Tees, Esk and Wear Valleys
NHS Foundation Trust

Our latest CQC core service and well-led inspection 2023

Partner briefing

Respect Compassion Responsibility

journey to change

Our CQC core service and well-led inspection 2023

Tees, Esk and Wear Valleys NHS Foundation Trust

Where the CQC visited

- Acute adult mental health wards and psychiatric intensive care wards (13 wards across our trust)
- Mental health services for older people wards (10 wards across our trust)
- Adult learning disability wards and day service (3 teams across our trust)
- Community adult learning disability teams (9 teams across our trust)
- Community adult mental health teams (18 teams across our trust)
- Secure inpatient services (13 wards across our trust)

Previous CQC ratings – December 2021

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Are services

Safe?	Requires improvement
Effective?	Good
Caring?	Good
Responsive?	Requires improvement
Well-led?	Requires improvement

	Safe	Effective	Caring	Responsive	Well-led	Overall
Specialist eating disorders service	Requires Improvement	Outstanding ☆	Good	Good	Good	Good
Specialist community mental health services for children and young people	Requires Improvement	Good	Good	Requires Improvement	Requires Improvement	Requires Improvement
Community mental health services with learning disabilities or autism	Good	Requires Improvement	Outstanding ☆	Good	Good	Good
Community-based mental health services for older people	Good	Good	Good	Good	Good	Good
Mental health crisis services and health-based places of safety	Good	Good	Good	Good	Good	Good
Wards for people with a learning disability or autism	Inadequate	Inadequate	Requires Improvement	Requires Improvement	Inadequate	Inadequate
Forensic inpatient or secure wards	Inadequate	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement
Long stay or rehabilitation mental health wards for working age adults	Requires Improvement	Good	Good	Good	Good	Good
Wards for older people with mental health problems	Requires Improvement	Good	Good	Good	Requires Improvement	Requires Improvement
Acute wards for adults of working age and psychiatric intensive care units	Requires Improvement	Good	Good	Good	Requires Improvement	Requires Improvement
Community-based mental health services for adults of working age	Good	Good	Good	Requires Improvement	Requires Improvement	Requires Improvement

CQC ratings - comparison

Tees, Esk and Wear Valleys NHS Foundation Trust

Dec 2021

	Safe	Effective	Caring	Responsive	Well-led	Overall
Specialist eating disorders service	Requires Improvement	Outstanding ☆	Good	Good	Good	Good
Specialist community mental health services for children and young people	Requires Improvement	Good	Good	Requires Improvement	Requires Improvement	Requires Improvement
Community mental health services with learning disabilities or autism	Good	Requires Improvement	Outstanding ☆	Good	Good	Good
Community-based mental health services for older people	Good	Good	Good	Good	Good	Good
Mental health crisis services and health-based places of safety	Good	Good	Good	Good	Good	Good
Wards for people with a learning disability or autism	Inadequate	Inadequate	Requires Improvement	Requires Improvement	Inadequate	Inadequate
Forensic inpatient or secure wards	Inadequate	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement	Requires Improvement
Long stay or rehabilitation mental health wards for working age adults	Requires Improvement	Good	Good	Good	Good	Good
Wards for older people with mental health problems	Requires Improvement	Good	Good	Good	Requires Improvement	Requires Improvement
Acute wards for adults of working age and psychiatric intensive care units	Requires Improvement	Good	Good	Good	Requires Improvement	Requires Improvement
Community-based mental health services for adults of working age	Good	Good	Good	Requires Improvement	Requires Improvement	Requires Improvement

Oct 2023

	Safe	Effective	Caring	Responsive	Well-led	Overall
Acute wards for adults of working age and psychiatric intensive care units	Requires Improvement →← Oct 2023	Good →← Oct 2023	Good →← Oct 2023	Good →← Oct 2023	Requires Improvement →← Oct 2023	Requires Improvement →← Oct 2023
Community-based mental health services of adults of working age	Requires Improvement ↓ Oct 2023	Good →← Oct 2023	Good →← Oct 2023	Requires Improvement →← Oct 2023	Good ↑ Oct 2023	Requires Improvement →← Oct 2023
Wards for older people with mental health problems	Requires Improvement →← Oct 2023	Good →← Oct 2023	Good →← Oct 2023	Good →← Oct 2023	Good ↑ Oct 2023	Good ↑ Oct 2023
Long stay or rehabilitation mental health wards for working age adults	Requires improvement Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020
Community mental health services for people with a learning disability or autism	Requires Improvement ↓ Oct 2023	Good ↑ Oct 2023	Good ↓ Oct 2023	Good →← Oct 2023	Good →← Oct 2023	Good →← Oct 2023
Forensic inpatient or secure wards	Requires Improvement ↑ Oct 2023	Good ↑ Oct 2023	Good ↑ Oct 2023	Good ↑ Oct 2023	Good ↑ Oct 2023	Good ↑ Oct 2023
Specialist community mental health services for children and young people	Requires improvement Sep 2022	Good Dec 2021	Good Dec 2021	Requires improvement Dec 2021	Requires improvement Dec 2021	Requires improvement Sep 2022
Community-based mental health services for older people	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020
Wards for people with a learning disability or autism	Requires Improvement ↑ Oct 2023	Requires Improvement ↑ Oct 2023	Good ↑ Oct 2023	Requires Improvement →← Oct 2023	Requires Improvement ↑ Oct 2023	Requires Improvement ↑ Oct 2023
Specialist eating disorders service	Requires improvement Mar 2020	Outstanding Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020
Mental health crisis services and health-based places of safety	Good Dec 2021	Good Dec 2021	Good Dec 2021	Good Dec 2021	Good Dec 2021	Good Dec 2021

Our CQC core service and well-led inspection 2023

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	Safe	Effective	Caring	Responsive	Well-led	Overall
Acute wards for adults of working age and psychiatric intensive care units	Requires Improvement → Oct 2023	Good → Oct 2023	Good → Oct 2023	Good → Oct 2023	Requires Improvement → Oct 2023	Requires Improvement → Oct 2023
Community-based mental health services of adults of working age	Requires Improvement ↓ Oct 2023	Good → Oct 2023	Good → Oct 2023	Requires Improvement → Oct 2023	Good ↑ Oct 2023	Requires Improvement → Oct 2023
Wards for older people with mental health problems	Requires Improvement → Oct 2023	Good → Oct 2023	Good → Oct 2023	Good → Oct 2023	Good ↑ Oct 2023	Good ↑ Oct 2023
Long stay or rehabilitation mental health wards for working age adults	Requires improvement Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020
Community mental health services for people with a learning disability or autism	Requires Improvement ↓ Oct 2023	Good ↑ Oct 2023	Good ↓ Oct 2023	Good → Oct 2023	Good → Oct 2023	Good → Oct 2023
Forensic inpatient or secure wards	Requires Improvement ↑ Oct 2023	Good ↑ Oct 2023	Good ↑ Oct 2023	Good ↑ Oct 2023	Good ↑ Oct 2023	Good ↑ Oct 2023
Specialist community mental health services for children and young people	Requires improvement Sep 2022	Good Dec 2021	Good Dec 2021	Requires improvement Dec 2021	Requires improvement Dec 2021	Requires improvement Sep 2022
Community-based mental health services for older people	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020
Wards for people with a learning disability or autism	Requires Improvement ↑ Oct 2023	Requires Improvement ↑ Oct 2023	Good ↑ Oct 2023	Requires Improvement → Oct 2023	Requires Improvement ↑ Oct 2023	Requires Improvement ↑ Oct 2023
Specialist eating disorders service	Requires improvement Mar 2020	Outstanding Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020	Good Mar 2020
Mental health crisis services and health-based places of safety	Good Dec 2021	Good Dec 2021	Good Dec 2021	Good Dec 2021	Good Dec 2021	Good Dec 2021

Of the 6 Core Services inspected:

- **3** Overall Core Service ratings have improved (MHSOP, ALD Inpatient, and Secure Inpatient Services)
- **3** Overall Core Service ratings have remained the same (AMH Acute and PICU, AMH Community and ALD Community)
- There have been **12** CQC domains across the core services inspected that have improved, **15** which have remained the same, **10** are good, and **3** where the rating has decreased.

Our CQC core service and well-led inspection 2023

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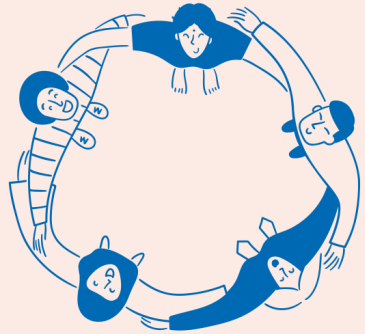
Key facts and figures

- Seven out of 11 of our services are rated ‘good’. Four areas are rated as ‘requires improvement’. This is an improvement since our last inspection in 2021.
- All services were rated ‘good’ for caring.
- Nine out of 11 services were rated ‘good’ or ‘outstanding’ for effective.
- No warning notices were served as a result of the inspection.
- No services were rated ‘inadequate’.



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Positives

- Clear vision and strategic direction, that staff understood.
- Staff demonstrated the trust's values in the care they provided.
- Positive changes in leadership and culture.
- Continued good engagement with staff, stakeholders and partners.
- Innovative practice.
- Person-centred care.
- Multi-disciplinary working.
- Environmental changes.
- Medication management.
- Risk management.
- Governance.

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Areas for improvement

- Serious Incident processes including Duty of Candour.
- Staffing.
- Mandatory/Statutory Training.
- Waiting times.
- Complaints/PALs compliance.
- Supervision.
- Physical health monitoring.

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Must and should do actions

Must do actions

- Community mental health services with learning disabilities or autism = 1
- Wards for people with a learning disability or autism = 6
- Acute wards for adults of working age and psychiatric intensive care units = 5
- Community-based mental health services for adults of working age = 2
- Wards for older people with mental health problems = 1
- Secure inpatient services = 6
- Trust-wide = 17

Total 38

Should do actions

- Community mental health services with learning disabilities or autism = 3
- Wards for people with a learning disability or autism = 7
- Acute wards for adults of working age and psychiatric intensive care units = 7
- Community-based mental health services for adults of working age = 3
- Wards for older people with mental health problems = 6
- Secure inpatient services = 16
- Trust-wide = 14

Total 56

Summary

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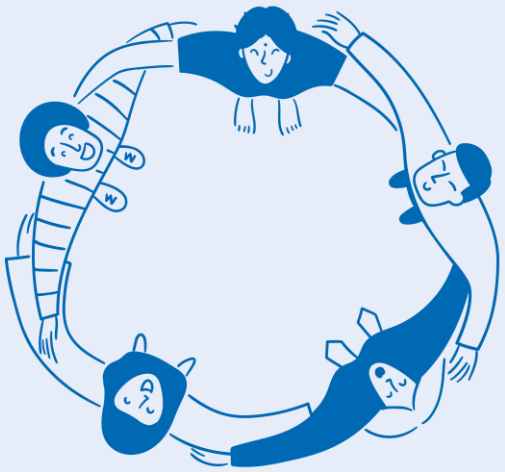
- The CQC have clearly recognised that significant improvements have been made since 2021.
- Report shows us that our strategy and leadership is right, and that we have staff who are making a difference - we see this as a firm foundation from which to keep moving forward.
- Patients and carers told the CQC that the care they received from our staff was kind and compassionate, and that they were actively involved in their care planning.
- We know there's more to do, and we're committed to making these changes and are already making progress.
- The backlog in series incidents was highlighted, and we've made progress since we were inspected:
  - 90% of the backlog has been cleared – we're committed to embedding learning from these.
- Staffing was another area of concern, and whilst this isn't unique to TEWV, we've got a real grip on this.
- We now have 27% more nurses that we did this time last year – just this week, we welcomed 139 new trainee nurses to TEWV.
- Our retention rate is something we're proud of - TEWV are in the top 10 of mental health trusts in England on retaining staff.
- We are committed to staying focussed and to continuous improvement, and providing safe and care today, and every day.

Next steps

- Development of our collaborative improvement plan – scheduled next week.
- Submission to the CQC.



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Thank you

Any questions?

CQC Core Service and Well-led Inspection 2023

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Trust-wide Must and Should Do Actions:

Action No.	Must/ Should Do	CQC Action Required
1	Must Do	The trust must ensure that there is a reduction in the use of restraint and restrictive practices particularly prone restraint. The board must have improved oversight of the use and reduction of restrictive practices including mechanical restraint.
2	Must Do	The trust must ensure that people can access care which meets their needs by reducing waiting times.
3	Must Do	The trust must ensure that all staff who deliver or are involved in rapid tranquilisation, physical restraint and seclusion are trained in immediate life support as per national guidance and best practice.
4	Must Do	The trust must ensure that learning from incidents, deaths and complaints is effective and embedded and that the risk of repeat incidents is reduced.
5	Must Do	The trust must ensure that it continues with work, at pace to improve and make safe the inpatient estate including the continuation of the removal of ligature anchor points and door replacement programmes.
6	Must Do	The trust must ensure that engagement involves working with service users and their families to understand poor experiences and learn from episodes of harm.
7	Must Do	The trust must ensure that governance systems and processes are established, embedded and operated effectively to assess, monitor and improve the quality and safety of the services. Using accurate and clear information to make improvements to the safety and quality of services.
8	Must Do	The trust must improve governance systems and processes to identify and escalate risks including early warning signs in frontline services.
9	Must Do	The trust must ensure that feedback from audits, complaints, incidents and executive and CQC visits to services are utilised and tracked to improve quality.
10	Must Do	The trust must ensure that backlogs in the; serious incident review, mortality review, incident review and complaints are resolved with pace, and that actions are taken to prevent reoccurrence.
11	Must Do	The trust must ensure there is a specific, measurable action plan in place to implement internal and external report recommendations.
12	Must Do	The trust must ensure that all risks on the corporate risk register and board assurance framework are reviewed, mitigated and removed with enough pace to resolve key issues to patient safety, service quality and strategy in a timely manner.

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Trust-wide Must and Should Do Actions:

Action No.	Must/ Should Do	CQC Action required
13	Must Do	The trust must ensure that there are safe levels of nursing and medical cover in place on all wards throughout the day and night to ensure that seclusion reviews are completed, and doctors can attend wards within 30 minutes of a psychiatric and in a medical emergency.
14	Must Do	The trust must ensure that staff receive and record appropriate support, training, professional development, supervision, and appraisal as is necessary to enable them to carry out the duties they are employed to perform.
15	Must Do	The trust must ensure that it acts in accordance with the duty of candour regulation.
16	Must Do	The trust must ensure that it has a strategy for physical healthcare.
17	Must Do	The trust must ensure that it has a clear policy relating the use of technology to monitor patients on inpatient wards and that this policy is accessible to patients and staff to understand the reasons for its use.
1	Should Do	The trust should consider that the mental health legislation committee reviews data on the use of restraint and the use of force report.
2	Should Do	The trust should ensure that governors have clear lines of support and access to non-executive directors.
3	Should Do	The trust should ensure that disciplinary and grievances are completed within the trust's policy.
4	Should Do	The trust should ensure that data and intelligence provided to the board from the freedom to speak up guardian is utilised to its full extent including within its work on closed cultures.
5	Should Do	The trust should ensure that freedom to speak up guardian's report includes what action had been taken to resolve cases to assure the board and committee of the outcomes of speak up feedback.
6	Should Do	The trust should consider a review of the work and rest spaces for doctors.
7	Should Do	The trust should ensure that support offered to peer support workers is formally included in supervision policies.
8	Should Do	The trust should consider how actions and outcomes from executive visits to service is fed back to staff at service level.
9	Should Do	The trust should review how issues effecting more than one sub-committee of the board are reviewed and shared.
10	Should Do	The trust should review Mental Health Act policies to ensure that they are reviewed and in line with best practice and statutory frameworks.

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Secure Inpatient Services Must and Should Do Actions:

Action No.	Must/ Should Do	CQC Action required
18	Must Do	The trust must ensure that the seclusion facilities meet the needs of patients in the service and meet the requirements of the Mental Health Act Code of Practice.
19	Must Do	The trust must ensure there is a comprehensive handover for all patients which includes risk and how best to support patients. Information must be accessible for staff new to the ward, in a format that provides essential information in how best to support patients.
20	Must Do	The trust must ensure that patients' health is appropriately monitored, including the side effects of high dose antipsychotic treatment, blood glucose and where appropriate bowel monitoring.
21	Must Do	The trust must ensure that blind spots on the wards are mitigated.
22	Must Do	The trust must ensure that there is a comprehensive oversight of the use of mechanical restraint and that the necessary safeguards are in place with records to support this.
23	Must Do	The trust must ensure that there are sufficient staff to provide consistent care to patients.
15	Should Do	The service should ensure that staff receive supervision.
16	Should Do	The trust should ensure that search records are accurate and reflect the search process and findings.
17	Should Do	The trust should ensure that patients and staff are offered a debrief following incidents.
18	Should Do	The trust should ensure that the blanket restrictions on Kestrel and Kite wards are individually assessed.
19	Should Do	The trust should ensure that rooms and facilities are accessible for patients with mobility needs, including access to emergency call alarms.
20	Should Do	The trust should ensure that appropriate food options are available for patients and food is stored in line with food safety requirements.
21	Should Do	The trust should ensure that staff complete all required training including mandatory training.
22	Should Do	The trust should ensure that information is shared consistently with ward based staff who cannot attend the team meetings.
23	Should Do	The trust should ensure that actions from community meetings are actioned, and the outcome and update shared with patients.
24	Should Do	The trust should ensure that care records are person centred, including individual reasons for the care plan for example choking. There should be evidence of patients' involvement in care plans and that the patient voice is clear. Multidisciplinary meeting minutes should be person centred with thorough updates from members of the team recorded and rationale for decision recorded.
25	Should Do	The trust should ensure that staff consider how they access the ward spaces and not use wards as a cut through.
26	Should Do	The trust should ensure that all equipment that required calibration is calibrated, including auroscopes.
27	Should Do	The trust should ensure there is support available for staff to attend reflective practice and other wellbeing opportunities.
28	Should Do	The trust should review how they plan and conduct the ward visits to ensure staff visit unannounced at different times to ensure balanced feedback is gathered.
29	Should Do	The trust should ensure that all lockable safes for patient use are in working order.
30	Should Do	The trust should develop their governance processes to ensure information is easily accessible.

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MHSOP Inpatient Must and Should Do Actions:

Action No.	Must/ Should Do	CQC Action required
24	Must Do	The trust must ensure that there are cogent recorded reasons for the use of prone restraint and that the reason for its use is recorded with a suitable rationale to ensure patients are protected from abuse and improper treatment.
31	Should Do	The service should ensure that staff receive training and supervision.
32	Should Do	The trust should ensure that there is clear rationale for prescribing as required medicines including when multiple medicines are prescribed for the same indication and a direction is given for which is first or second line.
33	Should Do	The trust should ensure that the storage of gas cylinders is carried out in line with their own policy.
34	Should Do	The trust should ensure that each patient's identified risks are clearly mitigated within a risk management plan.
35	Should Do	The trust should continue to make improvements to ensure that the number of bathrooms is sufficient for the number of patients on each ward.
36	Should Do	The trust should continue to monitor and mitigate the risk of patient falls and take action to reduce the number of falls.

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MHSOP Inpatient Must and Should Do Actions:

Action No.	Must/ Should Do	CQC Action required
24	Must Do	The trust must ensure that there are cogent recorded reasons for the use of prone restraint and that the reason for its use is recorded with a suitable rationale to ensure patients are protected from abuse and improper treatment.
31	Should Do	The service should ensure that staff receive training and supervision.
32	Should Do	The trust should ensure that there is clear rationale for prescribing as required medicines including when multiple medicines are prescribed for the same indication and a direction is given for which is first or second line.
33	Should Do	The trust should ensure that the storage of gas cylinders is carried out in line with their own policy.
34	Should Do	The trust should ensure that each patient's identified risks are clearly mitigated within a risk management plan.
35	Should Do	The trust should continue to make improvements to ensure that the number of bathrooms is sufficient for the number of patients on each ward.
36	Should Do	The trust should continue to monitor and mitigate the risk of patient falls and take action to reduce the number of falls.

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ALD Inpatient Inpatient Must and Should Do actions:

Action No.	Must/ Should Do	CQC Action required
30	Must Do	The trust must ensure that care and treatment is provided in a safe way for service users by ensuring that staff carry out appropriate monitoring of patient's physical health.
31	Must Do	The trust must ensure that care and treatment is provided in a safe way for service users by ensuring that there is a continued reduction in the use of restraint particularly in the reduction of prone and supine restraint.
32	Must Do	The trust must ensure that seclusion reviews are undertaken in line with the Mental Health Code of Practice.
33	Must Do	The trust must ensure that care meets people's needs and reflects their preferences by ensuring all patients have a discharge plan and by continuing to make progress in supporting people to be safely discharged from the service into appropriate ongoing placements and reduces lengths of stay.
34	Must Do	The trust must ensure that governance processes are effective and embedded and ensure the service continues to improve.
35	Must Do	The trust must ensure that there are enough staff to provide safe and consistent care to people.
44	Should Do	The service should ensure that staff receive training.
45	Should Do	The service should ensure that the respite unit at Bankfields Court is well-maintained.
46	Should Do	The service should ensure that all of people's care records are holistic, thorough, and regularly updated.
47	Should Do	The service should ensure that governance processes are embedded to ensure audits are effective in making improvements to people's care records.
48	Should Do	The service should ensure that they continue to work within models of care that support people to leave long term segregation and seclusion.
49	Should Do	The service should ensure that the reasons for use of as required medication is consistently recorded.
1850	Should Do	The trust should ensure that people's living spaces are conducive to recovery and feel welcoming.

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ALD Community Inpatient Must and Should Do actions:

Action No.	Must/ Should Do	CQC Action required
38	**Must Do**	The trust must ensure that there are sufficient staff to provide safe and consistent care to people.
51	**Should Do**	The service should ensure that staff receive training and supervision.
52	**Should Do**	The trust should ensure staff have access to integrated online systems.
53	**Should Do**	The trust should ensure that supervision systems allow accurate recording.

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AMH Acute and PICU Must and Should Do Actions:

Action No.	Must/ Should Do	CQC Action required
25	Must Do	The trust must ensure that there is adequate medical cover on all wards which ensures that medical staff can undertake timely reviews and attend within 30 minutes of a psychiatric emergency and in medical emergencies..
26	Must Do	The trust must ensure that staff manage and mitigate the risks to service users when they are detained and are permitted to go on section 17 leave.
27	Must Do	The trust must ensure that leaders operate effective systems to improve the quality and safety of the service and to mitigate the risks to the health safety and welfare of service users.
28	Must Do	The trust must ensure that patients' health is effectively and safely monitored, following rapid tranquilisation, and physical health monitoring is completed in line with the regularity as stated in care plans where appropriate such as blood glucose and bowel monitoring.
29	Must Do	The trust must ensure that concerns about access and discharge to the service are managed appropriately including management of delayed discharges and the use of leave beds.
37	Should Do	The service should ensure that staff receive training and supervision.
38	Should Do	The trust should ensure that patients are afforded the necessary safeguards when they are secluded, including appropriate medical and nursing reviews. The trust should ensure that where it is not possible to meet the requirements for seclusion safeguards that cogent reasons are recorded for having to depart from national guidance.
39	Should Do	The trust should ensure there is clear rationale for prescribing as required medicines including when multiple medicines are prescribed for the same indication and a direction is given for which is first or second line.
40	Should Do	The trust should ensure that medicines authorisation paperwork is readily available at the time of prescribing and administering medicines.
41	Should Do	The trust should ensure that appropriate action is taken when medicine fridge temperatures are out of range and that oxygen is stored correctly.
42	Should Do	The trust should continue to maximise patients' privacy and dignity when patients on Cedar ward were required to be escorted to the seclusion room at the end of the male patients' bedroom corridor.
43	Should Do	The trust should ensure that where autistic patients are admitted to the acute wards, information about their individualised needs (positive behavioural support, communication, and sensory needs) are more clearly indicated in care planning and risk assessments records for all staff to see and consider.

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AMH Community Must and Should Do actions:

Action No.	Must/ Should Do	CQC Action required
36	**Must Do**	The trust must ensure that waiting lists are reduced to ensure that patients receive timely access to services and support.
37	**Must Do**	The trust must ensure that there are sufficient staff to provide timely, safe and consistent care.
54	**Should Do**	The service should ensure that staff receive training and supervision.
55	**Should Do**	The trust should ensure that patients are able to access services by telephone in York and Middlesborough.
56	**Should Do**	The trust should ensure that they continue to embed the harm minimisation policy.

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Some of the things that patients told inspectors:

- One patient told us their care support worker was ‘better than therapy, or medicines’. (Community-based mental health services for adults of working age)

- Most patients told us that staff were very friendly, kind and supportive and were very complimentary about the quality of care they received. They told us that staff always treated them with dignity and respect. (Acute wards for adults of working age and psychiatric intensive care units

- Patients told us they were actively involved in discussing and planning their care needs along with their social care needs. Carers and relatives told us that the service helped them identify what support was available for them and their relative and the team “moved heaven and earth for us”. (Community mental health services with learning disabilities or autism)

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Some of the things that patients told inspectors:

- Patients told us that staff were kind and considerate and that they were always around to support them whenever they needed. Patients said they felt safe whilst they were being cared for on the wards. (Wards for older people with mental health problems)

- Patients talked positively about the activities they were involved in including cooking, drama, pet therapy and fitness. Patients told us staff were supportive and kind and that they felt safe on the wards. One patient talked about the comprehensive support they were receiving in their transition to their future placement. (Secure inpatient services)

- People told us staff were friendly and nice. They told us staff supported them to carry out activities that were of interest to them. People showed us their accommodation and described how they had personalised it. (Wards for people with a learning disability or autism)