

**Update for Partners re TEWV COVID-19 Contingency Arrangements
Week commencing 13th April 2020**

The Trust continue to implement their contingency plans in response to the evolving situation around COVID-19. Key issues and changes (applicable to all services) since our last briefing are:

Inpatient and Crisis/Urgent Care Services

- We continue to manage well with bed capacity, but are keeping this under daily review as the situation in the wider community and country changes.
- We continue to support regular contact between patients and visitors through the use of telephones and video-enabled devices. However, given the nature of our services, there is a real risk that visitors may inadvertently bring coronavirus on to the wards. The impact of an outbreak on a ward would be very serious for both staff and patients, and the enforced self-isolation would significantly impact on service delivery for other wards and teams. We have therefore suspended visiting until further notice. The only exceptional circumstances where one visitor – an immediate family member or carer – will be permitted to visit are listed below. These will be assessed on a case by case basis and appropriate arrangement made with between the ward manager and family member/carers:
 - End of life care (including COVID-19)
 - When supporting someone with a mental health issue such as dementia, a learning disability or autism, where not being present would cause the patient to be disproportionately distressed.
 - When the family are directly involved in providing care and are part of the treatment plan, and if that care changes, that could cause significant deterioration or risk (e.g. someone with severe autism).

Even in these exceptional circumstances, we will be unable to support visiting if the visitor is unwell, especially if they have a high temperature or a new, persistent cough. Special care will be taken if the visitor is vulnerable as a result of their medication, a chronic illness or over 70 years of age. All visitors will need to adhere to latest guidance in terms of hand washing and hygiene, and adhere to the required PPE for that ward. This is likely to be a minimum of fluid resistant face mask, gloves and apron. Failure to comply will mean they will not be allowed on to the ward. To provide additional support, we have arrangements in place to allow consideration of exceptional cases falling outside of the above guidance

- Leave of absence (for detained patients) and time off the ward (for informal patients) are important components of treatment, rehabilitation and risk assessment in mental health services. However, given the nature of the coronavirus pandemic, there is a real risk that patients coming and going between the community and the ward environment may inadvertently bring coronavirus on to the wards. Patient leave will therefore be limited during this period of heightened risk and detailed guidance has been given to all ward staff to support them to manage this safely. Leave for socialisation, work or educational placements, or regular home leave has had to be suspended with immediate effect, with alternative arrangements put in place to maintain regular connection with the family. Leave as part of a discharge plan will be discussed and agreed with the MDT and family/relevant others to determine how multiple returns to the ward can be minimised with support from community teams
- Work planned to reprovide inpatient care for Harrogate and Wetherby Town patients has been brought forward in response to the current Covid 19 epidemic and in support of Harrogate District Foundation Trust who have been working to increase their capacity to treat patients. Rowan Ward, which provides care for older people with mental health needs, was returned to HDFT on 6th April 2020 and the transition of AMH Cedar Ward patients to Foss Park will start w/c 23rd April 2020.
- As planned, our mental health services are vacating the Briary Wing at Harrogate District Hospital. We have attached a briefing with further information including where teams are moving to and how you can contact them. (See Appendix A)
- The development and completion of Foss Park our new purpose built hospital on Haxby Road in York continues and is in its final stages to meet requirements to open this month. Before opening, the building needs to be inspected and approved by the Care Quality Commission (CQC). This inspection took place this week and we can now confirm that CQC registration is now in place.

We are currently holding induction sessions and so far 64 staff have received their induction to the new hospital and further sessions are planned next week to include all professions, housekeeping staff and administrators.

We are delighted to get to this position, particularly with all of the current challenges. The teams involved in this – both in the Trust and external partners - have been working extremely hard to make sure that the project ran to schedule, especially in these last few weeks, so a huge thank you to everyone involved. We will update you further in the next few days.

- Learning disability services at Oak Rise, York have also created a visual support tool and easy to understand picture of a nurse wearing PPE equipment to help patients understand why it is being used and what it does. The picture of a nurse is clearly labelled and accompanied by an easy to understand description that was created by service users and staff during an arts and crafts activity. We have been able to share this with other learning disability services across the Trust and with other providers across the region.

- We continue to follow national PPE guidance as it is published and are working hard to ensure staff in all areas have access to appropriate PPE to keep themselves, patients and families safe.
- Updated information relating to crisis services (all providing 24/7 support) is now available at - <https://www.tewv.nhs.uk/services/crisisadvice/>
- All services across North Yorkshire & York including Adult Mental Health, Learning Disabilities, Children and Young Peoples Services and Mental Health Services for Older People are currently mobilising plans to offer an all age 24/7 Urgent care single telephone line. This will provide access to advice about mental health and access to appropriate services, including 3rd Sector services via a Triage process. We now have the functional telephone line and work continues to provide the technical support, standard operating procedures for staff and review of Trust communications to fully implement. Services can continue to be contacted via numbers on the website and a single telephone number will be available soon. Further information will be issued in the weekly briefing and as well as on the Trust website and patient facing information.
- Should emergency changes to the Mental Health Act come into force, we will ensure that all section 12 approved clinicians are fully aware of the impact this will have and any changes to practice this may make. We are not aware of any specific pressures or risks relating to AMHP capacity across our Trust patch at present.

Community Services

- Phone and video contacts for community appointments continue to work well.
- All community teams continue to prioritise contact with patients assessed as highest risk. We are linking closely with public health colleagues and the shielding hubs being led by Local Authorities to make sure we are protecting those who may be the most vulnerable during the pandemic.
- We are trying to maintain a level of contact with all patients, but if you have any significant concerns about particular patient's wellbeing or there is any deterioration in their presentation please let your local community team or crisis team know so they can respond appropriately.
- We appreciate that assessments will continue to be sent into the Trust in line with clinical need, but it would be helpful if referring staff are able to explain to patients that unless there is an urgent need, it is likely to be some time before a full assessment can take place.
- If it would be helpful to have access to the list of online and other resources that we have shared with local Healthwatch teams please let us know.

Care Homes

We fully recognise that the Care Home sector are beginning to come under pressure and that we have an important role in the system to support care home patients and also staff that work in the sector. Specific support to care homes continues within each locality to ensure residents can continue to access mental health support. We are also developing ways in each locality that we might be able to support care home staff to remain resilient at this challenging time.

Prescribing and Access to Medication

All teams have systems in place to make sure patients continue to have access to prescriptions and medication, as outlined in our last briefing. We have now introduced an electronic system to allow prescribers who may be self isolating and working from home to generate prescriptions as normal. We are keeping a close eye on medication supplies to ensure that we are aware at the earliest opportunity if supply is becoming difficult so we can take necessary actions.

Lithium monitoring Update

To minimise the impact on services of monitoring requirements during the stabilisation phase, all prescribers should consider the need to initiate lithium for new patients if there is a clinically appropriate alternative. The majority of patients on lithium are managed by their GP, with TEWV oversight, under shared care arrangements. The Trust lithium registers will be maintained for as long as pharmacy capacity permits, on an exceptions basis if necessary. To reduce community team workload or in response to GP queries, the monitoring interval for patients not in the “at risk” category (defined below) can be extended by up to 3 months; however, patients must keep in good physical health and maintain good fluid intake and should resume normal monitoring intervals as soon as possible and safe to do so.

If patients are in the “at-risk” category (defined below) then their normal monitoring interval should be continued and extension is in most circumstances inappropriate.

At-risk patients are defined as:

- Elderly (> 65 years)
- On treatment for less than 12 months
- Renal impairment (eGFR < 60ml/min)
- Impaired thyroid function at last test
- Raised calcium levels at last test
- Poor symptom control or suspected poor adherence
- Last serum lithium > 0.8mmol/L
- Recent (i.e. since last blood test) introduction or removal of interacting medications (notably NSAIDs, ACE-inhibitor, Angiotensin Receptor Blocker [“sartan”] and thiazide diuretics)

Lithium patients with COVID-19 symptoms:

- If patient does not have symptoms of lithium toxicity, continue lithium but take lithium serum level and U&Es
- If patient has symptoms of lithium toxicity WITHOLD lithium, take URGENT lithium serum level and U&Es
- Symptoms of lithium toxicity include: diarrhoea, vomiting, tremor, mental state changes, or falls
- Advise patients to maintain their fluid intake and not to take over-the-counter NSAIDs (e.g. ibuprofen), but to take paracetamol instead.

National guidance relating to this can be found via the link below:

<https://www.sps.nhs.uk/articles/lithium-drug-monitoring-in-primary-care-during-covid-19-for-stable-patients/>

Additional Support for Services

As we briefed last week, we continue to mobilise a large number of staff to provide additional support to wards and teams over the coming weeks. This includes a huge number of staff helping us in other ways either on site or from home. We are working hard to ensure that all patients in the community receive regular contact over the coming weeks to provide support and help avoid social isolation. In addition, we will over the next week launch a programme of further support through our Trust Volunteers specifically to enhance our capacity for social contact for individuals and driving/transport of equipment. Within this we also have the option to consider specific needs on a case by case basis (eg dog walking). We hope this additional support will be well received by users and families at this difficult time. The new national volunteer scheme is now live so we are also exploring how we might make best use of this.

The Crisis Team based in Northallerton have also been sharing their knowledge and expertise to help other keyworkers who may be struggling and have visited local businesses which are still open. The team have provided anxiety management and mental health support information that has been well received in the area.

Access to Advice and Support for Partners

Local teams will continue to have processes in place to provide support and advice to all partners in relation to clinical issues. .

To help staff in all areas, patients, families and the general public, our Recovery College online have developed a range of new courses to support people during the

pandemic, including courses specifically aimed at young people. The courses are free to access via the link below, or via Recovery College Online on Facebook:

www.recoverycollegeonline.co.uk

A new national NHS mental health hotline has been launched as part of a package of measures to support NHS staff through the pandemic. It provides emotional support from trained volunteers and onward signposting to specialise financial advice, bereavement care and coaching. Staff can call **0300 131 7000** between 7am and 11pm, 7 days a week, or text FRONTLINE to 85258, 24 hours a day. This is a really positive initiative. We are currently trying to confirm if this is just accessible for NHS staff or if other key staff, eg social care and care home sector, can also access this.

Alongside this, we have been working closely with psychologists within the acute sector to try to provide a more focused offer for staff working in critical care, EDs and COVID-19 wards. This is beginning to link together resources within acute Trusts, psychiatric liaison teams and additional support through TEWV so we can support staff to maintain their emotional wellbeing. This is in addition to the national helpline above.

Briefing

Feedback involve two-way discuss engage face-to-face feedback involve two-way discuss engage

17 April 2020

Important planned changes in North Yorkshire and York

Dear partners,

We wanted to make you aware of some important planned changes that are taking place over the next few weeks in North Yorkshire and York. This includes our mental health services vacating the Briary Wing at Harrogate District Hospital and the opening of our new purpose-built mental health hospital, Foss Park in York, which opens this month.

Services moving from Briary Wing, Harrogate District Hospital

The majority of our community, inpatient and crisis services that are based at the Briary Wing, Harrogate District Hospital, are moving to other Trust sites in Ripon, Knaresborough and York.

The moves follow an extensive period of consultation and engagement in the Harrogate and Rural District area. People who use our mental health services told us that whenever possible they want to remain at home, close to family and friends. We have therefore developed and invested in our community mental health and crisis and home treatment services to better support people and avoid admission to hospital.

For those people who do require a hospital admission, we have worked closely and engaged with local services and communities around York, Harrogate (and surrounding areas) and Wetherby to determine the level of need. As a result we have updated our plans, and invested in more staff, to ensure we can provide support to residents in the Vale of York, Harrogate and Rural District and Wetherby who may require inpatient services at Foss Park – our new hospital located on Haxby Road in York.

Below is an update on the specific services which are vacating the Briary Wing at Harrogate District Hospital:

Older people's inpatient services

In light of the current situation the Trust agreed to vacate our older people's inpatient services (Rowan ward) on Friday 3 April. This was slightly earlier than originally planned but it enabled us to hand the ward back over to Harrogate District Hospital. This was to support Harrogate and District NHS Foundation Trust to increase critical care bed capacity for COVID-19 patients.

Services will be moving to Foss Park in early May. However, we appreciate that some people may require an admission before our services move to Foss Park. In these circumstances patients will go to [Meadowfields in York](#) (organic admissions) or [Cherry Tree House in York](#) (functional admissions).



Adult inpatient services

Adult inpatient services currently located at the [Briary Wing \(Cedar ward\)](#) will move to the Trust's new Foss Park hospital in York from Thursday 23 April.

Acute liaison and diversion service

The Trust's acute liaison and diversion service will remain at Harrogate District Hospital, providing 24 hour mental health response support. [Contact details remain the same.](#)

Community services and crisis home treatment services

- The adult mental health crisis response home treatment team will relocate to [The Orchards, Ripon](#) later this month. The contact number remains the same – tel: 01423 553 778.

Please note that this phone number will change in the near future to a single point of access. We will share the new telephone number, and the date that this change will commence, in advance of it going live.

- The older people's crisis team has relocated to [Alexander House, Knaresborough](#). The contact number remains the same - tel: 01423 553530.

Please note that this phone number will change in the near future to a single point of access. We will share the new telephone number, and the date that this change will commence, in advance of it going live.

- The child and adolescent mental health services (CAMHS) crisis team has relocated to [The Orchards, Ripon](#). The contact number remains the same – tel: 01423 544 335.

Please note that this phone number will change in the near future to a single point of access. We will share the new telephone number, and the date that this change will commence, in advance of it going live.

- Trust pharmacists who were based at the Briary Wing have now relocated to Windsor House in Harrogate.
- The Section 136 suite, used for police detentions under the mental health act, will close from 21 April. Support to assess people close to home will be provided through a range of alternative sites. People who have a higher degree of need will go to the York S136 suite for assessment. We anticipate that through the additional investment in community services the need for S136 will reduce.

The opening of Foss Park

Foss Park is our new, purpose-built mental health hospital on Haxby Road, York and provides a range of services including 72 inpatient bedrooms with en-suite facilities for working age adults and older people.

The adult wards are Ebor ward (female adult beds) and Minster ward (male adult beds). The older people's wards are Wold View (for people with dementia) and Moor Croft (for people with mental health conditions such as psychosis, severe depression or anxiety).

All wards provide ground floor, single bed rooms with en-suite bathrooms, lots of natural light and access to outdoor garden areas with multiple therapy spaces including the use of internal planted courtyards. As well as large ward spaces, Foss Park will also accommodate the S136 assessment suite the York adult and older person's crisis teams, an electroconvulsive therapy (ECT) suite and dedicated space for research and development.



There are a number of Trust services moving into Foss Park over the next few weeks:

- Peppermill Court, York
- Cherry Tree House, York
- Meadowfields, York
- Cedar and Rowan wards, Briary Wing at Harrogate District Hospital
- Some services currently at Huntington House, York

Foss Park will be opening very soon and we'll provide you with further information on this over the next few days.

Kind regards

Naomi Lonergan

Director of Operations North Yorkshire and York

