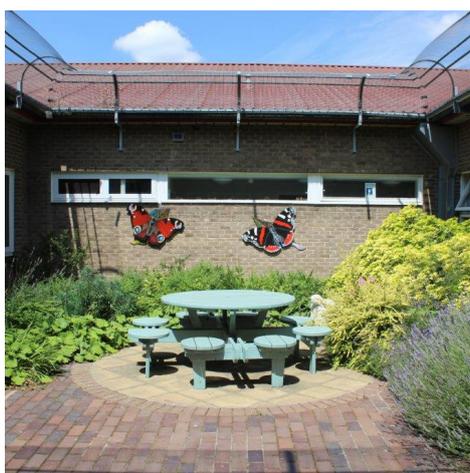


Bretton Centre and Newhaven

Forensic low secure services



A welcome information booklet for service users



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Welcome

from all service users in the low secure pathway

This information booklet is designed to give you an overview of the service and what to expect when you come to the Bretton Centre or Newhaven.

Bretton Centre and Newhaven are hospitals where you will receive help and support from a number of different professionals to help you recover.

At the Bretton Centre there are three wards for people at different stages of their treatment and recovery, and at Newhaven there is one ward which caters for service users throughout their treatment and recovery.

At both hospitals there are lots of ways you can keep busy during your stay including therapies and activities such as sports, education and hobbies.

Other service users are generally warm and receptive and the staff are helpful and caring.

At the Bretton Centre and Newhaven, you will receive the support you need to achieve your goals and aspirations. It will hopefully be your first step towards your future independence and recovery.



Welcome

All staff at the Bretton Centre & Newhaven would like to wish you a warm welcome to our service.

We recognise that we have a responsibility to provide you with high quality treatment and care; we also have a responsibility to work together to achieve the best outcomes possible. We want you to be involved and informed throughout your recovery journey here at the hospital.

We ensure that all service users feel valued, empowered and supported during their time here.

This information booklet is part of our commitment to working in partnership with all of our service users. It aims to provide you with information about the services you will receive which we hope you will find useful. It has been developed and inspired through our work with service users and we hope it will play a small part in ensuring your stay is as positive an experience as possible.

“The service offers a wide range of activities and programmes to help rehabilitate service users.”



What is the forensic low secure service?

The forensic low secure service for South West Yorkshire Partnership NHS Foundation Trust includes the Bretton Centre and Newhaven. Both are based on the Fieldhead Hospital site in Wakefield.

The Bretton Centre and Newhaven are both low secure units which have certain physical security measures such as a perimeter fence and locked doors along with staff who have specialist knowledge and skills.

Service users are admitted to the Bretton Centre or Newhaven from a variety of places including community mental health services, other psychiatric hospitals and the Courts. Some of our service users may have come into contact with the criminal justice system, whilst others have been admitted as a result of risky behaviour linked to their mental health problem.

Service users admitted to the low secure service are cared for within a specialist, purpose built environment.



Introduction to the units

The Bretton Centre

The Bretton Centre is a 38 bed unit consisting of three wards which provide individualised care for adult men who are experiencing mental health problems. Some of our service users may also have a personality disorder or substance misuse issues. All three wards have a rehabilitative function and aim to develop service users' maximum level of functioning to support their rehabilitation potential. The purpose of the three wards is:

- Sandal ward – Admission and assessment (16 beds)
- Thornhill ward – Continuing treatment and recovery (15 beds)
- Ryburn ward - Pre-discharge (7 beds)

Newhaven

Newhaven is a male only, 16 bed unit. The service provides care and treatment for service users with a learning disability. Service users may also have a mental illness, personality disorder, substance misuse problem or autistic spectrum disorder. Newhaven supports service users to reach their full potential promotes hope and recovery and where possible rehabilitation into the wider community.

“I’m now as well as I have been for many years.”



Assessment

Following admission to the low secure service, your needs are fully assessed and a plan of care and treatment is made. Staff will make every effort to get to know you and to build a therapeutic relationship.

Recovery, treatment and care

After assessment you will continue your treatment and rehabilitation. This may involve moving to another ward which provides care for people at different stages of their recovery. At this stage you will be supported to rehabilitate, increase independence and work towards a future transfer or discharge from the service.



You are expected to have a shared responsibility for your recovery by actively engaging with your clinical team, attending meetings and participating in planned therapeutic interventions and activities.

To promote wellbeing, you will be encouraged to make positive lifestyle choices, maintain a healthy diet, develop a good sleep pattern and take regular exercise.



The service also provides care for service users whose mental health problem has not responded to previous treatment approaches and interventions. The low secure service is supported by a therapy centre and community teams.

The Bretton Centre and Newhaven are part of South West Yorkshire Partnership NHS Foundation Trust.

We work hard to make sure you receive the best possible care and treatment available. Our service strives to continually improve and deliver excellence to all our service users.



Our vision



To provide outstanding physical, mental
and social care in a modern health and care system

Our mission

We help people reach their potential and
live well in their community

Our values

- We put the person first and in the centre
- We know that families and carers matter
- We are respectful, honest, open and transparent
- We improve and aim to be outstanding
- We are relevant today and ready for tomorrow



The multi-disciplinary team (MDT)

Every service user in the low secure service has a team of dedicated mental health professionals who work in partnership with you to meet your needs. This multi-disciplinary team is known and referred to as the 'MDT'.

The MDT make important decisions about your care, treatment and management. Each professional within the team contributes and takes on a different role within this process. The MDT meets on a weekly or fortnightly basis to review your progress; these meetings are called multi-disciplinary team meetings (MDTMs).

Your MDT includes:

Consultant psychiatrist – The 'responsible clinician'

Each service user has a named consultant psychiatrist, also referred to as your 'responsible clinician' or 'RC'. This person has overall responsibility for your care in hospital. Your responsible clinician will make a medical diagnosis; prescribe psychiatric medication and co-ordinate your treatment plan. In addition to the consultant psychiatrist, there may be other doctors working within your team. You will have the opportunity to meet with your consultant psychiatrist to discuss your progress and treatment at a weekly ward round.

Nursing team

All wards at the low secure service have a designated team of nurses, led by a ward manager. The teams include registered mental health nurses, registered learning

disability nurses and unregistered health care support workers. All have different levels of experience and skills; the nursing team aims to provide you with the best care on each ward. You are allocated a named primary nurse who will work with you to develop care plans that meet your needs and support your recovery.

Psychology

There are a number of psychologists within the low secure service. You may be referred to the psychologist for specialist assessment and therapy. Psychologists use a range of questionnaires and tests to help with the assessment process and diagnosis but are not able to prescribe medication. They may recommend specific psychological treatment interventions such as attending individual psychotherapy or therapeutic group work. Psychology sessions often involve talking about thoughts, feelings and behaviours that can be problematic or cause distress. Psychologists work collaboratively with service users to address a large range of problems including depression, worry, anxiety, trauma, phobias, self-harm, suicidal thoughts and 'hearing voices'. Psychologists also help service users and other mental health professionals to understand and address risk and offending behaviours so that mental health care is focused on the whole person.

Dual diagnosis practitioner

The Bretton Centre has a dual diagnosis practitioner who may see people on an individual or group basis. If you have been diagnosed with a mental illness and a substance misuse problem, the dual diagnosis practitioner will work with you to address this.

Forensic outreach team

The low secure service has a forensic outreach team which consists of forensic community psychiatric nurses, social workers and community care officers.

Some social workers within the team are also an Approved Mental Health Professional (AMHP) and undertake specific duties and responsibilities under the Mental Health Act. The outreach team will support you throughout your hospital admission and will work with external professionals and outside agencies involved with your care and support to ensure a smooth and successful transfer between services, or discharge to the community. They will then visit you in the community to offer care and support to help you continue your recovery and prevent future difficulties.

The outreach team also helps to ensure the MDT works in partnership with your relatives and carers.

Occupational therapy

Occupational therapy looks at the link between what people do and their health and wellbeing. 'Occupation' means the daily activities a person undertakes that are meaningful and important to them. This can include necessary tasks and routines such as looking after yourself, engaging in enjoyable leisure or recreational activities and achieving productive goals within employment and education.

“I have a good relationship with my care team.”

Occupational therapists focus on you as an individual, assessing your strengths and needs. They will work with you at an appropriate pace to understand how your health difficulties impact on your ability to fulfil activities and roles that are important to you, for example personal care, leisure activities and work. They can help you to develop or maintain your skills and independence in activities of daily living, for example, preparing a meal, and establish a satisfying balanced routine to enable you to get the most from life.

Your occupational therapist will help you to identify and participate in meaningful activities and access education or employment. They can support you to set realistic goals; develop coping strategies and maintain interpersonal relationships, restoring the highest possible level of independence and emotional well-being.

The therapy team includes occupational therapists, technical instructors and activity co-ordinators. Other specialist practitioners may also be involved in your care.



What to expect

Admission

Many service users feel apprehensive or worried when they are first admitted to hospital. This is not uncommon and will improve as you settle in.

When you arrive on the ward you will be welcomed by a member of staff who will show you around and introduce you to everyone.

Staff will be happy to answer your questions, explain the ward routines and help you to settle in.



Property

Storage within the hospital is limited and you may be asked to send excess clothing and belongings home wherever possible.

We would discourage you from keeping valuable items or large amounts of money in your bedroom and can arrange for valuables to be securely deposited with the hospital bank.

For your security and in order to comply with hospital policy, service users are not permitted to have more than £50 in their possession at any one time.



Patient affairs

On admission, you will be asked to provide some basic information regarding your financial circumstances to the hospital patient affairs office. This is to ensure that there is minimal disruption to your income and to enable a bank account to be opened if required. The hospital bank service is available at regular times during the week.

If you need help to manage your financial affairs or require an appointee please speak to a member of your MDT.



Banned and controlled items

As the Bretton Centre and Newhaven are both low secure hospitals there are strict procedures about what you can bring and use within the service. To ensure everyone's safety, potentially dangerous and contraband items are either prohibited or restricted on wards and clinical areas. These are called 'banned and controlled items'.

Examples of banned items include:

- Matches and lighters
- Weapons
- Knives and sharp instruments
- Alcohol
- Illegal street drugs
- Cigarettes and tobacco
- Chewing gum
- Steel toe capped boots
- Copied DVDs and CDs
- Petroleum products
- Opened bottles



Examples of controlled items include:

- Cutlery
- Razors and shaver heads
- Medication
- Tin cans and tin foil
- Aerosols and corrosives
- Pot, ceramic and glass
- Plastic bags
- Tools and scissors
- Computers, laptops and smart pads or tablets
- Mobile telephones
- Recording devices and cameras
- Pornography
- Batteries
- Jewellery
- Money



Banned and controlled items are subject to change and each ward has different procedures based on individual risk assessments. Please speak to a member of your nursing team for further advice.

“Staff are cheerful, approachable and always try to help.”

Search procedure

To safeguard all service users and staff, our security procedures involve both personal and room searches. Random personal searches are conducted regularly by trained staff and should not cause any discomfort or alarm - the process will be fully explained to you beforehand.

There will also be searches of your bedroom and belongings; if you would like to be present during these searches please inform a member of ward staff. Periodically staff may also need to undertake searches on wards or other parts of the hospital.

If you have any questions regarding our search procedure or would like more information, your ward manager would be happy to provide advice.

Smoking

Smoking is strictly not permitted within the hospital or grounds.

Smoking is a potential fire risk and is not allowed anywhere inside the building including bathrooms and bedrooms.

To ensure everyone's comfort and safety, we respectfully ask that this is followed at all times.

We offer a range of services to help you stop smoking and manage any nicotine withdrawal symptoms or cravings. A member of your nursing team would be happy to discuss these with you.

Facilities and amenities

Each ward has a dedicated lounge, kitchen, dining area, courtyard, laundry facilities, interview room and office.

Catering: specialist diets are available for service users with specific religious, cultural, health needs or lifestyle preferences.

Telephones: Pay phones are available on each ward and service users can request use of a mobile phone through their MDT. On occasion your clinical team may need to monitor your calls if there is a risk to yourself or others.

Cleaning services: Bedrooms, bathrooms and communal areas are cleaned regularly by our ward orderly team. Recycling facilities are available on all wards.

Mail: Personal mail is delivered to all service users on each ward. For your safety and security, any packages or parcels will need to be opened in the presence of ward staff.

“The low secure service has helped me take many steps forward.”

Recreation and activities

There is a range of therapeutic and recreational facilities available within the low secure service. All service users are provided with a structured programme of meaningful activity and individualised therapy to meet their interests and needs.

Recreation and facilities include:

- Gym
- Gardening and horticulture
- Information technology
- Sports hall
- Reading
- Walking groups
- Music
- Art and crafts
- Catering and cooking groups
- Education courses, including literacy (reading and writing) and numeracy (maths)



“The therapies I have undertaken have improved my self-knowledge so I am able to cope better with my illness.”

Social activities

A range of social activities take place on the wards. These include board games, pool, table tennis, games consoles, film nights, relaxation sessions, bingo, cooking clubs, health promotion groups, creative artwork and social evenings can all be arranged.

The service holds various seasonal events for all service users and staff, for example, a gala or fete in the summer and a festive event during the Christmas period.

There are a range of other facilities on the Fieldhead site which you can access with the agreement of your MDT and providing you have the appropriate level of community leave. These include:

- The Oasis café which offers a range of light refreshments
- A canteen which serves hot and cold meals
- Vending machines where you can purchase snack foods and drinks

Service users, carers and families are welcome to use these facilities.



Language and interpretation services

We can arrange for translation and interpretation if English is not your first language and you need help to communicate with your MDT.

Pastoral and spiritual care

The Trust offers a range of spiritual and pastoral care services and there is a multi-faith room located within the service which provides a quiet space for worship, prayer, peaceful contemplation and reflection.

During your stay in hospital we will encourage and support you to continue with your chosen religion or faith.

“The facilities are excellent – gym, art room, garden...”



Service user involvement

Within the low secure service there are lots of opportunities for service users to get involved. These include ward based community meetings and regular focus groups and workshops where service users and staff are consulted on a wide range of relevant topics and service developments.

Service users who act as involvement leads or 'representatives' are also invited to attend management meetings and other regional events along with service users from other secure mental health services across Yorkshire and Humber. Those identified as service user involvement representatives are supported by staff throughout the process.

All service users are encouraged to contribute to service developments, provide feedback and get involved.

If you would like to get involved and have a say in how the service operates or take part in volunteering, please speak to a member of your MDT.



Standards of behaviour

Within the low secure service there are regular community meetings on each ward where service users and staff can discuss ward protocols and issues of communal living.

For everyone's safety and to ensure all our service users enjoy the best possible experience in hospital, all service users should follow agreed standards of behaviour:

- You should not enter other service user's bedrooms
- No bullying or harassment
- No play fighting
- Loaning, exchanging, buying or selling of goods or money is not permitted
- Respect others at all times

Safeguarding

The service is fully committed to providing a safe and supportive environment for service users and all staff complete complete safeguarding training to recognise adult abuse.

If you feel worried, unsafe, bullied or frightened at any time during your stay in hospital please speak to a member of your MDT. Your concerns will be taken seriously and procedures will be followed to protect and safeguard our service users.



Recovery

In the low secure service we see recovery as the individual journey taken by a service user to build a meaningful and fulfilling life.

The recovery approach to mental health emphasises every individual's personal potential for recovery. We recognise that recovery means different things to different people. We asked service users from across the unit to express their own ideas about this. Recovery may include:

- ...making changes to my life and learning new skills*
- ...learning how to cope better with my mental health problems*
- ...taking more control and making my own decisions*
- ...greater freedom to live life*

The process of recovery is a personal journey with its own ups and downs, highs and lows. We do not think that any one specific outcome marks the point of recovery. It is important that we all accept that things can and will change and we all feel better on some days than we do on others.

Recovery is about restoring hope and building a positive role and identity. Everyone is encouraged to take responsibility for their own lives.

“I now have hope for the future.”

The journey is the reward...

We aim to work with service users to promote social inclusion and maximise independence, although we must balance these goals with the need to protect others from harm. We do this by working with a variety of other agencies including safeguarding children services, national offender management and victim contact services.

Recovery is at the centre of everything we do in the low secure service. Our services and care pathways are all based on a recovery approach. Our main aim is to help individuals on their journey to build a meaningful and fulfilling life.

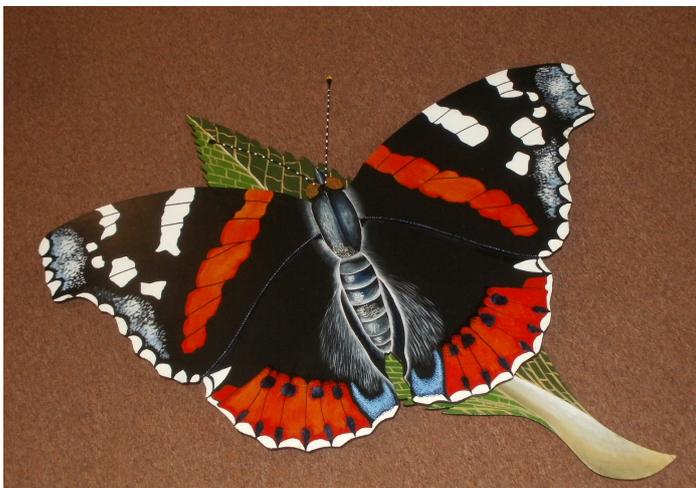


Treatment and therapeutic interventions

A wide range of treatments and therapeutic interventions are available to you depending on your needs. These include:

- Anger management
- Offending behaviour
- Thinking skills and problem solving
- Mental health awareness
- Substance misuse
- Managing violence and aggression
- Daily living skills
- Family work and interventions
- Community skills
- Relapse prevention
- Anxiety management
- Psycho-social interventions

Service users are expected to participate in treatment interventions and are encouraged to identify personal recovery goals. We work in partnership with service users to enable you to leave secure care.



Transfer and discharge

Our dedicated care pathways help to ensure that you do not spend a moment longer than necessary in secure care. How long you need to remain in hospital will depend on the progress you make and how quickly you recover.

Transfer to other services and discharge to the community will be carefully planned by your clinical team to ensure you receive the care and support you need to meet your needs. Your MDT will support you to plan for and manage these transitions effectively.

“I have found staff to be compassionate and caring.”



Wellbeing

We offer a range of services to support your wellbeing and meet your physical health care needs including:

- Primary care team (GP and practice nurses)
- Dietician
- Physiotherapy
- Smoking cessation
- Pharmacy
- Health and exercise practitioner

The primary care or nursing team can also refer you to other services that you may require, including:

- Dentist
- Chiropody/Podiatry
- Optician
- 'Well Woman' and 'Well Man' clinics



“Staff are helpful and positive.”

If you *Believe*
In yourself
Anything
Is possible



The Care Programme Approach (CPA)

CPA is the framework used within mental health services to assess your health and social care needs, plan and deliver care and ensure this is regularly reviewed.

Every service user in the low secure service will be on the CPA and will have an identified care co-ordinator who is responsible for organising regular review meetings and ensuring the CPA process is implemented effectively.

What is a CPA review?

Every service user will have regular CPA meetings or 'reviews'. The CPA review is when your needs will be discussed and a care plan to meet these needs agreed. Service users have the opportunity to be fully involved in planning their CPA review, this includes agreeing who to invite (for example an advocate or relative) and how the meeting is organised.

When will I have a CPA review?

There will be an initial CPA review 12 weeks after your admission; further reviews will then take place every 6 months.



Who will be at the meeting?

Members of your MDT will attend along with any external professionals involved in your care, for example a community social worker, community psychiatric nurse or probation officer. Carers and relatives can also attend if you wish.

You can choose who you would like to chair your review meeting, you can either chair the meeting yourself or if you prefer your responsible clinician or another member of your MDT can do this, we will support and arrange this with you.

What will happen at my CPA review?

After everyone at the meeting has been introduced, each professional working with you will provide a progress report which will have been shared with you before the meeting. There will be an opportunity for both yourself and visitors to contribute to the discussion and ask any questions.

A care plan will be agreed to meet your needs which will be reviewed again at your next CPA meeting. After the meeting you will receive a copy of your care plan.

The CPA process remains in place throughout your admission and is very important in planning your care, treatment and future transfer or discharge.

The Mental Health Act 1983

The Mental Health Act is the legislation under which a person can be admitted, detained and treated in hospital for a mental health problem without their consent.

Being admitted to hospital under the Mental Health Act is commonly known as 'being sectioned'.

In order for someone to be detained under the Mental Health Act they must be suffering from a 'mental disorder' which requires assessment or treatment in hospital. This includes psychosis; affective or mood disorders (for example depression; bipolar and hypomania); personality disorders and organic disorders such as dementia.

Someone with a learning disability can only be detained in hospital under the Mental Health Act if their learning disability is associated with abnormally aggressive or seriously irresponsible behaviour. The Act does not apply to individuals with a drug or alcohol related problem alone.

The Code of Practice for the Mental Health Act (2008) provides guidance to everyone concerned with the implementation of the Act, including service users, carers and relatives.

Your rights will be read to you on a monthly basis or at times when your section or treatment changes.

If you wish to receive more information about the Mental Health Act please contact a member of your MDT.

Community leave

Leave from hospital is authorised by your responsible clinician in consultation with your MDT. If the Ministry of Justice are involved in your care then your responsible clinician will also need to seek their approval.

Leave requests should be discussed with your MDT, your primary nurse will then develop a care plan with you which will be agreed at your clinical team meeting.

Advance statements

Service users are encouraged to discuss their treatment needs with their MDT and record their wishes by completing an advance statement.

Appeals

The Mental Health Act provides various safeguards and rights to individuals detained in hospital. One of these rights is the right to appeal against their detention in hospital to either a Mental Health Tribunal or the hospital managers. You have the right to instruct an independent legal representation to assist you in your appeal.



Mental health tribunals

You can apply to the first-tier tribunal (mental health) if you're detained under a section of the Mental Health Act and want to be discharged. The tribunal's role is to review cases and direct discharge where the legal criteria for this are met. The tribunal is independent and will listen to both sides of the argument before making a decision.

Following an appeal to the tribunal a meeting referred to as the first-tier tribunal (mental health) will take place at the hospital. The tribunal panel, the MDT and the service user, along with their legal representative and anyone who the service user would like to represent their interests (usually a family member or advocate) will attend the hearing.

The tribunal panel will consist of three members:

- A Judge.
- A tribunal doctor.
- A lay member with expertise in mental health.

The tribunal panel will hear evidence from everyone present at the hearing. They will also consider reports provided by the MDT, the pre-hearing examination by the tribunal doctor and any independent psychiatric reports available. Collectively the tribunal panel make a decision whether a service user should remain detained under the Mental Health Act or be discharged from hospital.

“I find staff easy to speak to.”

Hospital manager's hearings

The hospital managers are an independent group of people employed by the Trust to ensure the Mental Health Act is correctly applied and that service user's rights are upheld.

When a service user appeals, a meeting or hearing is arranged and a panel of three hospital managers consider reports and hear evidence from the MDT, the service user and their legal representative to decide whether the legal criteria for continued detention in hospital are met.



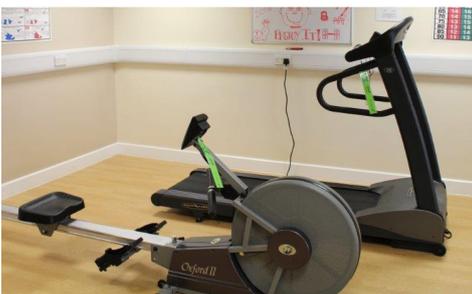
The nearest relative

The Mental Health Act gives a person who is identified as your 'nearest relative' certain rights and powers, including the right to request your discharge from hospital. The Act sets out a hierarchical list of people who are eligible to be someone's nearest relative which is dependent on your unique personal circumstances.

It is important to note that your nearest relative is defined by law and may not be the same person as your next of kin.

Advocacy

Service users have access to an Independent Mental Health Advocate (IMHA) or Independent Mental Capacity Advocate (IMCA). Advocates can help support you to represent your views; raise concerns or make a complaint; access your records and attend meetings with you. In some circumstances an advocate can also act on your behalf or make decisions 'in your best interest' if you are unable to do this yourself due to your mental health. Advocates regularly attend all wards and you can access the advocacy service both directly or through a member of your clinical team.

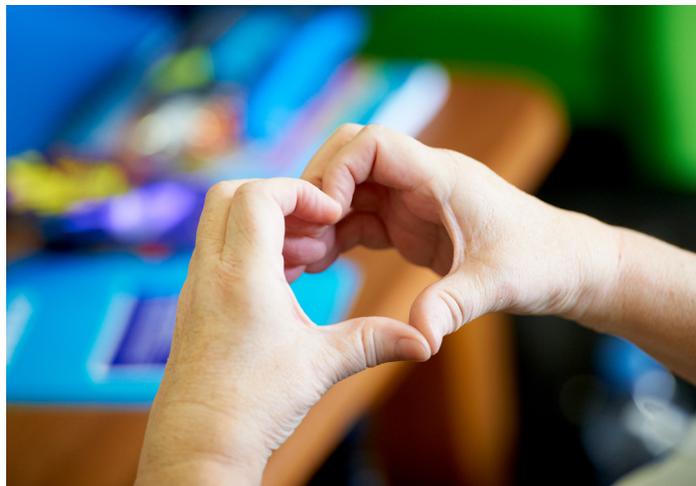


Families and carers

We actively encourage service users to involve their carers and family in their care and treatment. Support from relatives and friends can often help people in their recovery journey and assist them during their time in hospital.

Having a family member or friend in hospital can often be upsetting and stressful. To support your carer and family we have staff carer champions on each ward and hold regular carers' dialogue groups and engagement events providing information on a range of relevant topics and issues.

The sessions also provide an opportunity for carers to share their experiences with others and receive support within a safe environment - the forensic social work team can provide information to your friends and relatives.



“I enjoy the ward social nights.”

Visiting

Throughout the low secure service we recognise the importance of staying in touch and maintaining relationships with family and friends.

Booking a visit

All visits must be planned and arranged in advance around your care, treatment and activity sessions. Please give us 24 hours' notice so that we can make any necessary arrangements. Visits are not permitted during meal times. Dedicated rooms are available on all wards to provide privacy for your visit.

Up to three visitors are permitted at any one time. Should you wish to receive more than three visitors please discuss this in advance with the nurse in charge of your ward.

Visits are actively encouraged, however, on rare occasions visits may have to be cancelled or rearranged at short notice. If this happens you will be provided with an explanation by the nurse in charge of the ward.

Visitors are required to bring identification on their initial visit to the service; this is to safeguard you, other service users, your friends and relatives.

To arrange a visit please speak to a member of your nursing team.

“The support I’ve received and the progress I’ve made has given me hope for the future.”

Contact with children

The hospital has a specific procedure to follow before a child is able to visit or have contact with their relative. This involves a member of your clinical team meeting with your family to discuss the contact and ensure any necessary arrangements can be made.

Once this has been discussed and agreed by the MDT, a care plan will be agreed to ensure visits are as enjoyable and positive as possible. All child visits to the low secure setting take place in a dedicated, comfortable family visiting room.

If you have a close relative who is under 18 years old and you would like to have contact with them during your stay in hospital, please speak to a member of your nursing team.

Remember

There are lots of other important ways to stay in touch with family and friends including telephone contact and sending a card or letter!



Confidentiality

Regardless of illness or disability, everyone has a right to privacy. This means that we will not usually disclose information to anyone without your consent. For further information on confidentiality and data protection, please see a member of your MDT.

Compliments and complaints

Your feedback is welcome.

If you wish to comment on, compliment or complain about any of the services provided by the Trust, please ask a member of staff for details of how to do this. If you need advice or assistance in making your views known please contact our customer services team:



0800 587 2108



customer.servicesSWYT@nhs.net



Customer services
South West Yorkshire Partnership
NHS Foundation Trust
Block 10 Fieldhead
Ouchthorpe Lane
Wakefield
WF1 3SP



Our website

The Trust's website contains information about the organisation and its services and about mental health and learning disabilities and how to look after your wellbeing.

You can also sign up as a member of the Trust on our website and view our latest news.



www.southwestyorkshire.nhs.uk

My MDT

Record important names and contact details below

Address: Fieldhead, Ouchthorpe Lane, Wakefield, WF1 3SP.

Ward:

 Telephone:

Consultant Psychiatrist:

 Telephone:

Primary Nurse:

 Telephone:

Care co-ordinator:

 Telephone:

Social worker:

 Telephone:

Occupational therapist:

 Telephone:

Psychologist:

 Telephone:

Community team:

 Telephone:

Probation officer:

 Telephone:

Other:

 Telephone:



With **all of us** in mind.