

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

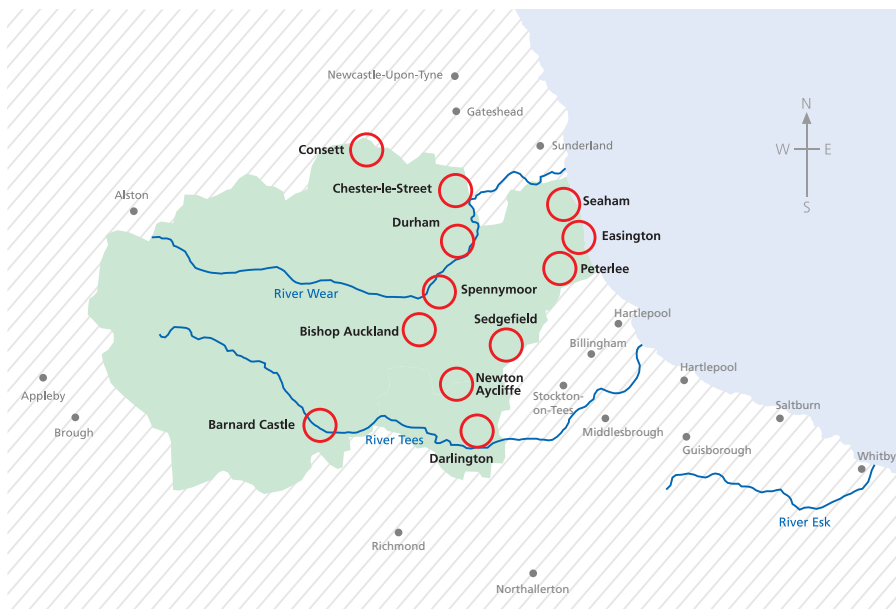
Time period	Number of beds	Bed occupancy (%)
1 April 2014 – 30 November 2014	45	75%
1 December 2014 – 30 November 2015	30	81%

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 consultation.)

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 TEWV

The preferred option of mental health professionals at TEWV 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


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North Durham
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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

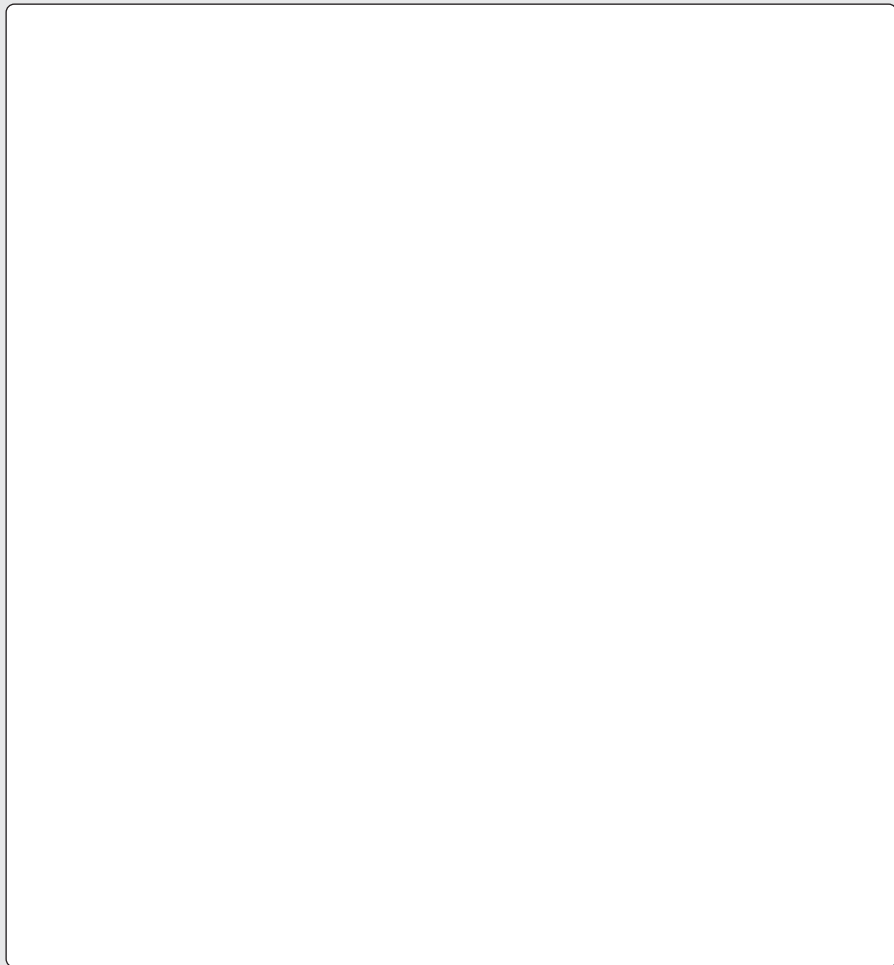
Provide a mixed sex ward at Bowes Lyon Unit, Lanchester Road Hospital, Durham and a mixed sex ward at Auckland Park Hospital, Bishop Auckland.

Please explain why you have chosen this option

Continue overleaf if required

Please detach and return to the address overleaf





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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