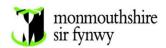
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Neuadd y Sir Y Rhadyr Brynbuga NP15 1GA County Hall Rhadyr Usk NP15 1GA

Tuesday, 2 January 2018

Notice of Reports Received following Publication of Agenda.

Adults Select Committee

Wednesday, 10th January, 2018 at 10.00 am, Council Chamber, County Hall, The Rhadyr, Usk, NP15 1GA

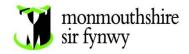
Attached are reports that the committee will consider as part of the original agenda but were submitted to democratic services following publication of the agenda.

Item No	Item	Pages
7.	Cabinet Member's Draft Response to Aneurin Bevan University Health Board Consultation on Older Adult Mental Health Services	1 - 32

Paul Matthews
Chief Executive



Agenda Item 7



SUBJECT: ANEURIN BEVAN UNIVERSITY HEALTH BOARD – REDESIGNING

MENTAL HEALTH SERVICES FOR OLDER PEOPLE - DRAFT

CONSULTATION RESPONSE

MEETING: ADULT SELECT COMMITTEE

DATE: 10TH JANUARY 2018

NON-PUBLICATION

1. PURPOSE:

1.0 To present a draft Monmouthshire County Council response to the Aneurin Bevan University Health Board (ABUHB) consultation *Redesigning Mental Health Services for Older People* for scrutiny, requesting that Members provide comments to inform the final response to be presented to Council on the 18th January 2018.

2. **RECOMMENDATIONS:**

2.1 That Select Committee scrutinise the attached draft consultation response (Appendix A) and makes recommendations as appropriate.

3. KEY ISSUES

- 3.1 ABUHB approved recommendations at its Board meeting on 27th September 2017 to enter into formal public consultation a preferred option for the redesign of older adult mental health services.
- 3.2 The public consultation process was agreed between ABUHB and the Community Health Council to run between November 2017 and January 2018.
- 3.3 The ABUHB consultation document is included as Appendix B to this paper. The consultation sets out a vision for older adult mental health services and describes the challenges faced by the Health Board in recruiting a registered mental health nursing workforce to safely provide quality inpatient services. The consultation advises of urgent changes to services that were made in January 2016 to ensure that safe services could be provided. The consultation then sets out and appraises a number of options for future service provision. There is a preferred option described in the paper, to consolidate the number of older adult mental health wards, to 3 dementia wards and 1 functional mental health ward. This option would mean that dementia inpatient services would no longer be provided from St Pierre Services at Chepstow Community Hospital. This would mean that people from Monmouthshire requiring this service would access either St Woolos Hospital or Ysbyty Tri Chwm Hospital in Ebbw Vale.
- 3.4 Monmouthshire County Council Members have actively engaged in the ABUHB consultation process. In addition to an all Member seminar, there have a number of public engagement meetings well attended by Councilors. At the all Member seminar, and in public meetings, a number of concerns have been raised regarding the consultation proposals, the lack of consideration in the options appraisal to Monmouthshire's demographics current and projected- and prevalence of mental ill health. Concerns have also been consistently raised regarding transport and access issues, the impact on carers, lack of detail around investment in enhanced community services and the impact of service withdrawal on the

viability of Chepstow Community Hospital. These concerns mean the consultation response is not supportive of the preferred option. It is proposed that Council expresses a view that a more robust option appraisal is undertaken considers fully all relevant information, and puts in place a plan for quality older adult mental health services – community and inpatient-which meet the needs of current and future generations.

3.5 Notwithstanding the consultation response, it is important to emphasise the absolute commitment of Monmouthshire County Council to work in partnership to deliver integrated health and social care services. The commitment of the Health Board to a positive future for Chepstow Community Hospital, and the work being taken forward to plan for service provision in South Monmouthshire through the group co-chaired by the Chief Operating Officer, ABUHB and the Chief Officer, Social Care and Health, Monmouthshire County Council is welcome. To instill confidence, it needs to deliver detail of how primary and community health, social care and wellbeing services will be enhanced, making best use of the hospital and other physical assets.

4. OPTIONS APPRAISAL

4.1 No option appraisal is included in this report as this is a response to a ABUHB consultation which itself includes an options appraisal. The robustness of evidence used to undertake that option appraisal is questioned in this consultation response.

5. EVALUATION CRITERIA

5.1 No evaluation criteria are included in this report as it is a response to an ABUHB consultation. The consultation response does highlight the need for clear evaluative measures understanding the impact of the change proposed.

6. REASONS:

6.1 The reason for this paper is to provide an effective consultation response to the ABUHB consultation on the *Redesigning Mental Health Services for Older People*

7. RESOURCE IMPLICATIONS:

7.1 This consultation response has no direct resource implication to the Council. The response does request firm commitment from ABUHB that savings realised from the realignment of inpatient services are ringfenced for reinvestment in older adult mental health services and that the priorities for this investment should meet current and future needs.

8. WELLBEING OF FUTURE GENERATIONS IMPLICATIONS (INCORPORATING EQUALITIES, SUSTAINABILITY, SAFEGUARDING AND CORPORATE PARENTING):

8.1 As this is a consultation response to a change proposal from another public body no equalities impact assessment has been undertaken by Monmouthshire County Council. The consultation response expresses disappointment at the lack of availability of an impact assessment to scrutinise during the consultation process, and stresses the need for this to be central to the Board's decision on this matter.

9. CONSULTEES:

Senior Leadership Team Cabinet All Member's Seminar

10. BACKGROUND PAPERS:

Draft Consultation Response (Appendix A)
ABUHB Consultation Document Redesigning Mental Health Services for Older People
(Appendix B)

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DRAFT Response to Aneurin Bevan University Health Board Consultation – Redesigning Mental Health Services for Older People

The consultation into the future of Older Adult Mental Health Services by Aneurin Bevan University Health Board presents some considerable challenges for Monmouthshire County Council.

The Council absolutely supports the commitment of the Health Board to patient safety and quality of care. This is especially important when caring for some of our most vulnerable citizens – older people with mental ill health. We also recognise the challenges facing the Health Board: of recruiting a suitably qualified registered workforce against a backdrop of what appears to be sub-optimal workforce planning over a number of years by the NHS nationally. We also support the vision of the Health Board for older adult mental health services – to enhance community mental health services, particularly to "provide more services closer to where people live". We also would like to express our sincere thanks to officers of the Health Board who attended an all Member seminar on 26th October, presented detailed background to the proposals and responded to questions from Council Members.

We cannot, however, support as a Council the preferred option for the future of older adult mental health services as set out in the consultation document. The Council approved 2 motions (appendix 1) on 9th November 2017 expressing our concerns at the consultation in light of the demographic challenges facing our County. Our duty as a Council is to secure the best possible configuration of health services and outcomes to meet the needs of the people of Monmouthshire. We cannot see evidence in the preferred option within the consultation that this is the best outcome for our citizens. Indeed we are concerned if implemented that it will have a detrimental impact on older adults with mental ill health, their carers and wider services in Monmouthshire. Our concerns are around both the impact on current, and future generations.

Our concerns regarding the consultation proposals and the preferred option are as follows:

1. The demographic challenges of a high proportion of older people in Monmouthshire are not considered. The proportion of people aged over 65, 75 and 85 are higher in Monmouthshire than in other Gwent counties set out in table 1

County	% over 65s	% age 65-74	% age 75-84	% age over 85
Caerphilly	18.83	10.95	5.92	1.95
Blaenau Gwent	19.75	11.29	6.29	2.17
Torfaen	20.07	11.13	6.4	2.54
Monmouthshire	24.22	13.39	7.58	3.24
Newport	17.4	9.5	5.71	2.2

Percentage of Population by Age – StatsWales – Mid-year 2016 Population Estimates

In addition, the number of over 85s in Monmouthshire are projected to rise by 185% by 2039.

As the consultation states, the number of older people with dementia in Gwent will have increased by approximately 11,000 by 2013. It is clear that there will already be a higher proportion of people with dementia in Monmouthshire than other parts of Gwent, and the numbers in our County compared with the rest of the region will continue to be proportionately higher. This is not taking into account the expansion of the population in the south of the County.

Nowhere does the consultation document consider the proportion of older people, and prevalence of dementia, as a significant factor in option appraisal. Our view as a Council is that this means the option appraisal is significantly flawed in considering how best to meet current and future needs. .

- 2. The considerable challenges of access to services and transport within a rural county are not taken into account with the consultation. There is no mitigation offered as to how the increased travel time for Monmouthshire carers will be addressed by the Heath Board. It is unclear whether travel times have been analysed and informed the options appraisal, although an increase in travel time is highlighted as potentially negative impact. It is unclear from the consultation where people from Monmouth and central Monmouthshire will access services. Without evidence of proper consideration of accessibility issues, we again consider the option appraisal to be flawed and the conclusions can-not be supported. Carers will frequently be old and vulnerable and the consequences of the change will be further travel, over greater distances, compounded by poor public transport and challenges around car parking. We would hope the Health Board can make real terms commitment to enhanced carer support as a tangible enhancement to the whole older adult mental health service offer. The impact on carers of caring for someone with dementia is considerable and investing in carer wellbeing and support
- 3. Whilst recognising this is a consultation into the future of older adult mental health inpatient services the viability of Chepstow Community Hospital as a vibrant community hospital is threatened, as the preferred option would represent withdrawal of another important services. Chepstow hospital is a fantastic facility, but the potential for the hospital to reduce pressures on acute services is not being realised. The withdrawal of minor injury services was a blow to the south of the county. Further service reductions, unless there are balanced by firm commitments from the Health Board to expand other services, will severely undermine the confidence of the local population, in the Health Board's commitment to services in Chepstow. A really positively articulated purpose for the hospital, and community services, and expanded range of services that can safely be provided is imperative to restore confidence and meet the needs of people for services such as outpatients and diagnostics which should not require an appointment at the Royal Gwent Hospital.
- **4.** Investment of savings realised through Older Adult Mental service configuration should be ring-fenced for reinvestment in community mental health services and services for carers. We ask for a firm commitment from the Health Board to this effect. We note that the Board paper which was approved giving approval to consult, highlighted 'an opportunity to reinvestment in other service priorities within Older Adult Mental Health'. If the proposed changes are genuinely focussed on improving quality of care and better outcomes for

patients, then financially supporting improved integrated community services is an important commitment and the detail of where that investment will be directed, and for us, how it will impact on Monmouthshire is a critical issue which we will continue to ask for assurances on.

- **5.** There is no meaningful articulation of where older adult mental health inpatient services sit within the overall pathway for mental health. We have an overarching concern with regard the proposals they seem to be entirely driven by the workforce challenges, rather than service improvement. There is no substance by which we can understand what is meant be increasing and strengthening community services in Monmouthshire. Monmouthshire is a county which has responded positively to the increasing needs of our population for dementia care the Council's care at home service which provides high quality dementia care has won accolades for the way it delivers person centred care, based on strong relationships. There is a business case under development for the provision of a leading edge specialist dementia care home at Crick Road. We need to understand that the Health Board is committed to developing, delivering and investing in integrated community pathways to have confidence in the substance behind the commitments. Without detail the proposed changes to older adult mental health services seem reactive and short term. Clear measures of what the changes will achieve should be fundamental in any proposal for significant change.
- **6. Equality impact assessment** We are concerned that there is no equality impact assessment available either as part of the Board paper or are the consultation document. We note that one is in development, and issues of travel and access are likely to be substantive. We also consider that the equality impact assessment should meaningful address the differential demographic impact described earlier in this response. Given the potentially negative impacts on vulnerable older people this is a critical consideration we would have wished to scrutinise and comment on in formulating this response.

To conclude, as stated at the outset, we understand the considerable challenges which the Health Board faces in providing services against a backdrop of scarcity of workforce. We have always worked closely and productively in partnership with the Health Board, and have been at the fore of developing innovative and creative integrated services to address the needs of our populations. It is a disappointing position for us to find ourselves in as a Council, to have to respond negatively to a formal consultation. Our concerns are that the option appraisal itself appears significantly flawed, and whilst it is heartening to hear about the commitment to improving out of hospital provision we are struggling to understand what this enhancement will look like and to understand in granular terms what the detail of investment will look like and how it will benefit Monmouthshire. As a partner public body we understand the necessity for any significant change to model the impact on current and future generations and we can-not see that this has been meaningfully appraised in this set of proposals. Our response, whilst negative to these particular proposals, also represents a continued commitment to integrated working, and effective partnership and we welcome the opportunity to develop and shape an alternative set of proposals with you.

Motion from County Councillor Easson:

The Aneurin Bevan University Health Board has started consultations regarding the future of Adult Services across Gwent. The suggestion is to centralise dementia care to hospitals in Blaenau Gwent, Caerphilly, Newport and a unit in Torfaen; after the Grange Hospital is commissioned in 2021.

This would suggest the closure of St Pierre Ward at Chepstow Hospital which is currently employed for dementia care. Support for dementia care in the north of Monmouthshire would be at Ysbyty Tri Cwm Hospital in Ebbw Vale and from the south at St Woolos in Newport. I move that this Council works in conjunction with ABUHB and the ABCHC to find positive and futuristic ways of removing this threat to Chepstow Hospital which has 10 years of the PFI initiative to complete the contract, and that the use of this facility should be enhanced not reduced."

Motion from County Councillor Pavia:

Monmouthshire County Council understands the demographic challenges the county faces over the coming decades. It recognises that the increase in older people will inevitably place more demands on our health and social care system, as an ageing population is more likely to have at least one and often multiple chronic conditions like dementia. Therefore, it is concerned by Aneurin Bevan University Health Board's proposals to redesign older adult mental health services, which could potentially mean the closure of the St. Pierre dementia ward in Chepstow Hospital and the transfer of patients to Ysbyty Tri Chwm in Ebbw Vale and to St. Woolas in Newport.

It calls upon Aneurin Bevan University Health Board to:

- 1. Enter into 'robust' and 'meaningful' engagement with patients, stakeholders and local communities in Monmouthshire, regarding its redesign proposals and listen to appropriate concerns that any transfer of care outside of the county will naturally generate;
- 2. Regularly meet with the Cabinet Member responsible for Social Care, Safeguarding and Health and senior officers, to explore new, coproduced and sustainable models of care for older adults with mental ill health, as part of the Council's overarching strategic plan to deliver quality integrated social care right across the county.



REDESIGNING MENTAL HEALTH SERVICES FOR OLDER PEOPLE

CONSULTATION DOCUMENT NOVEMBER 2017 – JANUARY 2018

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1. PURPOSE

Aneurin Bevan University Health Board wishes to consult with people living or using services in Gwent on the future shape of services for older adults with a mental health need. This paper provides information to people who want to take part in the consultation process.

We have been talking to people for some time about what they believe to be important in the design of older adult mental health services. It is the ideas that have emerged through this process that we are now consulting on. Specifically:

The re-development of mental health services for older adults with a preferred option of enhancing community based services and consolidating in-patient provision to a smaller number of centres of excellence.

You can contribute to the consultation by using the questionnaire at the end of this document. You may also wish to offer a more detailed response and can do so through the following arrangements:

E-mail: OAMHEngagement.abb@wales.nhs.uk

Address: Ms Sara Kay-Green,

Administration Officer, First Access Building,

County Hospital, Coed-y-Gric Road,

Griffithstown, Pontypool, Torfaen NP4 5YA.

There will also be a series of consultation events that you may wish to attend.

For your views to be considered as part of the consultation, there is a final date for submission of 26th January 2018.

2. MENTAL HEALTH SERVICES FOR OLDER PEOPLE IN GWENT

2.1 Defining Older Adult Mental Health

Within Wales, we know that people are living longer and that in twenty years time one in four people will be over 65 years of age. The numbers of people aged over 85 will more than double in the next twenty years.

Dementia is more common as people grow older and currently affects 1 in every 14 people over 65 years of age. The likelihood of being affected by dementia increases as you grow older. Within the UK an estimated 750,000 people suffer from dementia and the number is projected to rise to over 1 million people within the next 10 years. In Gwent it is estimated that by 2035 over 11,000 people will have some form of dementia compared to around 7,500 in 2015. Medically, dementia is sometimes known as an 'organic' illness.

Older people can also experience mental health difficulties in the same way as younger people. Examples of these are anxiety, depression and schizophrenia. These are sometimes known as 'functional' mental illnesses.

2.2 How are older adult mental health services currently organised?

Aneurin Bevan University Health Board provides a range of health services for older people with both organic and functional mental illness. Services are provided to people who live in Blaenau Gwent, Caerphilly, Monmouthshire, Newport and Torfaen. We cannot do this alone and therefore, staff in our services work very closely with GPs, other parts of the health service, social services, housing and voluntary organisations.

Most mental health services are provided locally by staff working as part of teams based in the community and include doctors, nurses, psychologists, occupational therapists and social workers. They provide a range of services to help to support people living at home or in the community.

Each borough also has specialist memory assessment services that provide access to specialist assessment, diagnosis and treatment for individuals with memory loss or dementia.

A smaller number of people may need admission to hospital for specialist assessment or treatment of their mental health condition and we have a number of hospital wards at different locations across the Health Board for this purpose.

In addition we also have a specialist psychiatric liaison service that works within the Royal Gwent, Nevill Hall and Ysbyty Ystrad Fawr Hospitals and our other general hospitals to offer specialist assessment and intervention for people identified as having mental health needs while being treated for other physical illnesses.

Within Gwent:

- 16,000 visits are made by the Community Mental Health Team per year.
- 8,000 people visit Memory Assessment Clinics per year.
- Approximately 400 people spend time on an older adult mental health ward each year.
- 2,700 people with mental health needs are seen within a hospital setting by the psychiatric liaison service, each year.

3. WHAT HAVE PEOPLE TOLD US IS IMPORTANT?

Asking people what they think is really important to the Health Board. Earlier this year we spoke to many people through a range of public and staff engagement meetings to find out their ideas and priorities for older adult mental health services in Gwent.

We held twelve public road shows and six staff events to gather people's views on what was important to them. The themes that came from that work showed that people want to have care and support in their community, as close to their home and family as possible, and only want to come into hospital when really necessary. Specifically they asked:

- To be seen by the same people with the right skills and experience (Right People)
- For services to be available in the right place when they needed to access them (Right Place)
- To have services and people working together when planning and delivering care with good communication between everyone involved in providing support (Right Thing)
- To have confidence that services are safe and sustainable and fit to meet future challenges (Right Future)

We used the information from the meetings to hold two workshops with patients, carers, staff, local authority representatives and the community health council to give some thought to how services could be designed in the future to deliver these aspirations.

4. FUTURE VISION

- Provide the most appropriate and best possible care, treatment and support to older people with mental health problems. To do this we want to attract and retain the best staff possible and ensure that our services are fit for the future.
- Provide more services closer to where people live, and have strong community teams supporting people to remain independent for as long as possible in their homes and community. We want our hospital wards to only be used when really necessary and to develop them to be Centres of Excellence for the people using them.

Our aims are to:

- Help support the development of Dementia friendly communities.
- Support people to make healthy life choices that may reduce the risk of mental illness in older age.
- Help people stay independent for as long as possible; to ensure community teams, memory assessment services and other community based services provide fast and responsive assessment, treatment and care in the community when it is needed.
- Provide the best possible environments and expertise for all people who need to have a hospital stay and to develop all wards as Centres of Excellence.

- Provide services that are focused on delivering the best possible outcomes for all people.
- Support people with the right staff, with the right skills, in the right place, at the right time both now and into the future.

To do this, we want to:

- Increase and further strengthen existing community services to make them stronger.
- Offer better access to information, advice and assistance.
- Improve access to specialist assessment within the community or where people live.
- Reduce the overall number of hospital beds in Gwent and the sites from where they are provided, creating separate specialist dementia friendly assessment wards and a single specialist functional assessment ward, all of which will be supported by highly specialised teams of staff.
- Change how we use our staff and money (our resources) to deliver the vision.

Achieving this vision will help us make our services sustainable into the future and address a number of our more immediate challenges.

5. CURRENT CHALLENGES

Whilst we receive good feedback about the care we provide, there are a number of challenges that older adult mental health services are facing at the current time.

Like other similar services in Wales, we have difficulty in recruiting all of the staff we need to provide the high standards of care we would like. We have particular difficulty in recruiting some doctors and nurses to work on our hospital wards and often have to rely on staff working extra hours or bringing in temporary staff (provided through nursing and locum doctor agencies). This means that we cannot always provide the same staff on the wards to look after patients. Our wards are spread across multiple hospital sites throughout the Gwent areas and we are increasingly facing difficulties in recruiting the number of staff to meet the requirement of providing care in all these wards.

As a result of the changes in staff availability in the past few years we have already made changes to temporarily reduce the number of wards (and therefore beds) open. Specifically this has included the temporary closures of Willows Ward in Ysbyty'r Tri Chwm (Blaenau Gwent) and Tredegar Ward in St Woolos Hospital (Newport) as well as some other changes to the number and type of patients admitted to some other wards.

Making these changes has allowed us to continue providing high quality, safe and more appropriate care both in the community and within our remaining wards in our hospitals. It has also prompted a need for us to review the way our services are organised on a more permanent basis.

6. OPTIONS FOR CHANGE

The focus of our consultation is:

The re-development of mental health services for older adults with a preferred option of enhancing community based services and consolidating in-patient provision to a smaller number of centres of excellence.

It is important to remember that the vast majority of services for older people will be provided locally through Community Mental Health Teams and Memory Assessment Services. A specific piece of work is already being planned to explore how community services could look into the future. This work will report within the next year.

The most immediate challenge is to continue to provide good quality and safe services for individuals who are admitted for specialist assessment and treatment in hospital.

Five different options are possible for the future delivery of in-patient services. Individuals attending the workshops previously mentioned were asked to consider these options against what people had previously told us was important. A summary of the five options, together with the list of potential strengths and weaknesses of each option is offered overleaf.

Option 1: Do nothing – Keep the way hospital services are currently provided including the current temporary ward arrangements

Strengths	Weaknesses		
Minimal disruption to staff	Continues to result in staff shortages		
working arrangements	as staff are providing services across		
	multiple locations		
Provides a broad geographical	Will continue to rely on agency		
spread of wards across Gwent	nursing and medical staff		
Ward teams have established	Unstable staffing situation remains		
relationships with current	and further closure of wards may be		
community services	necessary in an emergency		
Provides separate dementia and	Less resources available to improve		
functional wards	community services and ward staffing		

Option 2: Return to the number of wards/beds available before January 2016

Strengths	Weaknesses		
Good geographical spread of wards	Unable to deliver as requires		
across Gwent	recruitment of an additional 24		
	qualified nurses		
Provides separate dementia and	Will continue to rely on agency		
functional wards	medical staff		
	No resources freed to improve		
	community services and ward staffing		

Option 3: Change the number of wards to 3 wards for people with Dementia and 1 ward for people with Functional illness (e.g. depression, anxiety and schizophrenia)

Strengths	Weaknesses
Enables development of inpatient	Increased travel time for a small
Centres of Excellence with	number of patients and carers for
enhanced staff support and	admission to hospital
concentration of staff expertise	
Improved stability in workforce by	
further reducing demands for	
nurses within wards	
Provides separate dementia and	
functional wards	
Frees up more resources to re-	
invest in improving community	
service and ward staffing	

Option 4: Reconfigure all existing wards to be mixed Dementia and Functional wards

Strengths	Weaknesses		
Good geographical spread of functional and dementia beds	Poor patient experience due to differing needs of patients being nursed in the same environment		
	Spreads nursing and medical resources more thinly across 5 wards		
	Patient mix likely to increase recruitment problems		
	Liable to lead to reactive bed closures due to workforce retention and recruitment.		

Option 5: Reconfigure all existing wards to be segregated gender specific wards

Strengths	Weaknesses
Improves patient experience and	Increased numbers of patients will
dignity through separate male and	need to travel greater distances out
female wards	of borough to access inpatient beds
	Reduces flexibility for coping with
	variation in demand
	No resources free to reinvest in
	community support
	Spreads nursing and medical
	resources more thinly across 5
	wards
	Liable to lead to reactive bed
	closures due to workforce retention
	and recruitment

From the work undertaken through the public engagement and workshops, *the preferred option that emerged was Option 3*.

7. PREFERRED OPTION

Consolidate the number of wards to 3 dementia wards and 1 functional ward. This would reduce bed numbers from 72 down to 67 beds overall and result in the closure of one additional ward. (Option 3)

We believe this option would enable the inpatient service to become more stable and continue to offer a good quality service both now and in the future. It would release more resources to develop in-patient wards into centres of excellence. It will also enable the further development and improvement of community services in Gwent.

Consideration has also been given to where these wards would best be located. The following were considered in making this suggestion:

- Where people currently access services
- Transport links
- Areas where it is difficult to attract and keep staff

Based on the above, it is suggested that there should be:

- one functional unit in Ty Siriol, County Hospital, (Pontypool)
- three dementia assessment wards:
 - one sited in North Gwent at Ysbyty Tri Chwm Hospital, (Ebbw Vale),
 - one in South Gwent at St Woolos Hospital (Newport)
 - one in West Gwent at Ysbyty Ystrad Fawr Hospital, (Ystrad Mynach).

This option would result in the closure of St Pierre Ward in Chepstow Hospital. We recognise that this will cause concern/alarm to the people who would normally access hospital services for mental health treatment and we would like to have a conversation with you/the local community to determine what community based services we will be providing and what actions we can take to make this change easier for you.

A summary of the current and proposed wards is shown below:

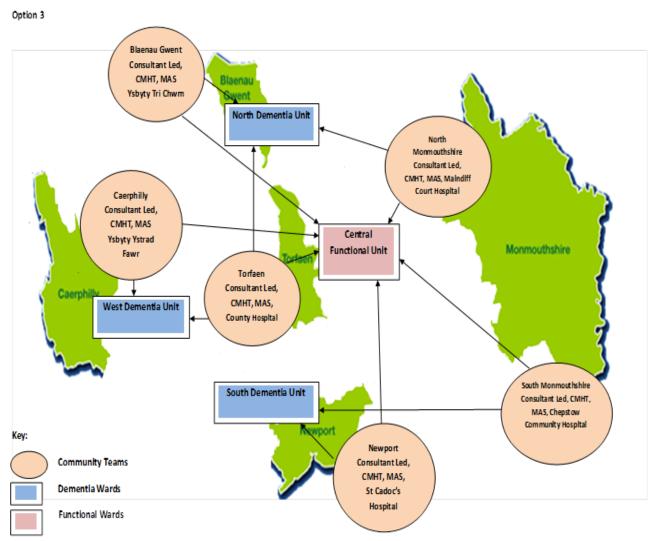
Current Temporary Provision				
Service	Number of Beds	Type of Care		
Ysbyty'r Tri Chwm Hospital,	13	Dementia and		
Ebbw Vale		Functional care		
St Woolos Hospital,	14	Dementia care		
Newport				
Ysbyty Ystrad Fawr Hospital,	16	Dementia care		
Ystrad Mynach				
Chepstow Hospital,	15	Dementia care		
Chepstow				
County Hospital,	14	Functional care		
Pontypool				
Total number of beds	72	72		
Proposed Provision				
Service	Number of Beds	Type of Care		
Ysbyty'r Tri Chwm Hospital,	15	Dementia care		
Ebbw Vale				
St Woolos Hospital,	14	Dementia care		
Newport				
Ysbyty Ystrad Fawr Hospital,	18	Dementia care		
Ystrad Mynach				
County Hospital,	20	Functional care		
Pontypool				
Total number of beds	67	•		

We believe that organising services in this way would be the best option to deliver the range and volume of services that are required safely and sustainably into the future. We also believe that the proposed sites offer the best configuration due to existing road links and public transport and would help people needing care and support access inpatient care in the most equitable way.

This option would mean that a small number of patients with dementia and families/carers (around 30 per year) from South Monmouthshire would need to travel to Newport if they required a hospital stay (a similar journey made by people already to the Royal Gwent Hospital to access most specialist hospital inpatient care for physical illnesses), while a similar number of patients and families from North Monmouthshire would

need to travel to Ebbw Vale if they required a hospital stay (a similar travel time to that currently made to access Chepstow Hospital).

It is important to remember that the vast majority of services for older people will be provided locally through Community Mental Health Teams and Memory Assessment Services. However, the diagram below shows how patients would access one of the wards if a stay in hospital for assessment or treatment is needed.



Key: CMHT - Community Mental Health Team MAS - Memory Assessment Service

8. LISTENING TO YOU

We have been actively listening to people throughout this process to date and through this consultation we are keen to continue to listen. Your views really are important to us and we would be grateful if you would take the time to be part of this consultation. The document you have read has set out our future vision for older adult mental health services and shared with you some options for the delivery of this, including a preferred option. It has also shared some current challenges in order to provide context for the considerations.

You can let us have your comments by completing the attached questionnaire or by e-mailing us on OAMHEngagement.abb@wales.nhs.uk We have also arranged a number of consultation events that will support the consultation process and which we hope you will attend. The details of these are given overleaf:

Week Commencing 13/11/2017	Meeting/Venue		
Tuesday 14 th November 10am-11.30am	Public – South Monmouthshire		
	Chepstow Leisure Centre, Chepstow, NP16 5LR		
Wednesday 15 th November 10am-11.30am	Public – North Monmouthshire		
	Shire Hall, Agincourt Sq, Monmouth, NP25 3EA		
Wednesday 15 th November 2pm-3.30pm	Public – North Monmouthshire		
	Abergavenny Leisure Centre, Abergavenny		
Week Commencing 20/11/2017	Meeting/Venue		
Wednesday 22 nd November 2pm-3.30pm	Public – Abertillery		
	Llanilleth Miners Institute, Meadow St,		
	Abertillery,NP13 2JH		
Thursday 23 rd November 10am-11.30am	Public – Ebbw Vale		
	Leisure Centre, Lime Ave, Ebbw Vale, NP23 6GL		
Week Commencing 27/11/2017	Meeting/Venue		
Wednesday 29 th November 10am-11.30am	Public – East Newport		
	Lysaghts Institute, Corporation Road, Newport,		
	NP19 OHE		
Wednesday 29 th November 2pm-3.30pm	Public – West Newport		
	Christchurch Centre, Malpas Road, Newport, NP20		
	5PP		
Thursday 30 th November 2pm-3.30pm	Public – Central Newport		
	Riverfront, Kingsway, Newport, NP20 1HG		
Week Commencing 04/12/2017	Meeting/Venue		
Tuesday 5 th December 10am-11.30am	Public – South Torfaen		
	The Olive Tree, Cwmbran, NP44 2JJ		
Thursday 7 th December 10am-11.30am	Public – South Torfaen		
	Pontypool Leisure Centre, Pontypool,NP4 8AT		
Week Commencing 11/12/2017	Meeting/Venue		
Monday 11 th December 2pm-3.30pm	Public – West Caerphilly		
	Penallta House, Tredomen Park, Caerphilly,CF82		
	7PG		
Thursday 14 th December 10am-11.30am	Public – East Caerphilly		
	Newbridge Memo, Newbridge, NP11 4FH		
Thursday 14 th December 2pm-3.30pm	Public – North Caerphilly		
	White Rose Information Resource Centre,		
	Elliotstown, New Tredegar, NP24 6EF		

Please ensure that you let us know if you are coming along so that we can make all necessary arrangements to meet your needs via email OAMHEngagement.abb@wales.nhs.uk

9. WHAT HAPPENS NEXT?

The consultation will take place between 1st November and 26th January 2018. The outcome of the consultation will be reported to the Aneurin Bevan Community Health Council and the Aneurin Bevan University Health Board.

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REDESIGNING OLDER ADULT MENTAL HEALTH SERVICES IN GWENT

u
SS:
of the following best describes you? (Please tick):
Patient
Family member/Carer
Member of Health Board staff
Other staff working in health, social care or the voluntary sector
Other (If other please specify):
is Consultation
Yes No at information would have helped?
re you had sufficient information to be able to provide aments on this consultation? Yes No at information would have helped?

services in Gwent ne	ed to change	e?		
	Agree Disagree			
Please tell us why?				
About Our Services				
7. Do you agree/dhealth services share	_			
"The redevelopment preferred option consolidating in-pat	of enhancing tient provision	communit	y based s	services and
	Agree Disagree			
Please tell us why?				

Do you agree/disagree that older adult mental health

6.

8.		-	_	_	_	ee with tis vision?			n hov	w we	are
_	٠.						_				

8a	Strengthening local community services to support older adults with
	mental health problems.

Agree	
Disagree	

If you agree, please tell us in what ways you would like us to stren our community services? If you disagree please tell us why?							

8b Developing a specialist unit for the in-patient care of older adults with a functional mental illness such as schizophrenia, anxiety and depression.

Agree	
Disagree	

Please tell us why?

8c Reducing the number of dementia assessment units in Gwent to three wards in order to be able to deliver safer and more sustainable services.

Agree	
Disagree	

Please tell us why?	
8d Travelling a little f	further for specialist inpatient services.
	Agree Disagree
Please tell us why?	
	ne information provided, would you the preferred option (Option 3) outlined in er? Agree Disagree
Please tell us why?	
10. Do you agree/location of the units?	disagree with the proposed geographical Agree Disagree
Please tell us why?	

11. Is there anything else you would like to tell us?							

Thank you for completing this questionnaire

Once complete please return it to:

Ms Sara Kay-Green, Administration Officer First Access Building, County Hospital, Coed-y-Gric Road, Griffithstown, Pontypool, Torfaen NP4 5YA.

