** – The development of North Moor House is being met entirely from TEWV capital reserves
- **Human Resources** – A formal management of change process within TEWV has been completed for all staff transferring into North Moor House
- **Equalities** – A refreshed equality impact assessment was completed prior the Full Business Case being approved
- **Legal** – N/A
- **Crime and Disorder** - N/A
- **Information Technology (IT)** – The new hub will embrace the most up to date technology to support remote working (where required) and to meet expected levels of connectivity. Remote working will include facilities and resources to use Microsoft Teams conferencing by all staff and also BT Attend anywhere for service user appointments where travel is not required or cannot be managed easily. This will help support more choice in the offer to service users and carers.
- **Property** – North Moor House has been developed and is owned by TEWV.

Conclusions

The development of North Moor House provides a fantastic opportunity to bring together all 4 mental health specialties to enable improved communication and support safe transfers of care.

Improvements to mental health working environments for staff and with regards to high quality care delivery environments for service users and carers have long been overdue in Northallerton. There has been little previous opportunity to significantly increase consulting room space and to promote the levels of joint working which can be achieved when services sit under the same roof.

The development of North Moor House is a crucial next step for services and represents TEWV's ongoing commitment to invest in the modernisation of mental health services.

Recommendations

The committee is asked to review and note this paper.

Author

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Item 6 part 5

NORTH YORKSHIRE COUNTY COUNCIL SCRUTINY OF HEALTH COMMITTEE

18th June 2021

Tees, Esk and Wear Valleys NHS Foundation Trust – Developing a community mental health hub for Selby

Report of

Martin Dale, Strategic Project Manager, Tees, Esk and Wear Valleys NHS Foundation Trust

Purpose of this report

1. This paper provides an update regarding the previously proposed community mental health hub for Selby.

Background

2. Previous reports have been presented to the North Yorkshire County Council (NYCC) Scrutiny of Health Committee in September 2018 in September 2019, and most recently in December 2020.
3. Community mental health services in Selby are currently based on a number of sites, some with insufficient space to meet all clinical requirements.
 - Children and Young Person's services are located in *The Cabins* on Flaxley Road and will need to transfer into new premises within the 12 months. TEWV does not own this site and we believe that we will be served notice to relocate in the coming months. Additionally the Care Quality Commission (CQC) has advised that services must be transferred to improved accommodation at the earliest opportunity.
 - Learning Disability services have some limited access to shared desks at *Selby Memorial Hospital* and there is additional pressure on consulting room space locally. TEWV has no ownership on this site.
 - Adult and Older Persons community mental health teams remain based at *Worsley Court* on Doncaster Road where TEWV have made some improvements to the environment for service users, carers and staff. The building is not owned by TEWV (it is owned by NHS Property Services) but could be improved further with further investment.
4. Since 2017 a project team in TEWV had been actively looking to develop a new community hub model in Selby (similar to Huntington House in York) whereby all TEWV Selby based community mental health teams could be accommodated on one site. Our ethos was that this would improve communication, support safe

transfers of care between teams and maximise the efficiency of resource management, hence supporting more time for care delivery.

5. A number of options had been explored including refurbishment of the existing Worsley Court site whilst retaining the lease, purchase of the Worsley site, and in seeking alternative lease opportunities within available local business accommodation. None of these options were possible due to economic or availability factors.
6. A further option was considered to purchase an alternative site and construct new premises to meet service requirements in the Selby area. However, exploration of available sites was extremely challenging, not least due to the lack of general availability in the Selby area. Whilst a number of business park sites outside Selby have been considered these all presented access challenges for local people and hence were ruled out.
7. In 2018 TEWV looked to purchase a site that was suitably located for easy local access but the site was quickly purchased by an external developer and hence was unavailable to us.
8. Discussions within the One Public Estate forums were initially useful in helping to verbally identify potential sites in Selby, to understand local variances and to connect with key people. Two sites belonging Selby District Council were identified through these forums. These would have been considered but it was not possible to obtain full details of these from the council, hence we were unable to progress these schemes.
9. An alternative commercial site was later identified in 2019 and plans were appraised to determine its suitability and achievability. Whilst the site was certainly suitable it quickly left the market and hence it also was no longer available to us.
10. The building previously used by North Yorkshire Police in Selby was also fully appraised but whilst the space available it was in excess of our requirements, and it was noted that the level of work required to create the right environment and the resulting potential costs ruled this building out as it would not be financially viable. Essentially it would have created a revenue challenge that could impact front line service funding.
11. Work continued to try and identify available but not yielded no results and in the interim some light refurbishment of facilities at Worsley Court was undertaken, funded through the internal capital programme.
12. It has since been agreed that we will stop looking to identify a site for a new hub in Selby and instead will invest further capital (£175k) in modernising facilities at Worsley Court to suitably accommodate the CAMHS Team, currently based in the Cabins, and to provide high quality clinical space for our CAMHS service users.
13. In addition to providing significantly improved CAMHS facilities, we will be able to accommodate community teams from all 4 specialities (Adults, Older Persons, CAMHS and Learning Disabilities) under one roof by using space previously unused at Worsley Court.

14. By investing in these facilities we can also provide increased consulting space for all teams, and better staff working environments (to support productivity) through spaces specifically designed to support confidential remote appointments.
15. In early 2020 we established a small project and design team to oversee the transfer of services from The Cabins to Worsley Court and we anticipated that the required building work and modifications would be completed by the end of that year. However, the space identified for improvement was allocated for use by Selby GPs as part of the local pandemic response and so we were understandably unable to start construction work as planned, and hence our plans for service transfers were understandably delayed.
16. The local GPs have since moved back into their primary cases but we have unfortunately experienced a further delay and have been unable to start construction work.
17. The building was originally an inpatient unit with some accommodation for adult and older person's community teams. It was closed to inpatients in December 2016 but this change was never registered by NHS Property Services. This means that to complete the necessary work we are advised that we now need formal planning approval.
18. The formal planning application has now been submitted and we are hopeful of achieving full approval so that we can commence construction in summer 2021.
19. The construction programme is for 12 weeks, followed by a period of time for TEWV to commission the building, train and orientate staff and to move CAMHS and LD across to their new premises in autumn 2021.

Implications

- **Financial** – The alterations to Worsley Court will be met from TEWV capital reserves.
- **Human Resources** – N/A
- **Equalities** – The changes planned to Worsley Court ensure no impact in regards to equalities.
- **Legal** – N/A
- **Crime and Disorder** - N/A
- **Information Technology (IT)** – The improvements to Worsley Court embrace the most up to date technology to support remote clinical appointments as well as face to face intervention.
- **Property** – N/A

Conclusions

The development of a new mental health hub for Selby, bringing together all 4 mental health specialties (Adults, Older Persons, Children and Young People and Learning disabilities), was viewed by all stakeholders as a key development but it has not been possible to identify a suitable site.

By investing in a significant programme of improvement at Worsley Court we can ensure that service users have good access, are seen in suitable and safe premises, and that services can continue to function effectively.

The transfer of services out of The Cabins is long overdue, and noted as a key action by the Care Quality Commission, and can now be facilitated.

Pictured below, Worsley Court



Recommendations

The committee is asked to review and note this paper.

Author

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