Case Study Harrogate and Rural District Mental Health Services

Background

Harrogate and Rural District Clinical Commissioning Group (HaRD CCG) developed proposals to reconfigure their mental health service for working age adults and older people in the Harrogate and Rural District area.

In July 2018 the Senate was asked to advise on the following questions:

- Is the proposed model, and preferred solution description, in line with best practice?
- Can the Senate identify any clinical concerns about the proposed model, and the preferred solution description?

The advice from the Clinical Senate was fed into the discussions with HaRD CCG governing bodies to inform the decision to move to public consultation. The advice was also fed into the NHS England sense check 2 at the start of October 2018.

The Problem

The present in-patient mental health unit is in the Briary Unit on the acute hospital site at Harrogate District Foundation Trust (HDFT). The unit is not considered by the Care Quality Commission (CQC) as fit for purpose and benchmarking and analysis of local data shows that admission rates and lengths of stay are longer than other areas where their provider, Tees, Esk and Wear Valley Foundation Trust (TEWV), provides adult or older peoples inpatient care. Following engagement with the public the CCG developed proposals to extend and enhance their community provision and provide their in-patient care in a specialist unit with the newly provided unit at Haxby Road in York used as an example.

Our Advice

We agreed that the model with its increased focus on community based provision, reduced admissions, length of stay and increased support to help people stay at home is in line with best the 3 CCGs of North Yorkshire practice.

Our recommendations included

i. The need to develop further the proposals for the integration of mental health services across primary care, secondary care, social care and the voluntary sector.

ii. To demonstrate that the York facility has the capacity for the Harrogate population and to provide information on how the bed requirements for the Harrogate population have been calculated.

iii. To further describe how both the physical and mental health needs of the patient are integrated

iv. To demonstrate that solutions to the issue of Suite 136 are being developed

Our Impact

The Clinical Senate involvement has allowed us to feel confident in proceeding with our preferred solution. The positive response from the Clinical Senate has supported the progress of this work both with our clinical colleagues and also when presenting the case for change with the public. The Senate advice has been able to act as reassurance for others that the preferred option is considered clinically safe in the view of an independent body.

Testimonial

"Working with the Yorkshire and Humber Clinical Senate has been a really positive experience. The process was very well managed and supportive.

We felt that the review was thorough and the questions that we were asked had been informed by a thorough understanding of the case for change. The clinical reflections allowed us to ensure that we were presenting the solutions throughout our process in a clear and understandable way." Ruth Gordon, Project Lead, Mental Health and Learning Disability, for

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Clinical Senate Yorkshire and the Humber

