

West Yorkshire and Barnsley Assessment and Treatment Unit

West Yorkshire Joint Health Overview and Scrutiny Committee (WY JHOSC)

23 February 2021

Introduction

1. The aim of this paper is to further update WY JHOSC members on the proposal to reconfigure the [assessment and treatment unit](#) (ATU) provision across West Yorkshire and Harrogate Health and Care Partnership (WY&H HCP) from three to two units and to develop a single system / centre of excellence which supports people requiring ATU provision across West Yorkshire and Barnsley. In particular it provides an update regarding the further engagement work as discussed with WY JHOSC (which included representation from Barnsley) in early 2020.

Progress

2. As agreed with the WY JHOSC in February 2020, we have undertaken a further period of engagement over recent months to explore the possible impact of the proposed reconfiguration on people who access ATU care, their carers, staff and other stakeholders. The detailed report from this engagement work is attached as Appendix 1. The engagement work was supported by Inclusion North. You can also read the engagement report [here](#) and it is also in [easy read](#).
3. Engagement was undertaken with people (including families/carers) with lived experience of ATU admission or at risk of admission to an ATU, and staff who are involved in their care. This included people who access care and staff currently in ATU units, and those in community based services that connect with ATU provision.
4. After initially being postponed due to the COVID-19 pandemic the engagement took place during October and November 2020, with staff engagement taking place in November and December 2020. The [report](#) highlights the methods used and the limitations faced.
5. Fifty one completed questionnaires were received in response to this final stage of engagement. This is a significant improvement on previous engagement work in this area. As Barnsley patients currently access the ATU at Horizon Centre in South West Yorkshire Partnership Foundation NHS Trust and are supported by staff from this hospital, the same opportunities for engagement were given.
6. This further engagement process focussed on how moving from three to two units might impact on people. Previous [engagement](#) had already informed the decision to move from three units in 2019. The key findings from this last stage of a long engagement journey are as follows.

7. From the engagement with people who access care, carers and family members (17), we found that:
 - It is challenging to engage with people with lived experience of the ATUs because of the small numbers, their individual health conditions, the fact that visiting was restricted during the pandemic and that staff were dealing with significant additional pressures on top of COVID-19.
 - Most people who responded felt that we had given them enough information (12)
 - The majority of people that responded felt that the change would either be a good idea (6) or not affect them (6)
 - Two people felt that the change may affect them in a negative way (2) – both of these were concerned about having to travel further.
8. From the engagement with colleagues working in ATUs or in community services connecting with ATUs (34), we found that:
 - Some colleagues in Leeds were concerned about the loss of a unit in Leeds. 15 out of 20 felt it was not a good idea and all had LS postcodes. This was not unexpected (and would likely be replicated in any place 'losing' their unit) and highlights the need to undertake more work with stakeholders to alleviate their concerns as we move forward.
 - Some of our social care colleagues in Leeds did not feel adequately connected to the work to date. The decision to purposely share this opportunity for feedback about any concerns beyond ATU based staff has enabled us to identify these concerns. It will shape the approach we take to implementation, with some specific work planned in Leeds
 - Those responding to the staff survey gave equal positive and negative comments in relation to the change
 - Staff felt that the model would bring better coordination and sharing of good practice and training
 - From those staff concerned, they felt that carers of Leeds people accessing care might have to travel further or not visit. This reflects the concern from the two people who access care, and we will ensure that this is actively addressed within the operating model
 - They had lots of ideas for how to help develop the implementation of our plans, and how to ensure the benefits of this are maximised. Good communication was seen as key to this and this feedback will be shared with the ATU steering group for action and implementation
 - Some staff wanted to be more involved in the development of the future model in practice / in detail, which was welcomed and will be facilitated through planned organisational development work.
9. Throughout the engagement work we have been collecting equality information as part of the engagement.

What next?

10. All feedback from this final stage of engagement will be considered in the development and delivery of the implementation plan. We will ensure the issues raised are addressed. People who access care, carers, professionals and stakeholders will be also kept informed about the next steps. A "you said, we did" document will be developed as soon as is practical - this will aim to answer questions that have been posed and engage people who are keen to participate. People we have engaged with and those involved in the change will receive a briefing about the findings and actions taken as a result.
11. The Area Partnership Group (unions) has been kept updated throughout the full engagement process and will also be receiving the attached report.

Recommendations

12. WY JHOSC members are asked to:

- consider the outcomes of the further engagement work
- support the continued aspiration to implement the new model in a phased way from April 2021

Andy Weir
ATU Reconfiguration Senior Responsible Officer
Deputy Chief Operating Officer, Leeds and York Partnership NHS Foundation Trust

Appendix 1: Assessment and treatment units further engagement report



ATU Further
engagement report F