

Patient Information Booklet

What you need to know



Stockton Hall Hospital

Introduction to the Booklet

This information booklet has been produced to give a brief introduction to Stockton Hall Hospital and the care and treatment that it provides.

The booklet can be made available in a variety of languages to meet the needs of the current patient population and their families. It can also be made available in larger print and in audio format. Anyone wishing to receive a copy in these formats should contact the Performance Management Office within the hospital. The booklet is reviewed regularly, in conjunction with the Ward Representatives Group and as part of this process we value any comments you may wish to make. A Comments and Feedback Sheet is attached at the end of the booklet or alternatively you can bring them to the attention of any member of staff.

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Stockton Hall Hospital is part of the Partnerships in Care independent hospitals group.

Partnerships in Care

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The hospital provides a high quality of care and is regulated by the Care Quality Commission (CQC). Copies of inspection reports are available from:

Care Quality Commission

Care Quality Commission National Correspondence
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Telephone: 03000 616161
<http://www.cqc.org.uk>
Email: enquiries@cqc.org.uk

Stockton Hall Hospital is part of the Quality Network for Forensic Mental Health Services which shares best practice across the mental health community.



Introduction to Stockton Hall Hospital

Stockton Hall Hospital, near York, is a medium secure hospital for adult patients suffering from mental disorders, which may include mental illness, personality disorder or mild to moderate learning disability. Services include assessment, treatment and rehabilitation.

The wards of the hospital are registered as follows but may change temporarily if refurbishment work is required:

Boston, 24 beds, male mental illness

Kirby, 24 beds, male mental illness

Fenton, 8 beds, male learning disability

Farndale, 16 beds, female mental illness and personality disorder

Dalby, 16 beds, male mental illness and personality disorder

Kyme, 16 beds, male learning disability

Registered Manager

Mr Myles Paterson, Regional Executive Director (North East England & Scotland), is registered with the Care Quality Commission as the Registered Manager for Stockton Hall Hospital. He is responsible for ensuring that the hospital complies with all current legislation.

Contacting the Clinical Team

Relatives may speak or write to the relevant multi-disciplinary clinical team and with the patient's permission, may be involved in aspects of patient care.

Valuing Individual Comments about the Hospital

Stockton Hall Hospital is committed to supporting the involvement of patients and their relatives/carers. In order to promote involvement formal systems have been established to encourage representation and participation. Patients and members of staff participate in hospital and regional activities to enhance the services provided. These include:

- Patient Questionnaires

Patient questionnaires are important tools that give patients the opportunity to comment on various aspects of their life at Stockton Hall Hospital.

- Relatives and Carers Questionnaire

This questionnaire is aimed at gaining feedback from relatives/carers about the services that the hospital provides and is managed via our Social Work department. Relatives/carers are also asked to share their views on our Care Programme Approach (CPA) process.

- User Involvement

The hospital is committed to developing a culture of working in partnership with patients. Patients are given the opportunity to share their views on the way that services are provided and become involved in the planning and valuation of services.

- Community Meetings

These are held on each ward on a weekly basis and ensure that the views and concerns of patients are heard and addressed.

- Patients are encouraged and supported to chair or jointly chair community meetings.
- Key professionals from the clinical team regularly attend these meetings.
- Patients can use Community Meetings to discuss all aspects of the ward regime including quality of life issues, ward environment, food and cleanliness.

- Community meetings are held in order to ensure that issues are heard and addressed.
- Information from Community meetings is discussed at the Ward Representatives meetings and at ward based Clinical Governance meetings.

Ward Representatives

Ward Representatives are elected by patients on each ward to represent them. They meet fortnightly with representatives of the Senior Management Team. The group aims to address patient concerns, hospital policy and the organisation of activities and events.

Achievements of the Ward Representatives Group include:

- open access for patients to relevant hospital policies and the opportunity to be involved in their review;
- quarterly meetings with the hospital's Senior Management Team;
- meetings with external reviewers of services, including the Care Quality Commission, the Quality Network for Forensic Mental Health Services and Case Managers;
- involvement in the Catering Working Group to monitor and improve the quality of food and drink;
- participation in the regional conferences and events;
- focus on communication issues so as to maintain contact with relatives and friends;
- assistance in developing questionnaires and clinical audits;
- participation within Clinical Governance meetings;
- organisation of visits to and from other secure units to share information about best practice in user involvement;
- development of the CPA Standards document in consultation with the commissioners and the Involvement Strategy Steering Group;
- ongoing feedback from the ward-based Community meetings;
- organisation of social events within the hospital.

Pre-Admission

Patients should receive verbal and written information about the hospital as part of the pre-admission process including a copy of this booklet.

Patients will be informed about the 'Friendly Face' system (also known as 'buddy' in other services).

Admission Process

On admission to Stockton Hall Hospital the patient will be taken to his/her identified ward and admitted by the patient's identified named nurse/primary nurse. In an ante-room to the ward, the patient will be welcomed and the patient's legal documents checked by a representative from the Mental Health Administration department.

The patient will be interviewed and admitted formally by either the patient's responsible clinician (RC) or the duty doctor should the RC not be available. The responsible clinician will decide, along with the nursing team, the level of observations the patient requires and this will be explained to the patient.

Information will be given by a nurse to the patient on the control of restricted items and property. After checking the patient's understanding of these systems, the patient should have his/her *Rights under the Mental Health Act 1983* read and explained to him/her. The appropriate information leaflet can also be given to the patient. Should the patient not appear to understand his/her rights, this will be documented and another date scheduled to re-read and explain the document and the information contained therein to the patient.

Following a rub-down search, the patient will then be escorted onto the main ward and the admitting nurse will show the patient around the ward environment including their bedroom.

If the patient wants support from the 'Friendly Face', he/she will be introduced to them.

Visiting

While the hospital encourages all patients to have visitors, it also has a duty to balance the rights of individuals to have visitors against a number of health and safety and security responsibilities. With this in mind, there are a number of restrictions to the way in which visits can take place.

Children (under 18) are only allowed to visit **after** the patient's clinical team has given authorisation. Children must not be left unsupervised on hospital premises, including the reception area or car parks. It is the responsibility of parents/carers to ensure that children are supervised at all times. An identified child visiting area is provided in the secure part of the hospital. CCTV is used to monitor child visits in accordance with *Medium Secure Unit Guidelines*.

Child visits are carefully planned through initial contact between the person with parental responsibility and the social worker. For further information please see Child Contact Arrangements on page 12.

For health and safety reasons pregnant visitors, including family members and professionals, are only allowed access into the secure area of the hospital after a risk assessment has been completed.

The hospital would prefer that visits do not interrupt therapeutic sessions. With this in mind weekend visits are often considered to be more suitable. As many visitors have a distance to travel they will need to plan visits in consultation with ward staff. Visitors are requested to **inform the ward of their visit at least 48 hours beforehand**. It is suggested that visitors ring the ward on the morning of their visit to confirm the arrangements.

The hospital operates a visiting policy that enables patients to maintain regular contact with relatives and friends. If they have not visited before the hospital expects to be provided with contact details, including the address and telephone number for every visitor. **All visitors are required to bring either one photographic or two non-photographic proof(s) of identification on their first visit to the hospital.**

Reimbursement of travelling expenses **may** be available, via the relevant ward social worker.

Visitors should note that the hospital uses CCTV in its grounds and in communal areas external to the wards, as well as within certain designated clinical areas, including the child visiting suite. These images are managed in line with the *Data Protection Act* and other relevant guidelines. Please ask if you require any further information.

Smoking

Since 1st July 2007 the hospital has required to be compliant with the *Health Act 2006* and smoking is only permitted in outdoor areas that are specifically designated for this purpose. Smoking is not permitted in the patients' bedrooms or within the ward environment. Non-compliance with this legal requirement may result in a prosecution.

There are no specific smoking facilities for visitors during visits.

Upon Arrival

Visitors should report to the **Security Lodge**, which can be found at the rear of the main car park. Visits are subject to the agreement of the patient and the hospital will support patients refusing visits if they are unwanted or disruptive. The hospital reserves the right to refuse entry to any visitor who does not comply with security arrangements at the hospital or where it is considered that a visit may damage the patient's clinical condition. Further clarification about visiting arrangements can be provided by either nursing staff or the social worker. There is a list of authorised visitors that is updated by the Social Work department.

Emergencies and Health & Safety

If the fire alarm sounds, staff will take control of the situation and visitors will be asked to leave the building they are in. Should visitors suspect a fire, the nearest member of staff should be notified immediately. Patients or visitors are advised not to tackle a fire under any circumstances.

In the unlikely event of an accident or injury, first aid will be available and full details should be reported to the nearest member of staff. Staff will be able to help with concerns or questions visitors have throughout the visit. Please raise any health and safety issues with the most senior member of staff available.

Restricted Items

The following items are **not allowed** in the secure area of the hospital:

- Explosives, matches, cigarette lighters, lighter fuel, flints, butane gas, electronic cigarettes
- Bags of any description
- Glass in any form, ceramic pottery, scissors, needles, nail files or any sharp implements
- Vacuum flasks
- Tools
- Razors (other than electric razors)
- Rope, string, cord, flex, wire
- Alcohol, medicines, drugs (except for asthma sprays/glucose)
- Cameras, photographic equipment, dictaphones, mobile phones
- Laptops
- Pornographic materials
- Glue, blu-tak, sellotape, chewing gum, cling film, plastic bags
- Firearms, toy guns, asps, CS gas, handcuffs, batons, weapons
- Aerosol containers, tinned food, metal drink containers, metal cutlery
- Animals (except pat dogs and animals used as part of occupational therapy)
- Duracell batteries, magnets
- Ipods, MP3/MP4 players, gaming consoles, memory cards, USB sticks

Please note that the hospital makes use of drug detection dogs and metal detectors and any person suspected of trying to bring illicit drugs onto the premises will be reported to the police.

Any CDs, DVDs and videos brought to the hospital will be screened unless they are sealed within their original shrink-wrapping. Before a visit can take place, all visitors intending to pass through the airlock into the clinical areas require to be issued with a visitors badge showing **their photograph and name**.

No bags are permitted through the airlock; any item required for the visit will be checked by security staff to ensure it complies with the Restricted Items list and will be transferred into a clear box. Items not permitted through the airlock must be left in a locker provided.

Photographs and details of the visit will be stored on the hospital's computer system in compliance with data protection legislation.

Visitors who attempt to pass restricted items to patients will be asked to leave the site and future visits may be monitored or suspended.

Child Contact Arrangements

It is important for most patients to stay in regular contact with their relatives and friends. However, the Department of Health has issued guidelines stating that contact between patients within secure units and children must be in the best interests of the child. The clinical team will therefore be required to review **every** contact with children under 18 years of age.

No unauthorised contact with children will be permitted under any circumstances. This includes visits from families to Stockton Hall Hospital as well as contact with children during community or home leave.

Guidance to parents/guardians includes the following:

- The person with parental responsibility will be expected to discuss all proposed contacts with children with the social worker at Stockton Hall Hospital. It is advisable to give at least 4 weeks' notice.
- Only contact that is considered to be in the best interest of the child(ren) will be permitted to go ahead. Advice may be sought from local authority Children's Services.
- Nursing staff or the social worker can provide information about how to arrange child contact.
- Issues relevant to child contact will include the purpose of the contact, the relationship between the patient and the child, the age of the child, potential risks to the child and supervisory arrangements.

- The clinical team, including the responsible clinician for the patient and the social worker, will consider requests for contact and make a decision.
- The social worker will provide information about whether contact can go ahead as soon as possible. An authorisation form will be completed and will be made available on request.
- Child contact within the hospital will only take place in the identified child visiting area.
- Visits are available on Saturday mornings and on Sunday mornings and afternoons. Other days may be considered depending on circumstances.
- It is the responsibility of the parent/guardian to supervise the child throughout contact.
- Another close relative may be permitted to accompany the child provided a request is received in writing from the parent/guardian.
- Throughout child visits to the hospital, patients will be escorted by a minimum of 2 members of staff.
- Staff escorts for child contact in the community will be agreed by the clinical team, including the social worker and the patient's RC.
- In the event of dissatisfaction about the reasons given for the refusal of contact there is a procedure to request a reassessment by contacting the Social Work Manager.

Clinical Staff

A range of clinical staff are employed by the hospital to assess and treat patients as their needs dictate. The clinical teams vary slightly in constitution according to need, but usually include:

- Psychiatrist
- Psychologist
- OT Technical Instructors
- Social Worker
- Teacher
- Activity Organisers
- Occupational Therapist
- Healthcare Workers
- Health and Leisure Instructors
- Registered Nurses

Patients also have access to a number of general health practitioners to meet their physical health needs. These include:

- General Practitioner
- Practice Nurse
- Dentist
- Chiropodist

Other services e.g. dieticians, physiotherapists are provided through York District Hospital and patient catchment area hospitals.

Consultant Psychiatrists/Consultant Forensic Psychiatrists

Consultant Psychiatrists are medical doctors who have specialised in the field of psychiatry. They are all registered with the General Medical Council and are members of the Royal College of Psychiatrists. They work in close liaison with other members of the clinical team and more specifically undertake the following tasks:

- Adopt the legal role of responsible clinician.
- Undertake psychiatric assessments (including diagnostic formulations).
- Provide and monitor psychiatric treatments (this may include the use of medication).
- Participate in multi-disciplinary risk assessments.

- Promote and monitor the physical well-being of patients and make referrals to GPs or general hospitals when required.
- Prepare medical reports for the purpose of Care Programme Approach (CPA) meetings, Hospital Managers' Hearings or Mental Health Tribunals.
- Provide medical recommendations to the courts for patients undergoing court proceedings.
- Liaise with the Ministry of Justice for those patients who are restricted by the Secretary of State.

Registered Nurses

All registered nurses must deliver care within the guidelines of the Code of Practice of their registration body, the Nursing and Midwifery Council.

To justify the trust of our patients, nurses must:

- make the care of people their first concern, treating them as individuals and respecting their dignity;
- work with others to protect and promote the health and wellbeing of those in their care, their families and carers;
- provide a high standard of practice and care at all times;
- be open and honest, act with integrity and uphold the reputation of their profession;
- be accountable for their practice;
- respect people's confidentiality;
- ensure people are informed about how and why information is shared by those who will be providing their care.

Working with patients:

- Nurses must listen to the people in their care and respond to their concerns and preferences.
- Nurses must support people in caring for themselves to improve and maintain their health.
- Nurses must recognise and respect the contribution that people make to their own care and wellbeing.
- Nurses must make arrangements to meet people's language and communication needs as well as ethnic, cultural and spiritual needs.

- Nurses must share with people, in a way they can understand, the information they want or need to know about their health.
- Nurses must ensure that they gain consent before they begin any treatment.
- Nurses must respect and support people's rights to accept or decline treatment and care.
- Nurses must uphold patients' rights to be fully involved in decisions about their care.
- Nurses must be aware of the legislation regarding mental capacity, ensuring that patients who lack capacity remain at the centre of decision making and are fully safeguarded.
- Nurses must be able to demonstrate that they have acted in someone's best interests, if care has been provided in an emergency.

Working with Multi-Disciplinary Teams:

- Nurses must work co-operatively within teams respecting the skills, expertise and contributions of colleagues, willing to share skills and experience for the benefit of patients and colleagues.
- Nurses must provide a high standard of practice and care at all times. This care and advice should be evidence based.

Healthcare Workers

Healthcare workers form part of the nursing team, supporting and assisting the qualified nurse by providing 24 hour nursing care to patients. Key elements of the healthcare worker role are:

- To act as an associate worker within an allocated case load of patients under the supervision of a qualified nurse. They have an understanding of the risk assessment/management process and are able to implement nursing care/management plans under the guidance of a qualified nurse.
- To act in a manner that at all times promotes professionalism within the nursing department, including being a role model for patients.

Social Workers

Patients will be allocated a social worker on admission to the hospital. Social workers are registered with the Health and Care Professions Council and adhere to its Code of Practice. Social workers provide the following:

- Assessment of all patients.
- Involvement in the Multi Disciplinary Teams.
- Promotion of culturally sensitive practices and policies.
- Participation in CPA reviews.
- Support to families and friends and user involvement.
- Arrangements for contact between patients and children.
- Arrangements to ensure that child protection issues are addressed.
- Appropriate Adult role for patients in police interviews.
- Lead role for Safeguarding Adult alerts and referrals.
- Involvement in Safeguarding Adults investigations.
- Support in housing, benefits and financial circumstances.
- Links with the Advocacy Service.
- Assistance for patients to gain legal representation.
- Provision of written and verbal evidence to Mental Health Tribunals.
- Reports and attendance for Hospital Managers' Hearings.
- Transfer and discharge planning.
- Management of the complaints department.
- Support to hospital managers (see page 32).

Psychologists

Psychologists promote the psychological understanding and well-being of patients by:

- working within clinical teams, and being involved in:
 - care planning
 - development of treatment pathways
 - clinical team meetings
 - clinical governance
 - managing safeguarding issues
- using structured assessment tools to gain a greater understanding of patients':
 - psychological treatment needs
 - level of risk

- cognitive functioning
 - personality
- helping patients to formulate their problems and difficulties by:
 - understanding past experiences
 - identifying events that have influenced their development
- designing individualised psychological treatment plans which consider patients':
 - emotional well-being
 - thinking skills
 - offending and problem behaviours
 - future development
- undertaking psychological therapies and programmes:
 - individually, using different treatment models depending upon individuals' needs
 - in groups, in order to broaden understanding by working with other patients
- providing verbal and written feedback to:
 - individual patients
 - tribunals
 - other professionals involved in patients' care
 - Care Programme Approach (CPA) review meetings

All psychologists have a professional duty to maintain high standards of care in accordance with the British Psychological Society and Health and Care Professions Council Codes of Practice.

Occupational Therapists

All occupational therapists are registered with the Health and Care Professions Council and have a duty to maintain high standards of care in accordance with guidelines from the College of Occupational Therapy.

Occupational therapists (OT) are members of the ward-based clinical team and there is an allocated OT and an activity organiser on each ward. There are a number of technical instructors who run the workshops.

The OT undertakes the following:

- Assessment of the individual in maintaining their current levels of independence and functioning.

- Provides the individual with opportunities to enhance and develop their skills and occupational potential.
- Actively contributes to the process of risk assessment and management.
- Contributes to CPA meetings and process.

Care and Treatment as a Patient at Stockton Hall Hospital

Patients have the right to receive clear information about any proposed treatment, including any risks involved in that treatment, and any alternatives that may be available.

Patients are able to ask for an explanation of their diagnosis in plain language and to ask for more information if they do not understand the explanation.

Patients can expect to be told about any drugs that they are prescribed, including possible side effects and what treatments are available other than medication. Information leaflets are also available.

Patients can expect to be treated and cared for in the least restrictive environment appropriate to their needs. The hospital is responsible to work with patients on their care pathways.

Clinical teams work with patients to assess their needs, taking into account their views. Patients can have a relative, friend or other person present to support them or speak on their behalf. Patients can also expect assistance with communication such as interpreter services.

Ethnicity

The hospital seeks to comply with legislation and good practice guidelines to ensure that no-one experiences discrimination on the grounds of race. Hospital policies and procedures promote racial equality. Patients can expect to be consulted about their cultural, religious and physical needs.

Gender

The hospital has one unit dedicated to the care of women patients; the other wards are male only. For the purpose of courtyard access within

the secure area there are female only and male only times in order to meet the needs of specific patients.

Religious Needs

The hospital will ensure that the religious and spiritual needs of patients are met in an appropriate and sensitive manner. The hospital is committed to promoting these needs for all patients, recognising their diversity and human rights.

There is a multi-faith room that can be used for religious ceremonies and for personal contemplation. A multi-denominational service is also held on Thursday afternoons. Patients may make use of the local church and other places of worship with the permission of their clinical team.

The multi-faith room can be used for the following purposes:

- Religious services and celebrations.
- Spiritual contemplation for individuals or small groups.
- Prayer or quiet reflection during times of personal difficulties.
- Access to religious books.
- Discussions with the hospital chaplain or representatives from other religions.

Victim Issues

Victims of crimes committed by mentally disordered offenders have been given specific rights to be consulted at key stages of patients' progress in hospital. Under the *Domestic Violence, Crime and Victims Act 2004* and the *Mental Health Amendment Act 2007*, victims may be asked for impact statements, for instance following applications for a Mental Health Tribunal or when community leave under Section 17 of the *Mental Health Act 1983* is being considered. The Multi-Agency Public Protection Arrangements (MAPPA) also assists in monitoring patients' progress whilst they are in hospital and after they are discharged back to the community. The hospital social workers are available to provide information to patients and their families.

Life on the Ward

Letters and Telephone Calls

There is a daily postal delivery and collection on every ward and patients can buy stamps on site. Members of staff are available to help patients write letters. Patients have access to payphones and are able to receive incoming calls. Patients are also given access to free telephone calls on a weekly basis. Only hospital approved mobile phones are permitted in clinical areas of the site.

Patients' Benefits

Most patients are entitled to receive benefits from the Department for Work and Pensions. There may be some initial delay when patients are first admitted to the hospital, but we are able to provide a temporary (repayable) allowance until their money has been received. Staff can provide further advice on this issue if required.

Valuables and Property

Valuable items and money should be handed in for safekeeping to the nurse in charge of the ward. A receipt will be issued for any such item. The hospital does not accept responsibility for any items **not** handed in.

Clothing and Laundry

Laundry services are provided free of charge to all patients. Clothes need to be clearly labelled to prevent loss and the hospital cannot accept responsibility for any loss or damage. However, each ward has its own laundry facilities and patients are encouraged to take responsibility for their own clothes. A dryer and ironing facilities are also available.

Hairdressing Services

Hairdressing services are available to all patients and are charged at £10 for male patients and £20 for female patients.

Food and Drink

The catering department provides a balanced menu using fresh ingredients wherever possible. The hospital is committed to working with patients in order to provide a well-balanced and nutritious diet. Catering issues will be continually reviewed through the hospital's Catering Working group and the Ward Representatives' Group.

Dietary Needs

A wide range of dietary needs are catered for at the hospital. Special diets include vegetarian, low fat and high fibre. These are arranged between the patient, nursing staff and the catering department. Regular feedback is provided by patients who participate in discussions about improving the quality of food and drink that is provided by the hospital.

Electronic Equipment

Many patients have electronic equipment (such as televisions) in their rooms. For reasons of electrical safety, the number of items within rooms is limited, dependent on the loading (power rating) of the appliance. Due to the practicalities of space within bedrooms, televisions are limited in size to 32 inches. On receipt of a new TV, patients are responsible for the disposal of their old TVs. We recommend any high value items are stored in our safe and that patients take out insurance cover for such items.

All electronic items undergo Portable Appliance Testing by the maintenance department at the hospital before they are permitted to be taken onto the wards.

Patient Facilities

The hospital provides a range of services to extend, maintain or develop patients' skills and/or interests. These services are accessed following an assessment by an occupational therapist and include:

- Swimming Pool
- Multi Gymnasium
- Cooking
- Woodwork
- Computers
- Art
- Animal Care
- Education
- Music studio/recording
- Gardening

In addition to these services there are ward-based activities that may be carried out by an activity organiser and/or nursing staff. These activities are varied in nature and do not require a referral. Each ward has its own TV lounge and dining room that can be used for these purposes.

There is a strong programme of vocational skills training and real work opportunities for those patients who are interested in developing their work skills and work experience. Real work opportunities include working in the hospital shop and café for specific periods of time. The service is currently exploring options of extending work placements into the community for future development.

Health and Leisure Services

The health and leisure facilities consist of a fully equipped multi-gym, sports hall and heated swimming pool. The health and leisure programme provides individual and group health, leisure and fitness activities, including 5-a-side football, rollerblading and circuit training. Qualified instructors provide exercise programmes to meet the assessed needs of all patients.

Treatment Group Programme

Patients are referred to the treatment groups depending on what their individual treatment needs are and how well they are. These groups are run by a range of staff from across all the health care groups. The clinical team will discuss the patient's potential referral to these groups and where these fit on their treatment pathway.

Interpreter Services

All patients for whom English is not their first language, or who require assistance with communication, have the right to use an interpreter service. There is a particular need to be able to communicate with solicitors for Mental Health Tribunals and with staff at Care Programme Approach (CPA) reviews.

In the event of patients or their relatives/carers experiencing problems with speaking or understanding English the Social Work department will provide assistance in acquiring interpreter and translator services.

Advocacy Service

In accordance with the *Mental Health Act Amendment Act 2007* all detained patients have the statutory right to receive the support of an Independent Mental Health Advocate (IMHA). PIC has commissioned Rethink Mental Illness, to provide patients with an IMHA. Hospital staff will inform patients of their right to see an IMHA. There are also leaflets and posters available on the wards to advertise the IMHA service. The role of an IMHA is to provide information about patients' rights under the *Act*, the rights of people such as nearest relatives, the particular parts of the *Act* that apply to the patient including conditions or restrictions that may apply and any medical treatment they are receiving and the reason for this treatment. Rights vary according to which section a patient is detained under and is dependent on the advocate having access to this information.

The advocacy service is a free independent service which provides:

- support to patients in finding information and exploring options;
- support to patients at meetings and appointments such as Mental Health Review Tribunals, Hospital Managers' Hearings and CPA reviews;
- support to patients to express their views and wishes.

The kinds of things that Rethink advocates help with are:

- issues relating to care or treatment;
- raising concerns and/or making a complaint;
- accessing patient records;
- patients' legal rights and understanding these;
- information about mental health.

The Rethink advocates can be contacted on 01904 400500 by requesting extension number 325. The service is available Monday to Thursday, 9am to 5pm and 9am to 12:30pm on Fridays. The service operates a 24 hour answer phone which will be responded to when the advocates are next in the hospital. The service has two advocates, a male and female who work across the wards, and requests for a particular advocate will be considered according to working patterns.

Please telephone if you would like to talk to someone about the advocacy service.

Safeguarding Adults

The hospital is responsible for ensuring that patients are protected from significant harm. Reports and incidents will always be thoroughly investigated. Patients must be kept safe at all times and therefore effective action will be taken to protect them from abuse and neglect. We will co-operate with the agencies covered by the City of York Safeguarding Adults Board in cooperation with the Local Authority Adult Services Safeguarding Adults Team. The hospital will fully implement any actions that are required including the following:

- Training for clinical and non-clinical staff.
- Investigating allegations of abuse and neglect.
- Supporting external agencies in investigating allegations.
- Identifying safeguarding adult issues while undertaking internal complaints.
- Providing relevant information to patients and their relatives/carers.
- Informing the police of evidence that criminal behaviour has occurred.
- Ensuring that external monitoring and regulatory bodies are notified.

Anti-Bullying

Stockton Hall Hospital is committed to managing patient-to-patient bullying. Those involved in bullying either as bullies, victims or both are dealt with sensitively and supported and managed throughout. All staff and patients are aware the hospital has an anti-bullying policy, with staff receiving regular training on how to implement the policy and support patients through any incidents of bullying.

Patients are advised never to deal with bullying on their own and to always inform nursing staff who will deal with it on their behalf. There is a staff member available on all wards who can be approached with regards to any issues of bullying. Staff will put a plan in place to ensure the patient's safety and consult with the patient about any safeguarding concerns. All bullying concerns will be treated with respect and confidentiality.

Police Liaison

The hospital will not tolerate criminal behaviour towards patients, visitors and members of staff. Therefore, Stockton Hall Hospital has a policy clearly stating that “the alleged victim has an absolute right to make a complaint to the police”. This applies to patients, visitors and staff. The hospital also has reporting arrangements that have been agreed with the police. Evidence gathered regarding allegations is always treated with the strictest confidentiality. To this end we liaise with North Yorkshire Police and the Crown Prosecution Service to have reported crimes investigated. The hospital is committed to the following:

- Patients have the right to have criminal behaviour toward them fully investigated.
- Reports of criminal offences committed by members of staff towards patients will be investigated without prejudice.
- Patients and members of staff have the right to the same protection from criminal behaviour as the general public.

Feeling Good About Yourself

Living in Stockton Hall Hospital provides the opportunity for patients to review their lifestyle and what they want from their future. Improving their physical health and feeling good about themselves may help to improve their mental health.

While at Stockton Hall Hospital staff will encourage patients to:

- care for themselves;
- give up smoking;
- eat well and offer them healthy choices from the menus;
- take regular exercise and make full use of the leisure facilities.

Contact with Relatives and Friends

Throughout their stay at Stockton Hall Hospital, patients will usually be encouraged to maintain contact with people who are significant in their

lives. The allocated social worker will speak to patients about contacting their relatives within the first week of admission.

A home visit will usually be arranged in order for the social worker to meet with relatives and/or close friends. Regular telephone contact with relatives and close friends can be maintained by using the payphone on the ward. Each patient is given 30 minutes per week free access to the ward telephone to assist in maintaining this contact.

The Social Work department may be able to assist with travelling expenses for relatives/carers and friends who wish to visit the hospital, if this is helpful to the patient. Relatives/carers will be invited to attend Care Programme Approach Reviews and Mental Health Tribunals, with the consent of the patient.

Healthy Eating

Stockton Hall Hospital promotes healthy eating for patients, staff and visitors. If you are visiting a friend or relative at Stockton Hall Hospital please be discouraged from bringing in sweets, chocolate, biscuits, cakes etc. as these could contribute to unnecessary weight gain. Under current guidelines visitors are not permitted to bring drinks into the hospital. Any perishable foods brought in must be consumed on the day.

There are also restrictions on the reheating of food as the hospital cannot accept responsibility for patients and non-catering staff reheating food to the correct temperature as recommended within food safety legislation.

Legal Rights under the Mental Health Act 1983

The *Mental Health Act (MHA)* establishes the rules about compulsory detention and provides safeguards to protect patients' civil and legal rights. The *Act* includes 'civil' sections such as Section 2 and Section 3 and Criminal Justice sections such as Sections 36, 37, 38, 37/41, 47, 47/49, 45a and 48/49. All patients at Stockton Hall Hospital are admitted under a section of the *Act*.

On admission, patients will be given a leaflet explaining the duties of the hospital and their rights. Patients also have the right to see a copy of the

Code of Practice, which contains guidance to the staff looking after them and information about their care and treatment under the *Mental Health Act*.

The responsible clinician and other members of the clinical team must always keep patients informed and seek their agreement about their care and treatment needs, although responsible clinicians are empowered to give treatment without consent providing certain legal safeguards are followed.

While detained in hospital, all patients have the right to:

- receive factual and accurate information about detention in the hospital, which will be provided by the allocated nurse;
- legal representation by a solicitor chosen by the patient, which is usually free of charge. A list of solicitors is available on the ward, via the Mental Health Administration department or the social worker;
- appeal to the hospital managers (see below) for discharge from detention;
- make an application for a Mental Health Tribunal to be discharged from hospital for which legal representation will be provided;
- be interviewed by members of the Care Quality Commission when they visit the hospital. They are able to see patients in private;
- request leave out of the hospital at the discretion of the responsible clinician under Section 17 of the *Mental Health Act*;
- make a complaint about care and treatment (see Complaints information, page 38);
- make a complaint about care and treatment to the Complaints Officer at the hospital;
- see a copy of *Mental Health Act Code of Practice*.

Further information on any of these issues can be obtained from the ward staff.

Associate Hospital Managers

The role of the Associate Hospital Managers is to ensure patient's rights are maintained within the terms of the Mental Health Act. They are independent of Stockton Hall Hospital but have a delegated responsibility from the Regional Executive Director of the hospital to hear both reviews of patients' detentions and appeals against detention.

Associate Hospital Managers can help with the following:

- They can challenge the responsible clinician's decision to renew the patient's detention (if the patient is detained under Sections 2, 3 or 37 of the Mental Health Act).
- They have the power to discharge the patient if they consider it appropriate (if the patient is detained under Sections 2, 3 or 37 of the Mental Health Act).
- Restricted patients have the right to appeal to the Associate Hospital Managers however their discharge must also be agreed by the Ministry of Justice.

Patients can appeal to the Associate Hospital Managers by writing to them:

☞ The Mental Health Act Office, Stockton Hall Hospital

Care Programme Approach

The Care Programme Approach (CPA) encourages health authorities, social services and care providers to work together, to ensure that the needs of patients are thoroughly assessed and the agencies involved and the clinical team agree upon treatment. Discharge and aftercare must be adequately planned and effectively provided and for those returning to the community is managed via CPA and Section 117 of the *Mental Health Act 1983*.

Partnerships in Care CPA documentation is completed for all patients. The CPA Standards document is adhered to in accordance with the NHS Contract in order for patients to have an active role throughout the CPA process.

How Care Programme Approach Affects the Patient

- When patients are admitted they are allocated a responsible clinician who ensures that patients are able to actively participate throughout.
- An Initial CPA review is arranged within 3 months of admission and provides an opportunity to assess the patient's progress. External agencies, including the referrers, are invited to attend this important meeting to develop the care plan and set further goals. Relatives and friends may also attend all CPA reviews, with agreement of the patient.
- Thereafter, future CPA reviews can take place depending on the needs of individual patients, but at a minimum once every 6 months. The same people are invited who attended the initial review along with anyone else felt relevant.
- At each CPA review the patient's named nurse will help with the completion of the self assessment form that will contribute to the care plan. In this way the named nurse will assist patients to explore their strengths and try to overcome any problems that have been identified.
- Professionals must provide access to their written reports at the earliest opportunity, and at least 1 week prior to CPA reviews, to ensure the pack is complete in time for the meeting.

- It is the responsibility of professionals who have written reports to endeavour to attend CPA reviews.
- A CPA questionnaire is available for patients to provide feedback regarding their review meetings.

The *CPA Standards for User Involvement* ensure that the patient is included in all parts of his/her CPA meeting from selecting the venue for the meeting to agreeing who will be invited and the topics to be discussed. The patient will be involved in writing the reports and is given the opportunity to present his/her own views. Plans of action will be discussed and agreed at the end of the meeting and the patient will have the chance to add to or amend the report.

All reports will be written clearly and in straightforward language and all those attending the CPA meeting will be respectful of each other and their roles.

Copies of the *Service User Defined CPA Standards* can be obtained from the Social Work department within the hospital. A CPA standards DVD, filmed at Stockton Hall Hospital in 2011, is available for training purposes.

Recovery

The key principles and values of the recovery approach inform all areas of clinical practice throughout the patient's stay at Stockton Hall Hospital.

What is Recovery?

- Recovery is about building a meaningful and satisfying life, as defined by the person themselves.
- Recovery is about discovering – or re-discovering a sense of personal identity, separate from illness/disability.
- Recovery involves personal development and change, including acceptance that there are problems to face. It requires a sense of involvement and control over one's life, hope, choice, an element of control and accepting the support from others.

- It involves working collaboratively in solution-focused work with the person, informal carers and professional workers.
- Recovery tools are available such as My Shared Pathway and Recovery Star.

Transfer and Discharge from the Hospital

Patients will only remain at Stockton Hall Hospital while it is considered that they require care and treatment in conditions of medium security. When they are ready to be transferred to lower security or discharged to the community, the hospital has responsibilities under the *Mental Health Act* to ensure that the arrangements are effectively co-ordinated. The hospital has no power to order the transfer or discharge of a restricted patient - this may only be done by the Ministry of Justice or a tribunal.

- Patients will be consulted to ensure that their views are taken into account.
- Referrers must be involved in all the important decisions such as where patients will be placed and the support they will require.
- The responsible clinician at Stockton Hall Hospital must ensure that the arrangements are effectively planned.
- The social worker will provide information to relatives and friends and keep them informed and involved in the process, with the agreement of the patient.
- The clinical team at Stockton Hall Hospital will work in partnership with other agencies such as the Ministry of Justice, Probation, Social Services, local health providers and commissioning teams to avoid unnecessary delays in arranging for the transfer or discharge of patients.
- Patients will be kept informed of progress and encouraged to actively participate throughout the process.

- If patients are being transferred to another hospital, ongoing treatment and care will be handed over at a Care Programme Approach review meeting.
- Patients may be discharged by a Mental Health Tribunal. It is the responsibility of the clinical team, in liaison with the referrers, to fulfil the arrangements involved at the earliest opportunity. Patients who are not restricted can be discharged by the tribunal, the responsible clinician or the hospital managers.

If patients are being discharged to the community, there is a requirement for a Section 117 (discharge and aftercare) meeting to be held before they leave Stockton Hall Hospital. This will include:

- the patient's needs and how they are to be best fulfilled;
- details of who is to be the community doctor and who will provide any social care that is required;
- supervision in the community;
- activities including employment and day care;
- how long it will take to establish the discharge arrangements.

Further information on any of these issues can be obtained from the ward staff and the social worker.

Records about the Patient's Stay and Treatment

Like all hospitals, Stockton Hall keeps electronic records and some paper records to help with patient care and treatment. However as from early 2012, Stockton Hall now records the majority of patient information in the form of electronic records stored on a specialist mental health database system. All the records are kept secure and confidential, in line with current data protection legislation.

Under the *Data Protection Act 1998* patients are entitled to request access to the records that the hospital keeps. The law also allows professionals or people acting on behalf of the patient to have access to these records.

The responsible clinician and other members of the clinical team have the right to withhold any information, which may be considered harmful to the patient. If patients would like further information about their rights to see the records, they should ask the charge nurse.

Complaints

Stockton Hall Hospital strives to offer the highest quality of care and service to all our patients, their carers and all other stakeholders. We recognise the importance of providing high quality care to people who at this point in their lives are relying on us to provide support and stability. It is a great disappointment to us if a complaint is made about any aspect of our work.

- If patients have concerns they should speak to the Charge Nurse, who may deal with the matter at ward level. If the patient wishes, they can make a formal complaint to the Complaints Officer. They can do this independently or with the help of a member of staff or advocate.
- The complaints department may report allegations of ill treatment in accordance with the hospital's *Safeguarding Adults* policy.
- The Complaints Officer will then investigate all aspects of the complaint as thoroughly and as quickly as possible and the patient will receive full details of the outcome of the investigation within 25 working days.
- Once the complaint has been investigated patients will receive a letter detailing the outcome of the investigation. If they are not satisfied with the outcome then they have the right to pursue the internal appeals process and complain to the Director of Policy and Regulation for Partnerships in Care. Patients or their representatives also have the right to raise the matter direct with the Parliamentary and Health Service Ombudsman without first going through the company's internal appeal process. They should not, however, use both appeal processes at the same time.
- Patients also have the right to ask the Care Quality Commission to help them if they have a complaint about treatment under the *Mental Health Act*.
- If patients, relatives or friends wish to find out more about the complaints procedure, they should speak to the Charge Nurse or the Complaints Officer who will provide advice and support.

Our Business Standards

Stockton Hall Hospital is a private, profit-making concern, managed by Partnerships in Care Ltd, in which some senior members of staff may have a small shareholding. Please be assured that the hospital operates to the highest of ethical standards.

All patient management decisions are taken on the basis of patient need and in accordance with our legal and moral responsibilities to protect both the patient and the public. Every patient has various options if they wish to seek their discharge, to query clinical actions or to make complaints, and these are explained elsewhere in this booklet.

Sources of information:

<http://www.partnershipsincare.co.uk> Information about the company.

<http://www.mind.org.uk> A campaigning mental health charity. The website has news and useful information about treatments.

<http://www.mentalhealthcare.org.uk> Mental health information for friends, family and carers.

<http://www.carers.org> The Princess Royal Trust for Carers.

<http://www.mentalhealth.org.uk> The Mental Health Foundation is a leading UK charity that provides information, carries out research, campaigns and works to improve services for anyone affected by mental health problems.

<http://www.rethink.org> The charity for those affected by severe mental disorder. The website has information leaflets, webchats and information about local support groups.

<http://www.dh.gov.uk> The Department of Health website aimed at professionals but containing accessible information in the mental health section.

<http://www.MHRT.org.uk> How the Mental Health Tribunal appeal system works.

<http://rcpsych.ac.uk> The Royal College of Psychiatry. The website contains helpful information on mental illnesses.

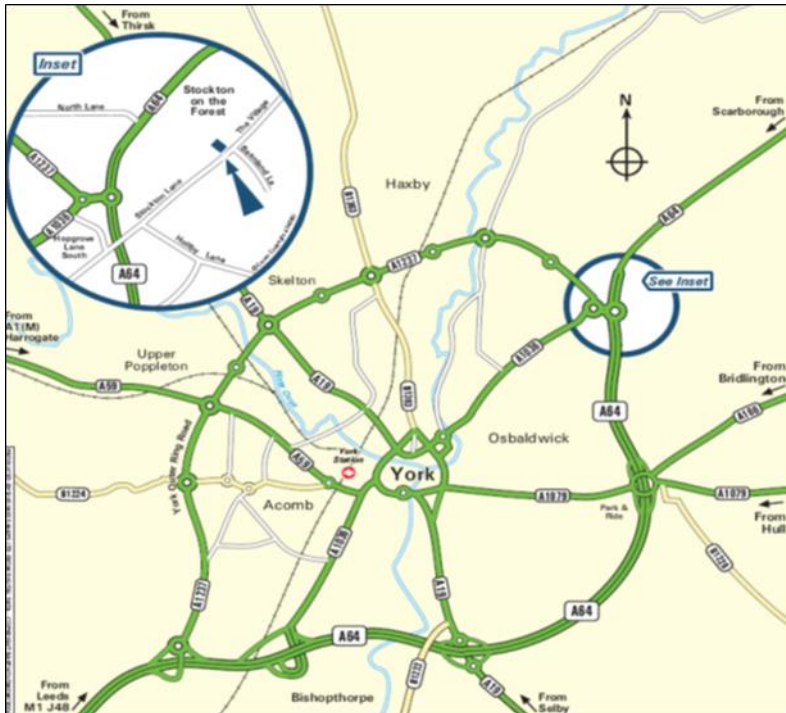
<http://www.direct.gov.uk> .

<http://www.nhsdirect.nhs.uk>

The sites all have good links if you want to widen your research. Let us know if you find anything particularly useful so we can pass it on to others. The Social Work department is happy to help you find what you need if you don't use the Internet.

**Stockton Hall
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The Village
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York YO32 9UN

Tel: 01904 400500
Fax: 01904 400354
Email: stockton.hall@partnershipsincare.co.uk



From the East, West and South (A166, A1079, A19 & A1)

Join the A64, head right (towards Scarborough), stay on the A64 (ignoring directions into York city centre) until you reach a large roundabout sign-posted Scarborough. Take the first exit and after 50 metres, you reach another smaller roundabout, again take the first exit (signposted A1036 York Centre).

From the North (A19, A59)

Join the A1237 and turn left (towards Scarborough). Pass over all roundabouts until you reach the roundabout sign-posted A1036 York Centre (second exit).

All Routes

From this roundabout, after 50 metres, turn left immediately before the Stockton on the Forest Inn/ Holiday Inn into Hopgrove Lane South. Continue along this road until you reach the next T-junction. Turn left towards Stockton on the Forest 1 mile, (the A64 passes beneath you), and proceed past Dean's Garden centre and the Forest Park Golf Course (both on your left). Entering the village, Stockton Hall Hospital is a couple of hundred metres on your left. Please report to one of the reception areas either at the Main Hall or Security Lodge as appropriate.

By Train

York Railway station is a 15 minute taxi ride from Stockton Hall.

By Bus

Bus service Coastliner is available outside the train station, which runs from York to Scarborough and stops directly outside the hospital.