

healthwatch York

Bootham Park Hospital: What next for mental health in York?



March 2016



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Acknowledgements

Healthwatch York were asked to produce a report on the impact of the closure of Bootham Park Hospital felt by people who use mental health services – inpatients, outpatients, current or former patients – their families and carers, the staff involved in treatment and the public in general.

We have had responses from all those sections of the community, with people getting in touch in every conceivable way. Some by letter; some by telephone; some by email; some by written statements; some through conversations individually or with groups; through regular activities like our community drop-ins; and through service user meetings. Many of these accounts and conversations convey an intensity of emotion coupled with acute anxiety, setbacks in recovering, and some even describing relapses to conditions they hoped were behind them. For some, the attempt to convey their feelings, to set down how they felt at the time proved an impossible task causing them to relive the anguish they experienced when the news of the closure reached them. Talking with friends and other people using services often served to intensify and prolong the feelings of abandonment and anger the confused picture gave rise to.

Healthwatch York is nothing without the voice of the people in York. This is your report. Thank you for writing it and for continuing to let us be part of your story. We are profoundly grateful not just to those people who came forward to share their views but also to those for whom it was simply too hard. It is vital that we remember they have not yet been heard, and leave the door open for them to get involved in planning for the future whenever they feel able to.

We would also like to thank The Press, York for encouraging people to share their stories. With this support many more people came forward. We must also thank Georgey Spanswick and Radio York for helping to raise awareness of this story with their listeners after inviting us to talk about hospital finances. And last but definitely not least, the members of York's voluntary sector mental health forum, for spreading the word about what we were doing, and supporting people to speak up.



The Closure of Bootham Park Hospital: What next for mental health in York?

Introduction

In 1772, Robert Hay Drummond, Archbishop of York, and 24 Yorkshire gentlemen agreed to establish an asylum, to be known as the County Lunatic Asylum. John Carr was appointed as the architect, funding was collected, and by 1777 the building was completed. Later, the building's name was changed to Bootham Park Hospital.ⁱ

In April 2014 the Care Quality Commission (CQC) raised concerns about Bootham Park Hospital's suitability for modern mental health services. Discussions began about what a new hospital might look like. At the same time, plans were drawn up by Leeds and York Partnership NHS Foundation Trust (LYPFT) to address some of the CQC's concerns about Bootham Park.

The CQC inspected all LYPFT services again in September and October of 2014. A further report was published in January 2015, giving the provider an overall rating of 'Requires Improvement'. The CQC held a 'Quality Summit' to agree collective action on the issues raised in the report.ⁱⁱ

Also in January 2015 NHS Vale of York Clinical Commissioning Group (VoYCCG) put out to tender the contract for delivering mental health and learning difficulty services across the Vale of Yorkⁱⁱⁱ and made a commitment at the Quality Summit that a new hospital would be built within three years.

It was announced in June 2015 that Tees Esk and Wear Valleys (TEWV) NHS Foundation Trust had successfully secured the 5-year contract for delivering mental health and learning difficulties services across the Vale of York area. LYPFT made a formal complaint to monitor about the CCG's decision as they did not believe it to be in the best interest of the patients at that time. Their complaint was unsuccessful. As a result, all VoYCCG commissioned services in York would transfer from LYPFT to TEWV on 1st October 2015.

The CQC carried out a further unannounced inspection at Bootham Park Hospital on 9th and 10th September 2015. The inspection was in response to concerns inspectors had about delays to implementing previous CQC recommendations relating to patient safety. As a result, the CQC formally required that all regulated activities at Bootham Park Hospital must cease by



midnight on 30th September 2015. They also confirmed they would not register Bootham Park Hospital as a site for TEWV to deliver services from.

As a result, York's acute mental health hospital, Bootham Park, was closed to new admissions from 1st October 2015. Plans are in place to change the use of a number of existing mental health facilities to best meet local needs in the short term. On 2nd October TEWV asked CQC to consider reopening Bootham for outpatient services.^{vi} Works have been undertaken at Bootham Park Hospital to allow the health-based place of safety to reopen, and for outpatient services to return on a phased basis to Bootham. CQC has visited the site to inspect again^{vii}. A new hospital is expected to be built by 2019.

The closure of Bootham Park Hospital has been covered extensively in the media (see Appendix 4). It has been debated in Westminster Hall. There is a report from NHS England looking at the roles of organisations within this, which will cover lessons learnt for organisations. It may yet be the subject of a judicial review. We hope this report adds the voices of those most affected to the story of Bootham Park to what has already been said, and helps them be heard in shaping the future.



Why is Healthwatch York looking at the closure of Bootham Park Hospital in York?

The closure of any hospital is likely to be a serious and significant event for those living near it. The closure of Bootham Park Hospital has been particularly difficult. As the hospital was deemed to be unsafe, the closure happened fast, without consultation. With only a few days to arrange alternative provision for individuals needing the most intensive mental health support, the impact on patients, carers and staff has been significant. This has resulted in increased anxiety and confusion for people locally who relied on its services.

However, given the need to develop short, medium and longer term solutions for providing services in York, the closure is just the beginning of the story. There are still opportunities for the views of the public to be included in future plans. All local facilities have been reassessed, to understand their potential role in bringing back mental health inpatient services to our city.

In December 2015 we were asked by the Health and Adult Social Care Policy and Scrutiny Committee to help make sure everyone had a chance to be heard. We agreed to work with existing groups to collate the messages of those most affected by the closure of Bootham Park Hospital and present them back to the committee.

The aim of this report is to gather the views and experiences of local people following the closure of Bootham Park Hospital. It aims to give voice to those affected by the closure, and the hopes and aspirations of York's people for the future of mental health in our city. It also makes recommendations based on everything people have told us to help shape what comes next for York.

What we did to find out more

We put out a request for members of the public to get in touch with us and share their experiences. We sent a press release to a wide range of media sources, to encourage people to come forward. We also circulated our request to a wide range of voluntary and community groups with an interest in mental health services, through York CVS's forum for organisations working in mental health. Many publicised our call for information through their websites. ix



York Press published our press release and made it one of their A-board items. This enabled us to reach a much wider audience.

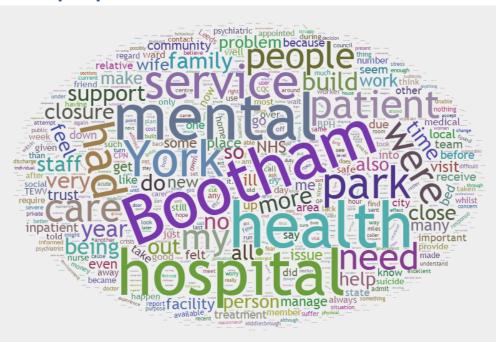


Healthwatch York staff and volunteers also spoke at a number of regular meetings for people living with mental ill health, including the Service User Network.

We also undertook desk research, reading through press cuttings and other online sources for people's experiences.

Every item of feedback has been gathered together to form this report.

What people told us



Created using all feedback, with word size representing number of times it came up. Scale – patient 170, hospital 96, treatment 33, person 28, specialist 9



Key findings from individual's calls, emails, conversations, letters and written feedback;

- York needs a good quality acute mental health hospital (including suggestions for what is needed within the hospital)
- The speed of the closure was a shock and caused anxiety
- Having to travel to Darlington, Middlesbrough and beyond is a further source of stress for patients and relatives
- The impact of the closure of Bootham Park Hospital is part of a much wider capacity and suitability issue for local mental health services
- Most respondents were happy with staff and the quality of care
- Many found the building and gardens therapeutic
- Concern over the apparent lack of co-operation between agencies
- Some sympathy for TEWV who are seen as inheriting a 'mess'



Evidence from the public in more detail

66 people contacted us during our call for evidence. Responses came through via calls, emails, conversations, letters and written feedback. We heard from 19 concerned citizens who contacted us to express worry about what was happening to mental health care in their area, and ten were people in need of mental health services who were unsure who to contact. We heard from 30 people who had experience of Bootham Park Hospital, either as a patient, carer, friend or relative of a patient or an employee who wanted to share their experiences and seven people from York who were currently using other Mental Health services.

York needs a good quality acute mental health hospital

The consensus from responses we received is that York needs a good quality acute mental health hospital close by, whether by modernising Bootham Park Hospital or building a new hospital elsewhere.

"It is time to have a state of the art mental health hospital in the city. It doesn't matter to me where it is. Bootham is a lovely big hospital with lovely grounds. It would be a shame to waste it. But the most important thing is a state of the art hospital, and getting that right as soon as possible. We need to make it clear we believe people with mental ill health have the same right to treatment as those who are physically unwell." Relative of a user of mental health services in York

"'Fit for purpose'? 'Outdated'? But <u>far</u> better than Middlesbrough, or other facilities far away from the support of friends and family!"

"People are aware that Bootham was not the finest of mental health institutions... However, it was in the city and available to all... We need to know how the Trust and the Council intend to provide immediate facilities required for essential health care within the city now."

"The support of family and friends is so important in the recovery of people with mental health problems. It is vital to have a psychiatric hospital in York."

"It is a disgrace that York currently has no appropriate facilities which is leading to great concern." **Local Resident, York**

Further information on what the public told us they would like from a new hospital is on page 16.



The speed of the closure was a shock and caused anxiety

"The closure of Bootham Park Hospital greatly affected my mental health. [..] When it closed suddenly and without warning this rug was pulled under my feet. I became anxious about contacting mental health staff and about revealing the true state of my mental health because of the ever present fear that if I said too much I could be sent to a hospital hours away that I did not know. [..] Because I was so scared of being hospitalised even though I had regular contact with the crisis team, I felt unable to share as my mental health deteriorated rapidly. My self-harm became more and more dangerous. I was being commanded by voices to do things that scared me horribly. [...] This culminated in a serious attempt on my life." Person using mental health services, York

"A friend rang me during the evening, asking if I knew anything about the closure. No! What! I was there the other day, say that again was my initial response, then a few choice expletives. I ended the call, looked online for that evening's Press. Whilst reading the main headlines I felt sick." **Person using mental health services, York**

"The sudden closure of the hospital will have a negative impact on the inpatients. Those assessed as fit enough have been discharged. They have not had enough opportunity to prepare themselves for the change. It will also have affected family carers who have had to arrange care and support needed at very short notice. The patients who were assessed as not being fit to be discharged have been moved to other hospitals out of the York area. They will have to get used to a different hospital and environment, meet a new staff team and develop trust with that team. Family and friends may not be able to visit as regularly, if at all, because of the distance and the cost."

The Press newspaper, letters 3 Oct 15

"The refusal by the CQC not to register BPH, leading to its shock closure with almost no notice was a bombshell which left a black hole where York's mental health services were supposed to be." **Local Resident, York**

"The closure of Bootham has meant any hope of accessing treatment is gone for the foreseeable future." **Person waiting to access mental health services, York**

"The closure of Bootham Park Hospital makes you feel really vulnerable – where would you go if you were taken ill now" Former service user, York



"Once I had calmed down I felt angry and powerless." **Person using mental** health services, York

Having to travel to Darlington, Middlesbrough and beyond is a further source of stress for patients and carers

Five patients and relatives of patients from York who are currently receiving mental health care contacted us to tell us the problems having to travel to services far from home was causing. This included increased stress for patients at the prospect of travelling, extra costs for relatives who want to visit, and the impact that being able to visit less often can have on patient recovery.

"77 miles to visit (Cheadle Royal), and ... not even offered a drink by staff... Feel very cut off and very anxious about ongoing support and care." **Carer for person using mental health services**

"(before the closure of Bootham) the person was taken to Darlington. It was an excellent hospital and they received good treatment, but the travel costs for us as a family were high." **Carer for person using mental health** services

The impact of the closure of Bootham Park Hospital is part of a much wider capacity and suitability issue for local mental health services. A number of respondents expressed concerns about the state of mental health services in the area. Capacity issues and lack of provision in and around York were key concerns. The following account from an ex-employee at Bootham illustrates some of these problems:

"The number of ward closures, and therefore bed availability, had reduced the capacity for admission of patients in acute distress. This meant that they had to be admitted to hospitals many miles away. I have lost count of the number of incidents where the bed manager on duty had to make dozens of phone calls at my request around the country, to try to identify a vacant (gender appropriate) bed; sometimes with no luck whatsoever. Approaches to the private sector (as a last resort the Trust had always insisted) meant that these independent hospitals would cherry pick the patient and on top of that there would be hours of delay whilst they discussed the level of care / observation required in order to ramp up the cost to the NHS of a private bed. Neither form of solution provided a local response. The problems this caused led to



patients having to remain in police custody pending the availability of a bed." Ex-employee at Bootham Park Hospital

"I'm terrified to hear that mental health care in York is being ignored."

"I fear that the "powers that be" will say that there is no money available for investing in a service that is still considered to be a low priority in NHS budgets."

"The mental health service in the city at the time I needed it was widely recognised as being excellent, but because of politically imposed restructuring has, over the decades, become tragically inferior." Former service user, York

"There are so many facilities for people with physical problems, far less so for those with mental health problems."

"York desperately needs Bootham Park. Haven't mental health services been cut enough?"

"Mental health is still a Cinderella service, in spite of what we are being told by the Government and NHS Executives. Would people requiring surgery or cancer treatment have put up with a district hospital if it was in the same condition as BPH?"

"Something is going wrong in York around mental health. Everything is slipping, and falling to the side." **Carer, York**

"I do not like the visiting arrangements at Cherry Tree, and do not believe it is a suitable environment for my mother." **Relative of a user of mental health services, York**

Concern over the apparent lack of co-operation between agencies

Perceptions were expressed of mismanagement and lack of accountability amongst the organisations involved. There was a general lack of confidence from the public in key decision makers locally, and concern about overall accountability within the NHS locally and nationally.

"The bickering that seemed to dominate the discussions within the health service, bickering that carried on at a surreal level whilst patients and service users were in utter crisis with absolutely nowhere to turn, disgusts me."



"We are at the mercy of an NHS system which has been set up in such a way so as to ensure no-one can be held responsible or accountable... The victims are the patients. Their welfare should have been the first consideration. The truth is, they have been given none at all."

"Do not let our Government wriggle out of its responsibility to the health of its citizens."

Most respondents were happy with staff and the quality of care "The nurses at Bootham were amazing."

"It would have been more appropriate for the CQC to have acted to shut down the Trust as being 'unfit for purpose' rather than blame the building and its dedicated staff."

"I have found from my own experience that these teams are staffed by dedicated and professional people who are frustrated that they are unable to deliver the levels of care they would wish to."

Many found the building and gardens therapeutic

The majority of respondents were happy with the building, and some felt that the peaceful surroundings made them feel better. Others though expressed concerns about the "gloomy" old fashioned "lunatic asylum."

"The knowledge that I had a safe place in the event of an emergency helped me to try and remain safe." **Person with experience of mental health services, York**

"I found the buildings heritage and grandeur added to the recovery experience. The park setting is wonderful for quiet strolls, the adjacent YTH* (*York Teaching Hospital – our addition) meant easy access for medical care (after all there's no health without mental health)."

"It felt a very safe place. It was good to have the gardens and grounds to walk in – it helps you get better. Bootham felt very homely – it looked like someone's home with fireplaces, etc."

"Bootham Park is an old building, but the grandeur of the place was something that helped me recover. I would walk down the main corridor and out through the front door and feel at ease. In fact being in the grounds and the wide open space was one of the main reasons I always got better."



"I am happy Bootham Park has closed. It was designed as a lunatic asylum and is not fit for purpose. Modern treatment is not about sitting in a bed in hospital being given drugs."

"Being admitted to Bootham Park at the age of 18 was not a good experience"

There were concerns expressed regarding poor maintenance. One local resident contacted us to tell us that maintenance of the hospital had reduced significantly in the past few years.

"They say it was closed because it was unsafe with plaster coming down. What happened to the hospital maintenance team, the hospital had its own works at one time." **Local resident, York**

"The building is old fashioned but it's ok... It was just an excuse so the building could be sold off." **Local resident, York**

"It seems extraordinary that such a vital resource could be neglected in this way... Even the most naïve are bound to ponder on what vast sums of money could be made by selling off this prime estate in the city centre."

Some sympathy for TEWV who are seen as inheriting a 'mess' "I have to say that I have great sympathy for TEWV as they inherited a chaotic mess."

"Not surprised by the closure of Bootham... entirely unsuitable for patients with mental health problems... Far more concerned about the Trust management and delighted it has changed."

These views are balanced with a repeated desire for local ownership and management of our own mental health services.

"It would also be more helpful to have a Trust that is based in York, as before, rather than the TEWV Trust, which is 50 miles away and has also 'invaded' Harrogate MH services. One could ask why a city such as York has to have its mental health services managed by a Teesside authority!"

It is clear that there is a lack of wider public awareness regarding how the NHS is currently structured. This has added to the confusion around the closure. We have attempted to provide details of key organisations involved with Bootham in Appendix 5, and a potted history of the NHS at Appendix 6.



Feedback on what is needed for the new hospital, wherever located

- a) Large hospital in pleasant grounds
- b) Close to York Teaching Hospital
- c) Warm welcoming reception area including a walk-in clinic; a welcoming reception area, The Retreat in York manage it, theirs feels like a hotel reception as opposed to a cold, clinical doom laden building
- d) more support for people who are suicidal
- e) treatment rooms for every sort of treatment people experiencing mental ill health might need including a unit for postnatal depression and one for addictions
- f) a café area
- g) rest rooms for the staff
- h) Separate male and female wards
- i) Each room should have ensuite facilities and be decorated in neutral, calming colours
- j) Sensory areas are vitally important gardens/small water features/soft lighting/scented planting. Have garden areas that can be worked in for therapeutic purposes. Similarly have areas for artistic talents that can be open to and viewed by the public at agreed and acceptable times so that people gain recognition for what they do and feel important
- k) The wider community need to be encouraged to attend social events to encourage acceptance and understanding as far as possible
- I) A safe area for smoking. It has to be accepted that a lot of people due to stress levels fall into smoking. It cannot be enforced upon people to have nowhere to go when they need to smoke, naturally all support to cease smoking should be on site and every available method should be readily available
- m) Dietary therapy needs to be seriously looked at. Many people have allergies that they may not be aware of and tests need to be run to ascertain if people would benefit from changes to diet along with medication instead of just turning to powerful medication as the only option tying people to a lifetime of dependency
- n) Have on site things which make most of us feel better about ourselves. Hairdresser/chiropodist/alternative therapies/gym equipment etc.
- o) Remember this will be a new hospital <u>not</u> a correctional facility. Whenever I have visit my relative in a hospital setting in 2



- different catchment areas all the units have felt cold and impersonal and neglected. Not places where I have felt relaxed and certainly not where I felt my relative would feel safe or recover well
- p) A separate unit should be created within the hospital for people with substance abuse problems
- q) I think it is crucial that the new hospital has sufficient beds for inpatients. At a meeting late last year, a representative of TEWV said that the number of beds in the new hospital would be the same as at Bootham. This is too few. In opening a new hospital, York has an opportunity to provide care that matches the number of patients that are in need.



Other concerns

Importance of timely information following the closure which needs to be made more widely available especially for those not online Whilst it is hard to find direct quotes regarding this, we received a significant number of calls in the days following the closure. Most of these calls were from people not knowing where they should go for help. We also spoke to a number of people at meetings and our drop-ins at community venues who raised concerns about how they can receive information when they are not online.

A number of people also took this opportunity to raise concerns regarding other mental health services. For example, we received a report from one person using services at the Becklin Centre that this support had been cut.

A record of signposting contacts and other concerns raised can be found in Appendix 3.



Key Messages from local organisations Cloverleaf Advocacy

Cloverleaf Advocacy are providers of statutory Independent Mental Health Advocates (IMHAs) to service users in York and North Yorkshire. Feedback to the Cloverleaf IMHA team from local service users and their families re the closure of Bootham Hospital, 1st October 2015 includes the following:

- Insufficient notice or preparation given to clients, their families/carers and/or IMHAs who were supporting clients. This caused distress, anxiety and lack of understanding for vulnerable clients and their families.
- Inappropriate discharges, which were precipitated, often against the wishes of relatives, as a result of the closure, not as a result of the clients' well-being or recovery.
- Vulnerable clients moved out of area, against their wishes, often many miles away to Middlesbrough and away from the support of family and friends.
- Clients and families had relied on Bootham for mental health support, often over many years and felt that a valuable local resource had suddenly been taken away from them, without any consultation as to their views as service users. Most wished money to be spent on Bootham so that it could be restored and modernised rather than closed.

Ongoing effects of closure to local service users, feedback from individual service users and their families, as reported by Cloverleaf IMHA team:

- Currently no acute mental health unit in York for adults aged 18-65
 years. Proposal for Peppermill Court to become the acute unit but not
 available at the moment, so vulnerable clients are still being
 accommodated out of area. This is causing enormous, additional stress
 to clients and their families/carers and additional expense to already
 overstretched mental health resources.
- Additionally, many families have been extremely unhappy with the enforced closure of Peppermill Court as this has led to upheaval and uncertainty for elderly, vulnerable clients with dementia and/or



challenging behaviours. This has been aggravated even further by the fact that some clients who have been moved from Peppermill Court to Worsley Court in Selby, will apparently now have to endure further upheaval with another move out of Worsley and into Acomb Garth. Some discharges and transfers have not been handled appropriately with relatives reporting that they have not been fully consulted or involved in the process. Discharges appear to have been rushed in an effort to create bed space in order to accommodate the many different moves between units. Some individual clients have been involved in an extremely distressing sequence of moves e.g. Peppermill Court to Worsley Court to Cherry Tree House, in the space of a few weeks. This is not in the best interest of any client and certainly not in the best interest of vulnerable, elderly clients with dementia. Some clients have been wrongly placed in units which do not meet their mental health needs profile. Relatives and clients are confused as to the reasoning behind moves.

 Additionally, our IMHA team have only been able to glean information piecemeal from staff on units and wards, regarding closures and transfers. There has been no regular and consistent update on what exactly is the situation for York clients. Whilst we appreciate this may be a fluid situation, nonetheless there should be regular communication with all mental health services and support providers, regarding the provision for clients in York.

York Mental Health Carers' Group and Rethink – York Group

Our Carers' Group arranged a Conference for carers on the future of local mental health inpatient care soon after Bootham Park Hospital was closed; it was attended by 80 people. A party of our carers has visited Kingfisher Court a state of the art psychiatric hospital in Hertfordshire. Rethink York Group, as well as supporting the Carers' Group, also runs a programme to help and support people recovering from mental illness.

We have the following comments:

1. At a recent carers' meeting attended by 20 people, one carer argued in favour of opening the existing building to inpatients as soon as possible but the rest were strongly in favour of getting a new hospital built.



- 2. Our members suggest that before forming a view on the requirements for inpatient care in the long term, people should visit a modern state-of-the-art hospital to see the facilities which are provided. We suggest that members of the Scrutiny Committee would find such a visit useful. (This happened on 4th March 2016, when the Health and Adult Social Care Policy and Scrutiny Committee visited the TEWV-operated Roseberry Park Hospital in Middlesbrough)
- 3. We note that the number of beds in the new hospital has yet to be decided. We also note that developments in treating mental illness might lead to the need for fewer inpatient beds in the future. Some members have suggested that, in designing the new hospital, thought should be given to how additional beds could be provided should this become necessary at some time in the future. We suggest that the options appraisal should explain how the proposed number of beds for the new hospital has been determined.
- 4. The options appraisal will clearly be a key document in the decision-making process. We imagine that the appraisal will set out the advantages and disadvantages of the various options and other factors that need to be considered; publishing a detailed appraisal will allow an informed discussion to take place during the public consultation. Because of the importance of the appraisal, we suggest that some consultation with interested stakeholders on its scope and methodology (but not of course the content) would be useful before it is completed.
- 5. Bearing in mind the advantages of the Bootham site (e.g. easy access for patients/carers and its proximity to York Hospital etc) our members believe that the options appraisal should examine the possibility of building a new hospital on the Bootham site.
- 6. One of our members is an architect. He has done some detailed work on the possibility of building a new unit on the Bootham site and has consulted many of the interested parties; he is keen to share this work.

The Mental Health Accommodation Panel

We would like to express our concerns at the sudden and unplanned closure of Bootham Park Hospital. Referrals to the Mental Health Housing Panel have been affected because of this and we feel patients who may have had housing needs that were residing in inpatient services at Bootham Park have not had the opportunity to explore their future housing options in a considered



planned way. The housing panel has already had feedback from people living in the community waiting for housing transfers. They feel very unsettled about the future of mental health services in York and we have had anecdotal feedback from service users that the absence of local in-patient provision has had a detrimental effect on their mental health irrespective of whether they needed the service at that time.

There also seems to be pressure to discharge people as soon as possible who have gone to out of area hospital settings back to York with very little planning in place. Whilst we understand the financial pressures caused by out of area placements premature discharge without adequate planning can lead to poor outcomes for the client. One person we know of was given leave to try living at home again and with minimal support, was very unprepared and not able to cope and had to return to hospital.

The closure of the hospital has impacted on other services. People who are feeling displaced are coming into the housing drop in service and to Sycamore House, CYC's mental health day service, seeking reassurance and asking staff to try and locate workers in mental health services for them as there is no hospital any more to enquire at. Whilst the staff at Sycamore House will always try to help signposting customers effectively there has been a lack of communication with regards to which staff are based at which hub.

Staff who worked at Bootham were familiar with the patients they looked after. Professional links between housing and nursing staff have been built up over many years. There was no information or communication as to what happened to the patients or nursing staff when Bootham Park Hospital closed. Did they move to other hospitals or move into the community? The expertise and knowledge of the ward staff who looked after the patients was essential as they make the necessary onward referrals for services in the community when preparing people for discharge.

Now we have been advised the Recovery Unit is closing on 24 March and no information is available as to what is going to happen to the existing residents or staff there. This unit is a stepping stone for some patients who need a longer pathway to housing of their own. A current client who is in the middle of his recovery has been prioritised by the housing panel to move to our supported housing option. There is no current vacancy so if the unit is closing



he will either have to be transferred to another recovery unit out of area or be discharged to homeless services in the meantime. This is not fair on patients or staff and causes considerable anxiety to both parties.

22 The Avenue has worked closely with both the acute wards at BPH and the Recovery Unit to help customers develop and evidence the necessary tenancy skills to allow them to access social housing. With no recovery unit we are not clear where and how these patients will begin the very basic work on independent living skills that is necessary before a placement at 22 The Avenue could be considered.

All in all there appears to be a lack of communication about what the specific plans for individual customers are and we feel that this issue needs to be addressed in order to ensure a smooth, successful outcome for customers.

Tim Carroll, Resettlement Services Manager & Chair of Mental Health Accommodation Panel



Questions for consideration

Raised by the public with Healthwatch York

- For any building project there must be a clear timeline. What is the current timeline for any new build in York? What parts of this work can we get involved with?
- How and why was the hospital allowed to degenerate into such a state that immediate closure was necessary. If it truly was in a dangerous condition, then how was this allowed to happen and why was it continuing in use as a hospital? Surely regular inspections were made?
- What are the reasons the CEO, Martin Barkley gave for his sudden resignation?
- How are the rights of the patients being met with regards to the Mental Health Act, the Mental Capacity Act and the Human Rights Act? Where is the Equality Impact Assessment?
- Can City of York Council, the Vale of York Clinical Commissioning Group and the Leeds and York Partnership NHS Trust and the Tees, Esk and Wear Valleys NHS Foundation Trust release into the public domain all of the documents, including all Board Meeting minutes, relating to this case?
- To what extent are patients being supported at the moment? How are patients being involved in the decision making - these are their services? How are personalised care plans being developed for each and every patient affected by the move - including for those who lack mental capacity?
- How will the Council and the Trust put in place preventative services to support people in the community? What are their plans and where will preventative services be provided?
- What are the plans for this building and its land and how long have those plans been in place? Who would benefit from such a sale?
- What Equality Impact Assessment was completed prior to closure?
 According to Equality Impact Assessments, 'where possible, if any



negative or adverse impacts amount to unlawful discrimination, they must be removed.'

- Has a cost analysis been done? Do we know how much it would cost to get Bootham into a fit state again?
- Has a decision been made to exclude Bootham from the list of potential sites for any new hospital?
- Are there any criteria any new facility must meet?
- New facilities all seem to be single storey. Is this essential, or desirable, in modern facilities? What is the thinking behind this?
- What are the ongoing maintenance costs for Bootham?
- what training and support are in place for staff leaving Bootham to work in the community?
- How have they been supported in the transition e.g. around medicine management, and working in a non-hospital environment?
- Can childcare costs be claimed like travel costs can?



Ways to get involved

Tees Esk and Wear Valleys NHS Foundation Trust

Service User Network

York's Service User Network extends a warm welcome to all service users and carers. Refreshments are available at meetings.

To find out more, contact Heather Simpson, PPI / Engagement Lead for the Vale of York area, on 01904 294605 or email heathersimpson1@nhs.net

Become a member

Members get regular newsletter updates, vote for governors, and can stand as a governor. More information on this is available at;

http://www.tewv.nhs.uk/site/get-involved/members/become-a-member or call the Trust Secretary's department on 01325 552314.

TEWV said: We have regularly published a newsletter / update on services which is circulated to over 180 stakeholders. Our first update was circulated on the 2 October 2015 and we have provided additional updates since then. These are also posted on the TEWV website and sent to local media. We are keen to ensure that this is up to date / and include additional representatives, so any additional stakeholders can be included in these updates.

They are holding 3 public engagement events, titled the Exchange, on 31st March, 6th April and 7th April.



Conclusion

The evidence we collected suggests that closure of Bootham Park Hospital has been immensely stressful for many people involved and that the impact will continue to be felt for the months to come.

However, the evidence we collected also shows that there is a lot of concern and passion for Mental Health provision in York. People across York and the surrounding area have an appetite to be involved in creating a better future for those experiencing mental ill health. This has been ably demonstrated by their willingness to come to meetings, to set up action groups and discussion forums, to get involved in visits, to share their views and experiences with us.

The current changes present us with an opportunity. We must work together as people who use services, as carers, service providers statutory and independent, voluntary and commercial, and commissioners as we decide the next steps for mental health services in York.

It is also important to remember that the service changes, the interim solutions, will bring about fresh change and uncertainty which is deeply unsettling for those most affected. We must continue to support these individuals with their anxiety and distress. We must remember that change is difficult for many people. What next for mental health in York? What we build together. We can and must help deliver the mental health services York deserves together, as equal partners.



Recommendations

Recommendation	Recommended to
Provide interested parties with an e-bulletin (at least	Tees Esk and
monthly) giving brief information about	Wear Valleys NHS
 Current situation 	Trust, working with
 Any changes to service provision 	the support of all
 Notice of any engagement opportunities 	partners involved in
This action has been both explicitly and implicitly raised	the Bootham work
through individual accounts. This should be printable so	
local groups can display this for those not on the	
internet. It should also be displayed at Bootham Park.	
• • •	
Develop a briefing paper explaining the thinking behind	TEWV / VoYCCG
the approach being taken towards determining the	
number of beds required for the new hospital as part of	
the pre-options work. Hold discussions on any	
concerns or questions within engagement events.	
A protocol should be developed in case of any future	Health & Wellbeing
emergency situation in health and care, highlighting	Board member
how local organisations can work together to help	organisations
disseminate essential information. This should include	
identifying mechanisms for including the voluntary and	
community sector and independent providers.	
Hold public engagement events that provide face-to-	TEWV
face opportunities for people to hear what is happening	VoYCCG
Provide details of the expected building timeline and	VoYCCG / TEWV /
linked engagement opportunities	NHS Property
Begin to address the questions for consideration as	TEWV / VoYCCG /
Frequently Asked Questions. This information, once	CYC
collated, could be shared with all relevant bodies to	
improve public access to information	
Enable local people to be confident about the future of	All named parties
the historic building at Bootham by separating out and	
clearly outlining the responsibility of Historic England,	
York Civic Trust, City of York Council, NHS Property	
Services, Vale of York CCG, York Hospital and TEWV	
regarding the ongoing maintenance of the building to	



address concerns over it deteriorating further, regardless of where services are provided.	
Consideration must be given at national level to the ultimate responsibility and accountability for resolving any such complex situations in future, especially given the removal of the overall accountability of the Secretary of State for Health.	Department of Health / Healthwatch England and network partners / CQC / Parliament



Appendices

Appendix 1 – Press Release - closure of Bootham Park Hospital – York Mind Statement

Statement from Alyson Scott, Chief Executive of York Mind:

York Mind were shocked at the speed of the closure of Bootham Park Hospital. Although we are very aware of the shortcomings of the building, we do not believe that giving a hospital only 5 days to close is beneficial for patients and their families, friends and carers.

York Mind are being kept informed by all statutory services of the ongoing developments and we are committed to offering practical support to patients and service users whenever possible.

Any service users, family members or carers with concerns about services at Bootham Park Hospital are asked to contact the Trust's Patient Advice and Liaison Service on 0800 052 5790. Alternatively, please continue to check the website for updated information at www.leedsandyorkpft.nhs.uk

Thursday, October 1 from 4pm to 6pm, at City of York Council's West Offices in the Craven Room York Central MP Rachael Maskell is to host a meeting for worried families. Ms Maskell will listen to worries about the future of mental health provision in York and has pledged to raise any issues with the mental health minister Alistair Burt, and NHS managers in York.



Appendix 2 – Healthwatch York Press Release asking for feedback



Press Release - For immediate release

25.01.16

Have your say about the closure of Bootham Park Hospital and the future of mental health services in York

Healthwatch York has been set up by the government to put you at the heart of health and social care services in York. The Health and Adult Social Care Policy and Scrutiny Committee at City of York Council have asked us to make sure views on the closure of Bootham Park Hospital are heard. This can include people's experiences following the closure, and their hopes and worries about what comes next.

Siân Balsom, Healthwatch York Manager said "Following further conversations with Tees, Esk and Wear Valleys NHS Foundation Trust and a number of local groups, I thought it might be helpful to outline what we are trying to do."

"Healthwatch York does not have a view on what should happen next. We do not wish to form a 'Healthwatch' view, nor duplicate the work of others. What we do want is to help collate local people's thoughts, experiences and concerns and play our part in making sure what matters to people is heard whatever comes next. To do this in a timely manner will be challenging. We also appreciate how busy everyone is. We are asking for your help and good will to really make this work."

Our commitment to you:

- We will add everything we have heard direct from people about this topic into a short report. All comments from individuals will be used anonymously
- We would like the report to include key messages from other local groups. This is any group or collective who are willing to share their key messages with us, in whatever form they choose. These will be added



to the report under the name of the group, and where possible making it clear how the feedback was gathered. If you have anything you would like to include, please send this to us

- We will make suggestions / recommendations solely based on what people have said
- We will raise questions with TEWV to help clarify what is already known, and we will highlight what more people would like to know
- We will also highlight existing ways to get involved in TEWVs work, and engagement opportunities for people who use services

We aim to get a report together in draft very quickly, which we can then take to the Health Scrutiny Committee. We would therefore welcome your comments by 5pm on Friday 12th February.

We hope you feel able to support us in this piece of work. We also welcome any further suggestions on what role we can helpfully play. If you would like to discuss this, please do get in touch as we will need all of your help to do this well!

Please get in touch – you can phone 01904 621133, email healthwatch@yorkcvs.org.uk, tweet us @healthwatchyork or find us on facebook at https://www.facebook.com/healthwatch.york/
For more information about the work of Healthwatch York visit: www.healthwatchyork.co.uk.

ENDS

To arrange an interview, please contact the Healthwatch York team on 01904 621133.

http://www.yorkpress.co.uk/news/14230950.Bootham_Park__Have_your_say/?action=success#comment 15326858

Article as it appeared in the York Press.



Appendix 3 – Full record of comments received

These are individual's comments made to us, and should not be considered to be the views of Healthwatch York.

- Person who was an inpatient in October 2015 feels that the physical problems of the building were exaggerated. 'The building is old fashioned but it's ok'. 'It was just an excuse so that the building could be sold off.'
- Person with bipolar had been admitted to Bootham Park hospital.
 Although very ill, I was able to appreciate the beautiful entrance hall with its stained glass, lovely tiled floor and staircase leading to ward 3. I think it is important to have local mental health services, for patients and their families alike as conditions such as mine need urgent attention. If this can be achieved by preserving the best of this lovely building then it would be an advantage to all.
- Person who experienced depression due to financial problems stayed twice in Bootham, 3 years apart. Initially admitted to Bootham hospital on a voluntary basis for a 10 week stay, accessed anti-depressants, managed to build up some sleep and allocated a social worker. Found the stay beneficial and helped work way back to normal living. Second admission was for a 6 weeks stay with the same process. Currently still seeing the social worker but that is due to end.

Feels strongly that there is a need for residential services and that the provision before Bootham was closed was not sufficient, as a lot of people were being sent to Middlesbrough, Harrogate and other centres in the north. Also a great number of agency staff were being used.

 Person who cares for his wife, who was diagnosed with Alzheimer's nearly 4 years ago. He feels things in York are not as good as they were and that staff are overworked.

Initially there were quite a few visits, regular checks on how things were. A woman from Bootham Park used to come and take his wife out for coffee, which gave him a break. Up until October he was getting fortnightly visits, but the member of staff who visited left or was



promoted and their details were passed to another member of staff. They are now getting visits once a month.

His wife has deteriorated a lot in 3 years, and no longer cooks, talks or showers herself. He has asked to see a psychiatrist to get an up to date understanding of where they are now, and what the longer term prognosis is. This has not been possible. He feels that if it was another condition, like cancer, the medical professionals involved would spell out where they were at and what might come next.

He feels something is going wrong in York around mental health. Everything is slipping, and falling to the side. He also feels that Bootham Park Hospital is in a sense a part of him. His mother worked there, he started as an apprentice builder at 15 years old on the Bootham site. His wife got her diagnosis at Bootham when she was 66, on her birthday. To take his wife there felt fitting. Bootham has been important in his life.

But there is support elsewhere if you look for it, and if you are able and willing to pay for it. He is linked to Dementia Forward, has had great information and advice from Age UK York, and Bootham Park Hospital let him know about Galtres Day Care. Although this costs £50 a day he feels the break he gets when he knows his wife is being looked after is worth it. Because they have some assets, he has to pay for all her care. He now employs a carer, Monday to Friday 9.30am until 4pm, to help him care for his wife. He makes sure she is looked after, kept clean and tidy. He says that "she's looked after me all my life, and it's my turn to care for her." He couldn't cope though without the support he receives, he thinks he'd go crazy if they didn't employ a great carer.

Person waiting for treatment. She feels that the closure of Bootham has
meant any hope of accessing treatment is gone for the foreseeable
future. She was assessed by CMHT over a year ago, with two
psychological reports completed, and has been on the waiting list for
CBT since then, with a diagnosis of anxiety and split personality. She
was seeking help having experienced symptoms for about 8 years,
having finally accepted she had a mental health problem as her



symptoms were exacerbated by pregnancy hormones. She now has a 6 month old. She was told just before Bootham closed that she was very near the top of the waiting list. She is now pregnant again, and experiencing the same difficulties she had with her last pregnancy. She states that CMHT have told her they can do nothing whilst she is pregnant, her doctor says he can do nothing further but think she needs help. She states that her social worker also believes she needs help urgently. Her partner has said he is at the end of his tether and ready to walk away as he cannot cope with her at the moment. She says she's not been signposted to any support whilst she is sitting on the waiting list. Her social worker is apparently as frustrated as she is with the lack of support.

 Person who has friends and family members who have experienced mental ill health. Questions who is responsible for everything that has happened in York?

Building a new mental health hospital is incredibly important for York – we need one. At the moment, for people with mental ill health, there is no place to easily go. Son called mental health services, said he had a drug problem and needed help. They said you need a referral. This city is full of people who are mentally ill, there is nothing in the city to help them. When he went to the doctor for a referral, the doctor just sent him to groups to talk. But he needed actual help. He's since been in hospital three times through taking drugs. If there was something physically wrong you'd take the person straight to hospital. There is no urgency around mental health. For people considering suicide, you should be able to call a place for help, but you have to go round in circles finding help. It is time to have a state of the art mental health hospital in the city. It doesn't matter to me where it is. Bootham is a lovely big hospital with lovely grounds. It would be a shame to waste it. But the most important thing is a state of the art hospital, and getting that right as soon as possible. We need to make it clear we believe people with mental ill health have the same right to treatment as those who are physically unwell.

 Young woman, 17, sectioned recently. No beds in York, so taken to Cheadle Royal in Manchester. Has been an inpatient there for 3 weeks.



Carers stress there are real challenges for communication – they have been given 2 telephone numbers for the hospital but no one answers it. Has been called by the patient, but not frequent contact. 77 miles to visit, and when they did, they were not even offered a drink by staff, met in a cold, sterile environment that felt like a decompression chamber. Feel environment is important as this can help things 'get back to normal'. Have received no support to help the family visit, have had no involvement in planning for discharge. Feel very cut off, and very anxious about ongoing support and care for the individual and the family (other family members also have enduring mental health issues)

• Relative of person who was an inpatient at Bootham Park during 2015 and is still receiving mental health services. Says it feels like a conspiracy to close everything down, services at Bootham Park had already been reduced e.g. the mother and baby unit. It's a very anxious time for us, worrying about where my relative would go if they need to be an inpatient again. The people who made the decision to close it don't have to face the consequences. The reasons given for the closure seem 'quite stupid', nothing that major was wrong. If they can spend £1million on Peppermill Court to make it suitable for inpatients why couldn't they have spent that money on putting Bootham right? The staff at Bootham Park were always wonderful.

When they build the new hospital it needs to be near to York Hospital. My relative really benefitted from the proximity of York Hospital when they were in Bootham Park – it's just a short walk away. The mental health hospital needs to work in harmony with York Hospital – it's much easier if they are close together.

Former inpatient at Bootham Park who is still receiving mental health services. Full of praise for the services at Bootham Park. Stressed the importance of having a quiet, peaceful, calm environment in which to recover with the aid of appropriate care and medication. Bootham Park was a refuge – somewhere like it will be needed even more in the future. Liaison with GPs is very important. My current GP understands mental health issues very well and that really makes a difference. The GP is able to liaise with CPNs about medication. Mental health services



are so important. I'm lucky, I've got a family who can support me. What about people who are vulnerable and don't have anyone?

- Both myself and a member of my family have been inpatients at Bootham Park during the past few years. The closure of Bootham makes you feel really vulnerable – where would you go if you were taken ill now? The nurses at Bootham were amazing. It felt a very safe place. It was good to have the gardens and grounds to walk in – it helps you get better. Bootham felt very homely – it looked like someone's home with fireplaces etc. I was admitted as an inpatient in Scarborough when there were no beds at Bootham. In Scarborough the hospital is more modern and it's a bit too clinical. Most doctors at York Hospital don't understand mental health. They get a psychiatrist to come and see you if you go to A and E but that can take hours.
- Person speaking on behalf of a relative who has had mental health problems for 30 years. They have been a frequent user of Bootham, although they have not been an inpatient for three years, and they has been a frequent visitor and did want to say that the staff were exceptional. The problems at Bootham should have been noticed earlier as it is now a disgrace that York currently has no appropriate facilities which is leading to great concern. It is a difficult situation for older carers who might now have to make long journeys to in-patients sent away from York. There is also no respite care available due to Acomb Garth closing. There are so many facilities for people with physical problems, far less so for those with mental health problems.
- Caller not surprised by the closure of Bootham. Stated that the building
 was entirely unsuitable for patients with mental health problems. Far
 more concerned about the Trust management and is delighted it has
 changed. Has had ongoing challenges to address his complaint since
 2010 when under NHS North Yorkshire and York. During all of this
 experience he feels he has been lied to and ignored. He feels no-one
 listened to him and there has been no apology about what happened to
 his wife.

The caller realises he is unlikely to resolve the situation regarding the past treatment of his wife. What he wants to stress is that the mental



health services in York are "appalling" and there are still "serious issues with local management" of these services. He wants to prevent what has happened to his wife from happening to anyone else. He would also like to see ongoing oversight of the new management again, to prevent these situations.

- Local NHS owns the land that used to house the nurses
 accommodation right next door to Bootham yet maintains that it has it
 earmarked for something else, senior staff car park? If the planners had
 the foresight to install deep enough foundations in the multi-story car
 park so they could go up one/ two levels parking problem solved. It is
 arrogant stupidity to ignore this parcel of land and build elsewhere.
- A relative of an adult who had 4 admissions to mental health care between 2007 and 2014 told us "I am convinced it is essential to retain a large in-patient facility in York. As an in-patient, my relative received excellent care and became well very quickly, but when agitated is totally uncontainable and terribly frightened. In-patient care has ensured that they can be given powerful sedatives, with all the devoted supervision they needs. They have now accepted their diagnosis and take their medication, so may never be ill again. On the two occasions when they had to be sectioned, there was no place available in York so they spent their worst nights in Middlesbrough or Leeds. The care received there was excellent, but visiting was very time-consuming. Family support is often a big factor in recovery from mental ill-health, so it is important to make it as easy as possible. The Middlesbrough and Leeds mental health hospitals are both much more modern than York. Roseberry Park in Middlesbrough has a serene, comforting, optimistic atmosphere, but the Becklin centre in Leeds is very depressing, and feels like being in a submarine. Bootham Park, by contrast, was light and airy, relaxed and calm. "My son feels safe there," confided a friend, at her wits' end when her son was suddenly released to home when Bootham Park closed so suddenly. The original Bootham Park was built by public subscription. Might that be the solution to providing an up-to-date facility? I'm sure Shepherds builders would be delighted to co-ordinate such a project.



Briefly, there will always be patients for whom hospital care is essential. York was short of mental health beds even before Bootham Park was closed, with patients frequently sent out-of-area. Do not let our government wriggle out of its responsibility to the health of its citizens.

- I have been a patient Bootham Park several times before TEWV took over the running of our mental health services. I have also been a patient at Roseberry Park in Middlesbrough. Bootham Park closing meant that when I became unwell and had to be sectioned under the Mental Health Act I was taken miles away from anything I knew my family were torn apart, the care I received was of an appalling level and I was discharged after only 24 hours whilst still suicidal. When I have been in Bootham Park I have never been discharged so quickly and the staff have always listened to my thoughts and views and took every step possible to protect me. Because of Bootham closing the most vulnerable have being put at even more risk than ever. I would rather die than be admitted to Roseberry Park or any out of area hospital. People are going to suffer and cost lives because of the closure. Bootham is nothing like the reports say. I always felt very safe and secure and the ward I was on was always very clean and well kept up with. Whilst I was a patient there was a leak from the above bathroom and the repairs team attended very soon after this was reported. My room was cleaned daily and the staff were always so much help. Our services need to be re-instated asap before it costs dearly.
- Avoid too many organisations getting involved who do not/will not work together for the good of the people requiring care (I believe this contributed to the debacle regarding Bootham Park) the effects of which are still reverberating through everyone. Base provision on all age groups and give equal importance to these categories. Early Intervention works well but there are many people who did not have the benefit of this due to their age and they are largely forgotten almost as if they are an embarrassment. This is simply not good enough and at worst, is inhumane. Some Councils apparently file mental health under miscellaneous (refer to Rethink Campaigns). If York is one of these councils then this policy must be changed immediately. Mental health is a massive issue and must be given parity with physical health if we are ever to make the changes and improvements that are required. It is



reported repeatedly in the press that patients cannot find beds in their local hospitals and are sent many miles from home. This causes added suffering and problems for the patients and their families. My daughter has needed urgent in-patient care in the past and was once accommodated in a private hospital in Harrogate. This surely is an expense the NHS could avoid by having more beds in its own hospital. At a meeting late last year, a representative of TEWV said that the number of beds in the new hospital would be the same as at Bootham. This is too few. In opening a new hospital, York has an opportunity to provide care that matches the number of patients that are in need

Person who was an inpatient and an outpatient at Bootham for a long period in the mid-1980s told us "The manner of the recent closure of Bootham Park Hospital is a disgrace, a national shame on the administrative organisation of the mental health sector in York. The mental health service in the city at the time I needed it was widely recognised as being excellent, but because of politically imposed restructuring has, over the decades, become tragically inferior. One significant reason for the way the building and its facilities and safety deteriorated so badly is that there are far too many different private agencies involved in operating the service, with little meaningful, effective, practical co-operation between any of them. Where several diverse agencies are meant to be contributing there is bound to be constant conflict, disagreement, delay and lack of overall responsibility. That will always happen in this type of scenario. It is wrong and should be changed so that efficient direct action can be implemented whenever required in good time.

Go with the advice of medical professionals first and foremost. A new hospital or facilities suitable for and able to cope with the volume of demand will take considerable time to create.

In the meantime I strongly urge that Bootham Park should be rendered safe structurally for use as (a) fit to receive outpatients; and then (b) fit to house inpatients, including safe quarters for those referred on by police. It might well be that, sadly for such an historic building with an important place in the early history of asylums in England, Bootham Park will not be suitable in future for modern treatment in mental health and new premises will be required. Bootham Park should, however, be



made safe for use on a temporary (i.e. next handful years) basis. If new premises are provided some years ahead, careful thought needs to be given about linking mental health with other aspects of medical care and not divorcing mental health facilities from the rest of the NHS. There needs to be strong medical co-operation between mental health and other facilities. Medical professionals (psychiatrists, psychologists, general doctors, nurses, community workers, etc.) should be the main advisers in what is required, not mostly administrators. Thought needs to be given to what might be required twenty and many more years ahead, not just the near future.

When another very historic and renowned York mental health hospital like The Retreat can continue to flourish and even expand its facilities, Bootham Park Hospital has been let down atrociously... (which is) in my opinion wholly disgraceful. There is an opportunity to make some amends by rendering Bootham Park safe for temporary re-use while new facilities are discussed and planned.

- It seems utterly amazing to me that a city the size of York and in this busy highly populated region should have allowed its services to fall into such a state as to need to be closed down with such immediate effect. This is a terrible indictment on both the civic and health management and leadership. How can the quality of services have become so utterly dysfunctional as for there now to be no, or very little, local service? This is obviously partly the result of mental health being the cinderella of the health service and of funding problems but surely it must also reflect a lack of leadership (which I see as separate from management) since this should have been flagged up publicly....I am not aware that it was but perhaps I missed it. Thus I can only imagine the suffering (probably in silence due to the stigma of mental health) by individuals and their families which has occurred. It will take time to regain confidence. A future mental health service needs to be multifaceted:
 - preventative,
 - easily accessible,
 - local, and
 - primarily community based and focused but with the
 - capacity to cope with breakdown and emergencies.



Community support staff should be able to be flexible and responsive and backed up by effective day services, drop in centres, and respite care; these characteristics seem to me to form the backbone of this. The adult mental health teams made up of social workers, psychiatrists, community psychiatric nurses, psychologists and community support workers need to be based and managed together in order to fully understand and respect their prospective roles.....and should not be so precious about mental health ideology as to continually be seeking ways to disqualify people from their services. There can be an ongoing dogma about what constitutes personality disorder or what constitutes mental illness....meanwhile the person and their family or carers continue to struggle alone. It has been appalling at times to read of police and police cells being used as a substitute for effective caring services and their apparent unwillingness to respond early enough. The role of family members and/or informal carers needs to be part of the consideration....without this their support can break down thus rendering the person with mental illness even more vulnerable and at risk of (perhaps unnecessary) admission. Obviously funding issues are at the core of this and of these in York I know little except that I am sure there are not enough and that the professionals may constantly be 'competing' with other higher profile or more prestigious services. So many good people do work in these services who often get disillusioned because they do not feel valued. Hence, the value base and 'spirit' of the service which in itself is very important needs to be established and protected.....some good people are needed for this who value personal and caring relationships above hierarchal relationships. It feels as though York may well have had some good people who have not felt valued or cared for by the systems they worked in.....as a result it is the people with mental illness and their families who suffer.

 Relative of person who had a severe psychotic episode 6 years ago and was inpatient at Bootham Park Hospital for 9 weeks, and subsequently cared for by the Early Intervention team for 3+ years.
 They told us it was the most traumatic experience of their lives, and the GP did not respond adequately when told him how ill relative was. We



tried to care for him at home for 10 days, as we watched him deteriorate. After 10 days we had an appointment with the community mental health team, who realised immediately how ill S was. They contacted the Intensive Home Treatment Team, and the next day relative was sectioned and admitted to BPH. It was still a very difficult time for all of us, but knowing that he was in a safe place and being properly cared for was a huge relief. Progress was slow, and some days when we visited he turned us away within minutes. This was upsetting, but not a great hassle to us as we only had a half hour journey to BPH. It must be dreadful for families who, at the moment, have a long and expensive journey to visit their relatives in hospital. The support of family and friends is so important in the recovery of people with mental health problems. It is vital to have a psychiatric hospital in York.

BPH should have been closed to in-patients years ago. That was obvious to us when we were visiting. The building was neglected, gloomy and completely unfit for purpose. Patients were not only frightened by their illness but also by the surroundings. Every time our eldest daughter came to visit S she would say "I can't believe they are still using the original Lunatic Asylum for patients in the 21st century."

The old red-brick part of BPH is an interesting building and would make a much better museum than hospital.

I have to say that, in spite of these complaints, most of the nursing staff and all the EIT gave excellent care. I believe that the EIT and family support have played a large part in S's recovery. There were many stresses and strains during those years, and having to travel long distances may have been the final straw.

Mental health is still a Cinderella service, in spite of all that we are being told by the government and NHS executives. Would people requiring surgery or cancer treatment have put up with a district hospital if it was in the same condition as BPH?

York Health Trust, and more recently Leeds Mental health Services have let us down by not being pro-active enough in the replacement of BPH. York should have been a centre of excellence in psychiatric



services, not staggering on for years in 'the old lunatic asylum'. The residents of our city, especially those already suffering mental health problems, deserve better. I hope that TEWV keep the promises made at the meeting on 11th November, and do everything in its power to facilitate the building of a new, well-designed psychiatric hospital within the City of York.

• Inpatient at Bootham Park Hospital for 10 weeks in Autumn 2008 told us they were was not impressed by the facilities - shared bedrooms on Ward 2; no separation between men and women on the high security ward where I spent most of my time. I think when patients are acutely ill they shouldn't be on a mixed ward given their frequently increased and often inappropriate sexual appetite.
I think the new hospital should be a purpose built, well designed group of buildings which have secure and protected outdoor space, where inpatients can spend time outdoors by themselves and not under supervision. I welcome TEWV taking an interest in what locals think

about the plans for Bootham. I hope they are engaging with patients

past and present too.

- As someone who has suffered bouts of severe mental illness for over three decades the closure of Bootham Park last year came as a shock. Although many years separated each bout I always knew that Bootham was there as a safe haven in times of trouble. The closure of Bootham Park appears to be due to too many different bodies having a say in the running of the hospital, everybody losing sight of the real purpose of Bootham Park, which is to care for patients.
- I have nothing but praise for the staff, who always treated me fairly. Bootham Park is an old building, but the grandeur of the place was something that helped me recover. I would walk down the main corridor and out through the front door and feel at ease. In fact being in the grounds and the wide open space was one of the main reasons I always got better. A new shiny replacement could be built, and maybe some patients would prefer that, but that will take time and money. I would suggest putting money into Bootham Park itself, I personally found no fault with the ward or the facilities.



- Bootham Park is vital for the people of York and surrounding area's who are in need of help. I also noticed that the mental health counsellor that I saw at my local GP surgery seems to have been taken away. Chatting with *name removed* at *name removed* Surgery has helped me a lot, to the point now where I am managing to do a bit of volunteering work, doing courses and attending Kyra for more support. All in all I think the mental health services in York have gone downhill and the closure of Bootham Park makes it a whole lot worse. I am hoping Bootham Park is sorted out and reopened and I am also hoping that this government starts putting more money into mental health services or people will suffer.
- Carers for a family member who was first hospitalised for a suicide attempt aged 13 and has made other attempts since, the most recent 6 months ago, now in their mid-thirties, has chronic mental health problems and is an outpatient of Bootham Park hospital contacted us.

The refusal by the CQC not to register BPH, leading to its shock closure with almost no notice, was a bombshell which left a black hole where York's mental health services were supposed to be. That isn't an overstatement. The absence of any kind of Plan B led to the sort of chaos that would have brought shame on a Third World country, never mind a major city in England.

The current providers of these services has since set up a sort of merry-go-round, bumping dementia patients out of their accommodation to make way for acute BHP patients, the dementia patients being dispatched in their turn to Selby where another group of patients then find themselves bumped out and sent off to another facility in York.

One family, reported in today's York Press, is in anguish at the way one of their number is being shipped around the system in this manner. The stupidity and callousness of it is breathtaking.

A few days ago, the chief executive of the NHS trust who are organising all this, went on Radio York to explain himself. During the broadcast he emphasised how much he enjoyed his job and the prospect of the



challenges ahead. That was in the morning. At teatime he said he was packing it in.

Why should we believe any of the senior NHS officials who, with regard to BPH, have mostly distinguished themselves by their skill at buckpassing? I have heard what most of those in charge have had to say at public meetings in the past few months.

What has emerged from this is crystal clear: we are at the mercy of an NHS system which has been set up in such a way so as to ensure noone can be held responsible or accountable for a huge decision such as
the abrupt closure of BPH. That includes the government minister in
charge who I have written to. 'Nothing to do with us pal' was the
essence of the message I received back from his office. And the
victims are the patients. Their welfare should have been the first
consideration. The truth is, they have been given none at all.

We wish to stress the need for urgency in taking action that will ameliorate things for patients. Leisurely timescales really will not do.

The quickest and most effective thing to do would be to re-open BHP, maybe temporarily. The TEWV trust should get together to discuss with CQC to agree on a programme of remedial works. Once completed the CQC could carry out another inspection and if still dissatisfied could insist on further charges until they are happy for a BHP in 'special measures' or something like that that could open its doors for the time being.

I've been told this won't happen because it's not how the CQC operates. But it seems to me that the CQC operates - ultimately - at the behest of the public.

The public must make its voice heard. I can't believe that any clear-thinking member of the public thinks that the CQC is acting in their name in this case. It is inconceivable that had BHP been run and administered locally it could have been closed in such a way, leaving vulnerable people with nowhere to turn to.



• The closure of Bootham Hospital greatly affected my mental Health. Although I had no desire to be in, the knowledge that I had a safe place in the event of an emergency helped me to try and remain safe. I knew the staff, I the wards and I knew that if I had to be hospitalised then I could have visitors. When it closed suddenly and without warning this rug was pulled under my feet. I became anxious about contacting mental health staff and about revealing the true state of mental health because of the ever present fear that if I said too much I could be sent to a hospital hours away that I did not know. I struggle with going to new places even when in a normal mental state. In a crisis I was paralysed with fear.

Because I was so scared of being hospitalised, even though I had regular contact with the crisis team, I felt unable to share as my mental health deteriorated rapidly. My self harm became more and more dangerous. I was being commanded by voices to do things that scared me horribly. My physical health became a problem as I stopped eating and sleeping. Within a month I was at the point of suicide, spending hours everyday planning how I would achieve it. This culminated in a serious attempt at my life. It was only through luck and the timely intervention of a friend that I did not succeed. Even at that point as the intensive home treatment team intervened I still felt unable to tell them just how low, drained and sick of life I had become. The voices that I struggle daily with were constantly trying to make me harm myself and others. I felt powerless and alone. The fear of ending up in prison cell haunted me, the fear of the unknown was even worse. Staff would ask if I had suicidal intent and I would trot out the line that although I had suicidal thoughts I had no intention of acting on them. This was a complete lie. I took an overdose two weeks later. But paralysed by fear again I did not ring an ambulance or tell the staff I was dealing with. I don't really know how to end this. I certainly don't want people to think this is a criticism of staff, they were all magnificent. I understood even when I was in Bootham that it needed work. If a proper and safe replacement is built then I see that as a good thing. But the nature of the closure, the lack of warning, the lack of preparation in advance by whoever was supposed to make the building safe all contributed greatly



to the situation I found myself in. The bickering that seemed to dominate the discussions within the health service, bickering that carried on at a surreal level whilst patients and service users were in utter crisis with absolutely nowhere to turn, disgusts me. I guess that's it. I'm not really sure that if I was in the same place again that I would do anything different whilst the situation remains as it is.

 Where were you when you heard about the closure, what you were doing/who you were with/what the general reaction was. What your kneejerk reaction was and what it means for you. How you felt about it a few days later when it had sunk in/what the reaction of people you know was, when the full consequences became clear xx

I became aware that Bootham Park Hospital had closed, when a friend rang me during the evening, asking if I knew anything about the closure. No! What! I was there the other day, say that again was my initial response, then a few choice expletives, I ended the call, looked on line for that evenings Press. Whilst reading the main headlines I felt sick, and started thinking about the patients, what must be going through their minds? How were they informed? Were they informed? If very ill were they sedated during the move? Making them even more disorientated.

I did not sleep well that night and throughout the next day became more and more anxious. Around lunchtime I opened an email from Heather Simpson (PPI Lead, York and Selby, TEWV) explaining that Bootham Park had been closed, where patients had been moved to etc.

As the day wore on I became very upset, not so much about the closure. More around what will I do now, as a service user and volunteer, I had a purpose in life, a role and responsibility, built up lost confidence, and without warning I had that taken away. The busier I am the more I can stay focused. Then I started feeling guilty, as there were acutely ill patients, sent miles out of area and there I was feeling sorry for myself. I eventually became confused, very low in my mood and found myself making an emergency appointment with my GP. I did try to ring my CPN only to find the phones had been switched off. GP prescribed me Lorazepam.



Once I had calmed down I felt angry and powerless. One week later I had not officially been told anything regarding Bootham by either of my care coordinators. I think it was about three weeks before my CPN visited and informed me.

I did attend a public meeting arranged by MP Rachel Maskell. I came away from that outraged, after learning that all associated NHS staff had been told that they could not attend, inspired that people were willing to support a local inquiry, as to the closure of Bootham.

- Befriender has been to visit an individual in Cherry Tree Lodge. Very concerned by what they found there. Individual, possibly due to treatment, appeared to be sedated, was slumped sideways in their wheelchair, and seemed "really out of it", unable to recognise or respond to their friend, or stay awake. Visitors are not allowed in the bedrooms there, or in the lounge, making friendships more challenging to maintain. Patients are brought to small, bare waiting rooms so there is nothing to stimulate conversation or make it feel like an ordinary home visit to a friend. Took about 5 minutes, along with another couple, to gain entrance, as the bell was broken and no staff members who saw them waiting opened the door. All doors and windows have notices explaining what visitors cannot do, which does not make for a warm, welcoming environment.
- Has been waiting for a referral to the memory service. Got a call from someone inviting him to a short notice appointment due to a cancellation. Couldn't make it, tried to call to get hold of someone to find out where and when should be coming in. *Name of doctor* also seems to be peripatetic at the moment. Not very helpful if you are already struggling with your short term memory. Asked for email to confirm appointment, seemed reluctant but eventually agreed.
- Son has cerebral palsy and epilepsy and a behavioural problem. His
 family are trying to get support. Does not have learning difficulties.
 Mental health services will not have him as they say he has a mental
 problem not a mental illness. He is having attacks, where his lips turn
 blue, he seems to be in a disassociated state, and he gets very volatile.



He can be violent with people but does not seem aware of this. There is no definite diagnosis. He is being given anti-psychotic medication as a sedative. It works fine for a few weeks but then the dose needs increasing, and again, until it stops working altogether. He has been on the same medication since he was 3 years old. He does not appear to be under anyone's ongoing care. He has not been seen at the epilepsy clinic in 10 years. He sees his GP, but is awaiting referrals which services refuse. His social worker left, and they now have contact with duty social workers, but no ongoing relationship established which is unhelpful. He had a care assessment and got 15 hours of support from St Anne's. But they are not trained to deal with his attacks of difficult behaviour, or to communicate effectively with him. When he kicks off, they leave. In reality this means he is receiving only 5 hours of care. His family feel he has been abandoned because he does not tick the right boxes for services. His mother has health issues herself and does not feel able to deal with these whilst worried about his care. They have been offered personal budgets, but are worried about taking on the responsibility of employing support. They believe there are neurological issues, but the consultant formerly at Bootham won't do anything about it, and he can't get a referral into neurology at the hospital. Suggested working with York Advocacy to see if can access appropriate care. Family agreed had been in touch before so would pick this up.

- Mental health inpatient care being provided at Middlesbrough following closure of Bootham. Family member raised concern about the impact on them. Stated that while travel costs are being reimbursed some families are struggling to visit due to childcare and other caring duties there is no help with this. Also what training and support is in place for staff leaving Bootham to work in the community? How have they been supported in the transition e.g. around medicine management, and working in a non-hospital environment?
- Concern regarding the closure of Bootham & care in the home which is not always as good or as available as it should be. Also, due to a number of illnesses, very upset about the battle to get PIPS, etc.
- My mother is currently at Cherry Tree House, having previously spent time in Bootham. I do not like the visiting arrangements at Cherry Tree, and do not believe it is a suitable environment for my mother. The



length of time she spent waiting for a care package has made her institutionalised hindering her ability to recover and cope alone at home.

- I am happy Bootham Park Hospital has closed. It was designed as a lunatic asylum and is not fit for purpose. Modern treatment is not about sitting in a bed in hospital being given drugs.
- My voice echoes those of <u>very</u> many others I know. It is totally reprehensible to <u>close</u> one, and the only, facility for a particular service, and a special group of needy people, before an alternative is available. I'm led to fear that a similar move might happen for the residents of the Graves home for frail elderly people, near me and I fear for their welfare.

"Fit for purpose"? "Outdated"? But <u>far</u> better than Middlesbrough, or other facilities far away from the support of friends and family! My visits, of late, have mainly been to friends in Ward 6 ("Elderly Assessment" previously) who were suddenly moved to Cherry Tree House. Yes, their rooms in Bootham Park were not "en suite", but the ward was spacious, clean, with a variety of "sitting places" and community rooms, and excellent staff! <u>No complaints!</u>

Is York suffering from the "remote control" of its mental health services? Why were they transferred first to Leeds then to TEWV? Can we take back into <u>local</u> ownership and management our own services? I hope this will be carefully considered after the failure of "outsourcing" and the need for a new site and building urgently!

I have worked in an administrative role at Bootham Park Hospital for 9
years and also have recent experience of local mental health services
from a service user viewpoint.

I have to say that I have great sympathy for TEWV as they inherited a chaotic mess created by LYPFT. This was done without any thought for the consequences for vulnerable people. Many service users felt a great sense of loss when BPH closed without warning and services were scattered around York. The closure of the wards has also caused untold misery for service users who were admitted to out of area beds often several miles away. Some service users were discharged into the



community with an "enhanced package of care" which has put an unsustainable burden on the Crisis Team and the Community Mental Health Teams.

I have found from my own experience that these teams are staffed by dedicated and professional people who are frustrated that they are unable to deliver the level of care they would wish to because of excessive caseloads and therefore significant time constraints. My own Community Psychiatric Nurse has given me wonderful support during my own illness. She is firm but fair and I have always felt at ease discussing difficult personal issues with her. The whole team has shown incredible sensitivity towards me as a member of staff and have taken every precaution to ensure my privacy is respected.

I hope that TEWV is successful in their efforts to run an inpatient unit at Peppermill Court and reopen BPH for outpatient services. I have to admit that I am rather cynical about plans for a new purpose built hospital. I fear that the "powers that be" will say that there is no money available for investing in a service that is still considered to be a low priority in NHS budgets.

• Just to give a perspective with regard to the hospital and my connection with it, I will briefly outline it.

I trained as a psychiatric nurse (RMN) at Naburn and Bootham Park Hospital from 1960 to 1963, going on to qualify (SRN) at the County Hospital in York in 1965. I was appointed a Charge Nurse at the latter covering night duty A&E and operating theatres. During this period I saw many patients with acute mental health needs. In 1972 I went into social work being a Mental Welfare Officer (MWO, later AMHP) from that year. I qualified in social work in 1978. At that time, all out of hours emergency social work in mental health was handled by daytime staff on call in addition to their day time duties. In 1987, North Yorkshire County Council set up an out of hours emergency team (EDT) and I was appointed Team Manager, though remaining a practitioner as part of my duties, until retiring finally in 2013.



The EDT, which was a generic team covering all aspects of social care – children and older people as well as mental health, covered the whole of North Yorkshire and the City of York and therefore a very wide perspective of the mental health services across N Yorks, West Yorks and East Riding areas where liaison was necessary due to the catchment areas of NHS Trusts overlapping county council areas, was a constant factor for my team operationally.

With regard to the present matter of the closure of BPH, I have to say I was staggered by the decision of the Leeds York Mental Health NHS Trust to arbitrarily close it. (Our note – Bootham was not closed by LYPFT) For a number of years I had been aware of the lack of maintenance; evident as one walked in the grounds. Examples, such as the poor quality of the beautiful wooden doors, due to lack of varnish etc., and window frames that were badly in need of a coat of paint; to the point where the wood was visibly rotting underneath. This was totally counter to the care and maintenance that took place under previous (local) management trusts and their predecessors over all the years I was involved.

The number of ward closures, and therefore bed availability, had reduced the capacity for admission of patients in acute distress. This meant that they had to be admitted to hospitals many miles away. I have lost count of the number of incidents where the bed manager on duty had to make dozens of phone calls at my request around the country, to try to identify a vacant (gender appropriate) bed; sometimes with no luck whatsoever. Approaches to the private sector (as a last resort the Trust had always insisted) meant that these independent hospitals would cherry-pick the patient and on top of that there would be hours of delay whilst they discussed the level of care/observation required in order to ramp up the cost to the NHS of a private bed. Neither form of solution provided a local response. The only exception to this was the Retreat Hospital in York, which was excellent, but regretfully couldn't always help in such circumstances.

The problems this caused led to patients having to remain in police custody pending the availability of a bed. It would have been better if



the Trust had allowed a patient to be taken to a ward if only to have a more comfortable environment with trained staff present whilst the bed was identified.

Even more concerning was the recent trial of a senior employee of the LYMH NHS Trust who was found guilty of embezzling over £3 million pounds worth of funding earmarked for maintenance work at BPH. He fraudulently pocketed the money by falsifying accounts showing the work was carried out. This took place over 7 years, but no one seems to have had any overview of the process! (Comment from LYPFT – there is no correlation between the fraud case and the closure of BPH. The fraud against the Trust was committed over a 5 year timeframe (2008-2012. It linked to the misuse of staff training budgets specifically allocated for this purpose. It was not at all related to maintenance resources for York premises.)

There has been no comment from the LYMH Trust that appeared to link the two issues where it seems clear that the latter was the cause of the former. It would also seem that the abrupt closure of BPH by the CQC, (with no prior consultation with patients or their relatives to seek their wishes) was seized upon by LYMH as an opportune moment to cover up its total lack of due diligence or 'bury bad news'.

Rather than closing BPH, it would have been more appropriate for the CQC to have acted to shut down the Trust as being 'unfit for purpose' rather than blame the building and its dedicated staff for something that was outside its control but that the latter had raised with the former in the past. I raised the chronic bed shortage issues on many occasions and expressed my team's concerns at the lack of facilities to provide a local service, as had been the norm for many years.

Bootham Park Hospital is a beautiful building that has been highly respected by its patients over the years. I know; I have met many of them. The CQC comment that picture hooks were potential ligature points where patients could hang themselves doesn't hold much weight (pardon the pun) when the extensive grounds are well endowed with mature trees that ought to have been considered as ligature points if



the same criteria were used: it is also interesting that the nearby Scarborough railway line was never mentioned as a point of self harm. In the 50+ years of my involvement, I don't remember an occasion when a patient tried to climb the fence separating the hospital from the main line. The other CQC comments regarding the ceiling fragments dropping down etc., would have also occurred because of the lack of maintenance. Quite possibly, the issue with hot water at some taps was also linked to poor maintenance.

Bootham Park Hospital should be reinstated in full catering for in and out-patients as before. From all the comments that have been made by current and former staff and patients, it is interesting that none have supported the Trust decision.

It would also be more helpful to have a Trust that is based in York, as before, rather than the TEWV Trust, which is 50 miles away and has also 'invaded' Harrogate MH services. One could ask why a city such as York has to have its mental health services managed by a Teesside authority!

- I find it insane (irony?) that in a city like York, the last mental health facility is to have been closed off. There is zero confidence in City of York Council and this is frankly another in a long line of terrible decisions. This needs to be kept open, and a significant improvement made in facilities for mental health in York
- Bootham Park being closed due to condition of building. York desperately needs Bootham Park. Haven't mental health services been cut enough? These cut backs are wrong. It's not fair. The NHS cannot lose another hospital in York.
- It has been the policy of the government to steadily cut down the Psychiatric Service for acute and chronically ill psychiatric patients in our midst? We in 1990 knew that 250 inpatients were adequately looked after by 6 consultant psychiatrists and a full complement of Mental Nurses. There was a famous Neuropsychiatric and Epilepsy centre with inpatient care which no longer exists. There is no facility for



acute admission of psychiatric patients in York and patients are shunted hundreds of miles away from there home. In my opinion, proper repairs of the present Bootham Park Hospital will be cheaper than building a brand new hospital. For a reliable inpatient psychiatric patients a full complement of Mental Health Nurses are required and not large numbers of Care Assistants. The NHS England will demand Efficiency Saving and penalty for not curing certain types of psychosis in fixed time. I worked over 40 odd years in NHS and feel sorry for what has happened to NHS. Public assets have been sold off by the government and private finances making profit for investors.

• I am a relative of an adult with lifelong mental health issues. We have mostly had good help from CPNs, doctors and nurses. A difficult situation arose when the person I care for had been well for some time and therefore 'signed off' from their CPN. They had to get back into the system via their GP. It was months before an appointment with a psychiatrist was offered. A crisis developed and they had to be sectioned the night before the psychiatrist appointment. This was last year, before the closure of Bootham Park. The person was taken to York Hospital initially. No beds were available at Bootham Park and so the person was taken to Darlington. It was an excellent hospital and they received good treatment, but the travel costs for us as a family were high.

I worry what people without a supportive family do. When they came out of hospital and were unable to work, a benefits error resulted in them having no money at all until the issue was resolved. Fortunately our family was able to help. People without family support need someone to be an advocate on issues like this.

There is also an issue when young people turn 18. My relative had been at Limetrees and got on well. After 18 they wanted to go back and see friends there, but were not able to. Being admitted to Bootham Park at the age of 18 was not a good experience.

 Local NHS owns the land that used to house the nurses accommodation right next to Bootham yet maintains it has it earmarked



for something else, senior staff car park? IF the planners had the foresight to install deep enough foundations in the multi storey car park so they could go up one/ two levels parking problem solved. It is arrogant stupidity to ignore this parcel of land and build elsewhere.

Comment relating to above: Regarding the multi storey car park, the first set of plans were rejected because: 'Monolithic' design out of character with area, says council. Plans to ease long-running parking pressures at York Hospital are set to be rejected.

However, York Council planners are recommended the scheme is rejected because the "monolithic" building would harm its setting on Wiggington Road, one of the main routes into York city centre. Read more: http://www.yorkshirepost.co.uk/news/hospital-car-park-plans-rejected-1-2392790#ixzz3ySIEGvYH

- They say it was closed because it was unsafe with plaster coming down. What happened to the hospital maintenance team, the hospital had its own works at one time. The building needs keeping even if it means building onto the old building. It's a place of safety for so many who use it, It's quite central with good access to the hospital / Get people to check out the building for safety the reopen it. So many mental health places have, or are, earmarked to close.
- Don't worry about the patients, never mind. Some of us weren't even consulted or told until Christmas time! Well actually don't think they give a toss about mental health here in York for the next few years. The quicker the new hospital is built the better, quite happy for it to be turned into flats, sold and reinvested into modern services and pay off all that debt. Oh and they tried to close it in 1870s as a lunatic asylum, still we have some 17th century building. Are we a) trying to save a building or b) trying to have a mental health service? At present we have neither.
- It seems extraordinary that such a vital resource could be neglected in this way. However, from reports in the papers, it would seem that, although run down, none of the problems cited for its instant closure were of such a magnitude that a firm of builders couldn't have sorted



out these issues within a few weeks. Both the Vale of York Clinical Commissioning Group and the Leeds and York Partnership NHS Trust have many important questions to answer over the state of this building and its closure. We are very aware that Bootham Park is a fine, Georgian building, set in its own extensive park land. Even the most naive are bound to ponder on what vast sums of money could be made by selling off this prime estate in the city centre.

The CEO of the hospital was on local radio one lunch time expanding on how much he loved his job and was looking forward to the challenges ahead for him in York. By that afternoon, he had resigned. Either he was being extremely economical with the truth during that interview, or he became aware that he would find himself in a very difficult position if he stayed in the post. It all seems very odd and obviously raises the suspicion, whether unfounded or not, that something most irregular has been going on.

Moving patients to other hospitals (e.g. Middlesbrough) is bound to have a serious impact on recovery, as well as being deeply upsetting, and highly inconvenient, to patients and their families and friends. Is York just moving into crisis management? This will inevitably cost far more in the long run. The cost to the patients will be even greater; many individuals and families will be severely traumatised by the lack of care and support on offer in York.

We have been lucky enough never to have needed help from Bootham Hospital, but we have many close friends who have. They are understandably in a very anxious state over the closure of Bootham and the stress of the situation will, of course, impact on their health. If it were cancer patients who suddenly had their only hospital closed down then everyone would jump up and down in outraged protest on their behalf. The inequality of treatment for people with mental health issues in the 21st century is disgraceful.

We require an assurance that the services of Independent Mental Health Advocates and Independent Mental Capacity Advocates are being proactively promoted to patients to ensure that they a) understand what is happening and b) ensure that their voices are heard



and listened to by the Trust and Council. The rights of the patients seem to have been totally ignored.

People are aware that Bootham was not the finest of Mental Health institutions. The standard of care was not of the best. However, it was in the city and available to all. It played a vital role in the health, safety and well-being of many seriously ill people and gave support to them and their families in times of absolute crisis. Its sudden closure was one of the most cruel and disgraceful acts imaginable. We wish to know whether Bootham will be reopened, or when and where a decent new hospital will be built. But more vitally, we need to know how the Trust and the Council intend to provide immediate facilities required for essential health care *within* the city *now*.

- It might pay to spend on Bootham now rather than wait for a new hospital. But hospital should be the last resort, it should only be for when you need it. I worry about the pressure on staff to get people out into the community because there are insufficient inpatient beds. I also worry about waiting lists for therapy and other services to stop people needing hospital. We need to drive these down. There are not enough hospital places, community beds, mental health nurses, counselling. We're just displacing people. I would welcome more information on the clinical decision making around who can be supported in the community.
- Staff were compassionate, caring & skilled Prior to the merger with Leeds, I found BPH staff were in my experience highly skilled, compassionate, caring. The ward I was on (Ward2) had an ethos of the 3R's. For its age the building was well maintained, it needed repairs just like any other and I found the buildings heritage and grandeur added to the recovery experience. The park setting is wonderful for quiet strolls, the adjacent YTH meant easy access for medical care (after all there's no health without mental health). BPH ran efficiently with the clinicians being O/P & I/P. However big corporate mergers have ruined services, there is now a culture of bullying within the service created by Leeds and it has not only ruined the quality of services but it drove highly skilled staff from what was once a service of excellence.

Answers need to be given by LYPFT & VoYCCG why they left remedial



repairs undone when VoYCCG had £5M sat in a pot for over a year. BPH has stood the test of 2 world wars, it has seen countless restructures throughout the evolution of modern mental health services. That building should be retained for mental health purposes in accordance with the English Heritage covenant. It is not hard to upgrade that wonderful building. What seems much harder is getting the health provider and funder to acknowledge where things went wrong so they can address how the provision of services needs to change in order that they are fit for purpose. Let's stop blaming the bricks and mortar and actually acknowledge the horrid pervasive culture within services that affects staff and service users alike!

 Bootham should be renovated and be made more homely for people with depression.

Other mental health issues not directly related to Bootham

- Woman discharged with insufficient medication, and not what had been agreed. CPN trying to sort packs of medication on the floor and had misplaced some which added to the mix up. CPN was trying to make arrangements for more to arrive before the woman would run out the following week. Woman picked up on this and became very emotional. Friend had to calm her down and assure her it wasn't her fault and would be sorted out.
- I'm terrified to hear that mental health care in York is being ignored. My mother was severely bi-polar and unfortunately I am following suit. Hopefully without sounding like a bolshy teen "I didn't ask for this" etc.... After a suicide attempt last week, I was given a telephone number and nothing more, I'm sick and tired of being, as my ex describes me (and used to describe my mum when she was alive) as a "crazy". My GP will not take it seriously, because I have too much insight into bi-polar disorder. Having lived with my mum, yes I do have insight. There is a just a mental door slamming in your face now, when asking for help.
- Issues following discharge from mental health setting that cheque book had run out and there was a two week wait for a new one to be issued. Meant she was unable to pay for shopping. Suggestion that issues like



this are not health priorities but need to be identified to prevent any care issues being created.

- Daughter of individual, a long-stay patient at Bootham. When patients
 had visits with counsellors it was a requirement that a hospital staff
 member was present. As the daughter was allegedly suffering abuse,
 she was unable to talk freely with the staff member there.
- Healthwatch you still have not reported to the Press over the Leeds
 Teaching Hospitals CCG cuts have you? Considering that some of
 those patients will have cancer and complex needs their services have
 been cut.
- As a service user who has used Liaison Psychiatry Service from the Becklin Centre in Leeds for 4 years, my services were suddenly cut just before Christmas. My psychiatrist whom I have a good patient relationship with has told me to appeal the decision of which is going through. I have 22q11.2 deletion syndrome/DiGeorge syndrome and he also treats me for long qt syndrome and adverse reactions for drugs. The letter came as somewhat of a shock to me as I had come to the conclusion and accepted the position in relation to DiGeorge syndrome and psychiatric illnesses. Even if Bootham Park Hospital was re-opened that I would be the last place I would ever wish to go to horrific would be the right word! The Becklin Centre is a modern, 21st century psychiatric facility. It is not just Bootham Park Hospital that has been affected by the closure it is the patients who have services out of Leeds Teaching Hospitals. All these services out of Leeds and York Partnership Trust have gone.

http://www.leedsandyorkpft.nhs.uk/our_services/Specialist-LD-Care/liaisonpsychiatry. Nor was I given a care plan or follow-up appointment, just cut. As I understand it from my doctor it is all four North Yorkshire CCGs that have cut this service for all patients. What happened to patient choice and also follow-up and patient care? The situation led me to call the crisis team before Christmas.

 Woman discharged mid-November. Glasses were lost whilst receiving treatment. Constantly asking when she might receive some more as it was limiting what she could do for herself. Social worker and CPN both



not happy that nothing was done prior to discharge. CPN trying to arrange a home visit from an optician. There were several things that came through the post she needed to know about, e.g. medical appointments, but was unable to read.

Signposting Enquiries

- Woman came to Priory Street for a copy of the mental health guide. Her grandson is exhibiting difficult behaviour, and is taking drugs. Family have thrown him out, and he is currently living with his other grandparents, who are in their 80s and struggling to deal with the situation. She hopes the family will find some answers in our guide. Highlighted sections on support for people with substance misuse issues and for carers of people with substance misuse issues.
- Concern reported to community champion that service users and carers are not sure where mental health community services are since closure, or who to contact in a crisis
- One person called needing information about what to do following Bootham's closure. Provided details of the TEWV helpline.
- Comment from individual not currently receiving any mental health services but has relapsed previously. Worried that they do not know where anything is in York any more, or what they should do if they experience a crisis.
- Person called needing more information about where to go in York.
 Provided TEWV helpline number and copy of MH guide
- MH service patient with outpatient appointment did not know where to go for the appointment. Provided TEWV helpline number
- Person requested phone number for Sycamore House
- A person contacted us as had heard about the closure of Bootham.
 Wanted information about who to contact. Provided details of TEWV helpline and website, VOYCCG contact details and York MP contact details



Appendix 4 – Comments from local press stories, links to news stories on Bootham and petitions against its closure

"During eight years contact with Bootham Park, I found the atmosphere always serene and optimistic. The mental health care we have received was second to none. We must fight to retain it."

The Press letters 29/09/16

Nurse speaking in The Press 30/09/15

"They wasted so much money and lost so many good staff. Staff are devastated. It is a hospital but it was at the heart of the community. Patients came back to us, it's reassuring to them, they look to us for guidance. It was a beautiful hospital and if they had done the essential works that needed to be done and spent the money in the hospital instead of shutting wards in favour of private beds this would never have happened."

"The mother of a patient due to be immediately discharged from Bootham Hospital said she is concerned her son isn't recovered sufficiently. She said he felt comfortable at Bootham Park Hospital, and feels strongly that the facility should stay open for his sake and for many other patients in York. "Part of my son wants to be out and in his own home but he isn't really ready for it," she said "It's rushing things and that's not good. It's very concerning. I feel for all the patients."

The Press 30/9/15 p.15

"The closure of Bootham Park Hospital is not a major surprise. Anyone who has been a patient or a visitor has known for a long time that it was not suitable for modern day care. However the speed of this closure is shocking. These are people who are very vulnerable and how cruel to put them through this ordeal. There is a human cost here and whoever allowed this to happen should hang their heads in shame."

The Press letters 30/09/15

"Even now we aren't getting details. I don't know if I'm getting a psychologist or a psychiatrist anymore. The patients like myself and others just don't know what's going to happen." Quote from The Press 1/10/15f



"The sudden closure of the hospital will have a negative impact on the inpatients. Those assessed as fit enough have been discharged. They have not had enough opportunity to prepare themselves for the change. It will also have affected family and carers who have had to arrange care and support needed at very short notice. The patients who were assessed as not being fit to be discharged have been moved to other hospitals out of the York area. They will have to get used to a different hospital and environment, meet a new staff team and develop trust with that team. Family and friends may not be able to visit as regularly, if at all, because of the distance and the cost. Someone assessed as needing inpatient care could struggle with these changes and they could have a negative impact on their illness."

The Press letters 3/10/15

"I was very disappointed that Bootham Park Hospital had to close. I have visited people in Bootham and it was clean and the staff were very good. A lot of the patients sat outside in the sunshine and talked to us. It's such a shame. Some of them called it their home."

The Press letters 8/10/15

"I was admitted to Bootham and spent a month in their care. It was somewhere that I was safe, unable to harm myself and where I had trained professionals to talk to, who helped me recover." She said because she was at a local hospital, her friends were able to visit and give support, and her parents could visit and regularly bring her children, whom she was missing terribly. "I have no doubt whatsoever that if wasn't for the wonderful care I received at Bootham. I wouldn't still be here today. My children would have lost their mother. I know I would have been terrified at the idea of going so far from York."

Article in The Press 14/10/15

"What I would like to know is where do these people now go when they are at their lowest for health and support? Do they check in at York Hospital, causing more pressure on an already overloaded struggling accident and emergency department? My fear is that they have nowhere to go and have no choice but to walk the streets of York in a desperate state, putting not only themselves at risk but others too."

The Press letters 29/01/16



News stories

About the inspection and decision to close the hospital

http://www.bbc.co.uk/news/uk-england-york-north-yorkshire-34363232

http://www.yorkpress.co.uk/news/13785542.Bootham Park Hospital to shut after_damning_inspection_and_ceiling_collapse/)/

http://www.theguardian.com/society/2015/oct/01/bootham-park-hospitalsudden-closure-leaves-patients-vulnerable

http://www.yorkmix.com/news/arrested-sectioned-and-sent-50-miles-from-home-one-womans-nightmare-after-bootham-hospital-was-closed/

http://www.yorkshirepost.co.uk/news/opinion/michael-hickling-a-family-s-torment-over-closure-of-bootham-park-hospital-1-7496385

Questions over the future of the building and levels of investment to bring it up to standard

http://www.yorkpress.co.uk/features/readersletters/14155674.LETTERS__Whywon_t_we_spend_a_few_quid_to_make_Bootham_Park_Hospital___fit_for_purpose___/

Campaigns to keep the hospital open including the request for a judicial review of the decision

http://www.yorkpress.co.uk/news/14164022.Councillors_urged_to_back_Bootham_Park_Hospital_reopening_campaign/

http://www.yorkpress.co.uk/news/14173048.Campaign_to_reopen_Bootham_ Park_Hospital_boosted_by_supermarket_petition/?ref=twtrec

http://m.yorkpress.co.uk/news/14189272.Bootham_Park_Hospital_closure_taken to the High Court/

Temporary work to provide in-patient facilities in York at Peppermill Court, and impact on other services

http://www.yorkpress.co.uk/news/14144748.Temporary_hospital_to_open_in_ York_in_the_summer/

http://www.yorkpress.co.uk/news/14156786.York man 73 forced to leav e his lifeline amid NHS crisis/



http://www.yorkpress.co.uk/news/14243134.Vulnerable_York_man_who_was moved when Bootham Park closed is moved again to a unit 50 mil es_away/

http://www.yorkpress.co.uk/news/14168270.Counselling_service_inundated_after_Bootham_Park_closure/

Wider concerns about mental health services in York

http://www.yorkpress.co.uk/news/14194523.Three_jailed_for_ripping_off_NHS_to_tune_of___3_5m/?ref=rss

http://www.hsj.co.uk/hsj-local/mental-health-trusts/leeds-and-york-partnership-nhs-foundation-trust/monitor-refuses-to-investigate-tender-process-despite-concerns/5089585.article?blocktitle=Leeds-and-York-Partnership-NHS-Foundation-Trust&contentID=5191

http://www.itv.com/news/calendar/2016-01-27/calls-for-york-mother-and-baby-unit-to-re-open/

Petitions

Stop the closure of Bootham Park Hospital and fund an immediate refurbishment (8,232 supporters at 18 Feb 2016)

https://www.change.org/p/jeremy-hunt-mp-york-nhs-trust-re-open-bootham-park-hospital-and-fund-an-immediate-refurbishment

Mental Health Services in York Should Remain on the Existing Bootham Park Site (54 signatures at 19 Feb 2016)

https://www.change.org/p/nhs-vale-of-york-clinical-commissioning-group-dr-mark-hayes-mental-health-services-in-york-should-remain-on-the-existing-bootham-park-site



Appendix 5 - Key organisations involved

Some of these organisations will be better known to local people than others. We have provided the fullest explanations of those we believe to be the least well known.

The Care Quality Commission is the independent regulator of health and social care in England. In their words:

'We make sure health and social care services provide people with safe, effective, compassionate, high-quality care and we encourage care services to improve.

We monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety and we publish what we find, including performance ratings to help people choose care.

We take action to protect people who use services.'

NHS Vale of York Clinical Commissioning Group (VoYCCG) is the organisation responsible for purchasing health services in our area. They manage the contract with Tees Esk and Wear Valleys NHS Foundation Trust, and previously managed the contract with Leeds & York Partnership NHS Foundation Trust.

Tees Esk and Wear Valleys NHS Foundation Trust (TEWV) is the current provider of mental health services across the Vale of York area. TEWV also provide mental health services across the North East and North Yorkshire. In their words:

'Tees, Esk and Wear Valleys NHS Trust was created in April 2006, following the merger of County Durham and Darlington Priority Services NHS Trust and Tees and North East Yorkshire NHS Trust.

As a foundation trust we are accountable to local people through our Council of Governors and are regulated by Monitor, the health sector regulator. On 1 October 2015 we took over the contract to provide mental health and learning disability services in the Vale of York.

In May 2015 our services were rated as 'GOOD' by the Care Quality Commission (CQC) following the Trust-wide inspection of our services in January 2015.



With over 6,500 staff and an annual operating income of over £300 million we deliver our services by working in partnership with local authorities and clinical commissioning groups, a wide range of other providers including voluntary organisations and the private sector, as well as service users, their carers and the public.'

York Teaching Hospital NHS Foundation Trust runs a number of health facilities and services, including York and Scarborough Hospital. They also maintained the Bootham Park Site on behalf of NHSPS until November 2015.

NHS Property Services manage the Bootham site

In their own words:

'The quality of the healthcare environment has a direct impact on how the NHS delivers care, and our patients' experience of it. The work environment is also important for staff: the better it is the more efficient they can be.

NHS Property Services manages, maintains and improves NHS properties and facilities, working in partnership with NHS organisations to create safe, efficient, sustainable and modern healthcare and working environments.

We are a national company, with a local structure, focusing our strategic and operational property management skills on supporting better health outcomes and experience for patients.

NHS Property Services has two main roles:

- 1. Strategic estates management acting as a landlord, modernising facilities, buying new facilities and selling facilities the NHS no longer needs.
- Dedicated provider of support services such as cleaning and catering.
 We have responsibility for around 3,500 buildings worth over £3 billion which were previously owned, leased or managed by primary care trusts and strategic health authorities.

This accounts for some 10 per cent of the NHS estate in England. Most of these buildings are used to provide patient care, such as GP surgeries and community hospitals. We do not have responsibility for hospital estates run by NHS Trusts and NHS Foundation Trusts.



NHS Property Services has a clear mandate to provide a quality service to its tenants and minimise the cost of the NHS estate to those organisations using it. We are passing the savings we make back to the NHS.'

Historic England (Previously English Heritage) is the public body that looks after England's historic environment. In their words:

'We champion historic places
We identify and protect our heritage
We support change
We understand historic places
We deliver national expertise at a local level'

City of York Council is the local council or local authority for York. Local councils are made up of elected local councillors and paid staff. Councils provide a wide range of services, either directly, or by buying the services the local population needs. They also have responsibility for the economic, social and environmental 'wellbeing' of their area.

Partnership Commissioning Unit is hosted by NHS Scarborough & Ryedale Clinical Commissioning Group. They were formerly known as the Vulnerable Adults and Children's Commissioning Unit. They support the four Clinical Commissioning Groups (CCGs) across North Yorkshire with specialist commissioning. Current work includes the Mental Health Crisis Care Concordat and the Future in Mind Transformation Plan for children and young people's mental health services.



Appendix 6 - Recent history – who provides local NHS Mental Health Services?

In July 2000, the Government's NHS Plan promised investment, reform and a shift in power towards principal healthcare professionals and patients. Old health authorities were disbanded and replaced by 28 Strategic Health Authorities.

Part of this reform was the setting up of Primary Care Trusts (PCTs). PCTs were local organisations responsible for managing health services in the community. They included;

- GPs
- Community nurses
- Local community hospitals (but not acute hospitals like York Teaching Hospital)
- Mental health services
- NHS Direct
- NHS Walk-in Centres
- Patient transport (including ambulances)
- Screening and health promotion programmes
- Dentists
- Pharmacists
- Opticians

Our local Primary Care Trust was North Yorkshire and York PCT.

In 2002, Alan Milburn (the Secretary of State for Health) announced the idea of NHS Foundation Trusts. The first 10 hospitals became NHS Foundation Trusts in 2004. They are semi-autonomous organisational units within the National Health Service in England. They have a degree of independence from the Department of Health and from their local strategic health authority until the latter were abolished in 2013. As of February 2016 there were 152 NHS Foundation Trusts.* The York Hospital NHS Foundation Trust was established on 1 April 2007, and renamed York Teaching Hospital NHS Foundation Trust in 2010, following its links with Hull York Medical



School (HYMS).xi Leeds Partnerships NHS Foundation Trust, a provider of mental health services in Leeds, became an NHS Foundation Trust in August 2007.xii

From 2008 onwards, through a programme known as Transforming Community Services, Primary Care Trusts were encouraged to focus on buying services, rather than providing them. As a result, staff were transferred from within the PCT to provider organisations. Locally, this meant for example that most community services staff were transferred to York Teaching Hospital. Mental health services and the staff working within them were transferred under contract to Leeds Partnership NHS Foundation Trust in 2012, when they won the tender. In recognition of this, they changed their name to Leeds & York Partnership NHS Foundation Trust (LYPFT).

The Health and Social Care Act 2012 provided the framework for an extensive further reorganisation of the NHS in England. PCTs and Strategic Health Authorities were abolished. Instead, CCGs were set up. They inherited the contracts PCTs held with provider organisations. Locally, this meant that the newly created NHS Vale of York Clinical Commissioning Group held contracts with organisations including York Teaching Hospital and LYPFT.

At the same time, local provider organisations had to decide whether to take responsibility for their estate. LYPFT made the decision to put NHS Vale of York's mental health estate into the hands of the newly formed NHS Property Services. The Health and Social Care Act also removed the overall responsibility for the health of citizens from the Secretary of State for Health, which had been in place since the creation of the NHS in 1948.



Appendix 7 – Engagement activity undertaken by TEWV to date

- 1. TEWV attended a Carers Meeting on 14 October 2015, giving a verbal update on Bootham Park Hospital and the interim arrangements in place.
- 2. They provided a briefing to an officers' meeting at the City of York Council on 19 October. Attendees included social care representatives and the Director of Social Services.
- 3. They provided an update on the tender and hospital plans to the Child and Adolescent Mental Health Service (CAMHS) Executive Meeting on 20 October 2015.
- 4. They attended City of York Council Health Overview and Scrutiny Committee on 20 October 2015. They made a detailed presentation about the Trust's plans and the preferred option around Peppermill Court to bring adult beds back to York.
- 5. The presentation made at the Overview and Scrutiny Committee was repeated at the Health and Well Being Board on 21 October 2015.
- 6. TEWV attended a public meeting which was arranged by Rachael Maskell MP on 6 November 2015.
- 7. The Trust gave a verbal update and answered questions at a TEWV patient and carer meeting on 9 November 2015. The patients and carers were given an update on Bootham Park Hospital. They were also asked for their input on the plans for the redevelopment of Peppermill Court.
- 8. A similar presentation was made at a York Dementia Action Alliance event on 10 November 2015.
- A further presentation was made at the carers group meeting on 11 November 2015.
- 10. They attended a Converge meeting (Recovery College) on 25 November 2015 and gave a presentation about service delivery including an update on Bootham, interim plans and proposed plans for the reinstatement of adult beds at Peppermill.
- 11. The Trust attended the CAMHS Conference on 25 November 2015 at a lunchtime networking session and updated the meeting on specific



- questions raised during the session about what was happening at Bootham Park Hospital.
- The Trust attended a Safeguarding Meeting on 27 November 2015. This was a meeting with North Yorkshire County Council and Selby District Council and representatives from the Police to discuss general interface issues. However, specific input was provided regarding Bootham Park Hospital and the Trust's plans was given.
- The Trust attended a Health and Well Being Board on 2 December 2015 and updated the Board as regards the Trust's plans to reinstate the Section 136 suite at Bootham Park Hospital.
- 14. On 11 December 2015 the Trust provided a verbal update to the North Yorkshire County Council Overview and Scrutiny Committee regarding the Trust's interim arrangements and plans.
- On 22 December 2015 the Trust attended a City of York Council Overview Scrutiny Committee Meeting and provided a further update on its plans.
- On 6 January 2016 the Trust attended the Voluntary & Community Sector (VCS) Learning Disability Forum to update and gain feedback from representatives (service users, carers and VCS representatives) on service issues following the closure of Bootham Park Hospital and to update on our tender plans.
- 17. On 11 January 2016 there was a service user visit to Peppermill Court to update service users and to seek input regarding the specific form of service provision.
- 18. Further meetings are scheduled with the service user group in order for the service users to provide input into the Trust's plans for Peppermill Court and a visit to Peppermill Court took place on 11 January 2016.
- 19. A further YDAA meeting held on 18 January 2016 gave a further update on arrangements.
- 20. 22 February 2016 Martin Barkley (CEO) participated in a BBC Radio York phone in to respond to mental health issues, a significant proportion of the phone in covered issues relating to the closure of Bootham Park Hospital and its associated impact.
- 21. A number of service visits have been undertaken (or are planned) for representatives to visit alternative mental health facilities within TEWV.



This has included visits from the Carers group/ Overview and Scrutiny (OSC). OSC and York Civic Trust are also planning to visit the BPH site (8th March and 14th March respectively) to review the building issues and understand the heritage elements.

We will try to attend any meeting which is requested by any group to discuss the impact of Bootham, or any associated issues.



Appendix 8 – Glossary of Abbreviations

BPH	Bootham Park Hospital
CQC	The Care Quality Commission
HWBB	Health and Wellbeing Boards
HWY	Healthwatch York
LYPFT	Leeds and York Partnership NHS Foundation Trust
NHSPS	NHS Property Services
PCU	Partnership Commissioning Unit
TEWV	Tees Esk and Wear Valleys NHS Foundation Trust
VoYCCG	NHS Vale of York Clinical Commissioning Group
YTH	York Teaching Hospital

References

closure-of-bootham-park-hospital-and-the-future-of-mental-health-services-in-york/)

¹ https://en.wikipedia.org/wiki/Bootham Park Hospital

ii http://www.cqc.org.uk/content/leeds-and-york-partnership-nhs-foundation-trust-rated-requires-improvement-overall-chief

iii http://publicsectortenders.net/index.php?name=News&file=article&sid=30484&theme=PublicSectorTenders

ivhttp://www.yorkpress.co.uk/news/13329311.Trust loses appeal to keep 190 million mental health contract/

v http://www.cqc.org.uk/content/statement-bootham-park-hospital

vi http://www.cqc.org.uk/content/update-bootham-park-hospital-york

vii http://www.cqc.org.uk/content/bootham-park-hospital-update

viii https://hansard.digiminster.com/Commons/2016-02-

^{03/}debates/16020361000002/BoothamParkMentalHealthHospital

ix (for example York Mind's website; http://www.yorkmind.org.uk/healthwatch-york-have-your-say-about-the-

x https://en.wikipedia.org/wiki/NHS foundation trust

xi https://en.wikipedia.org/wiki/York Teaching Hospital NHS Foundation Trust

xii https://en.wikipedia.org/wiki/Leeds and York Partnership NHS Foundation Trust

http://www.grace-care.co.uk/helpful-information/care-directory/nhs.php



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York CVS

Healthwatch York is a project at York CVS. York CVS works with voluntary, community and social enterprise organisations in York.

York CVS aims to help these groups do their best for their communities, and people who take part in their activities or use their services.

This report

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