

CONSULTATION AND COMMUNICATION PLAN FOR PROPOSALS TO CHANGE MENTAL HEALTH SERVICES PROVIDED BY GLOUCESTERSHIRE PARTNERSHIP NHS TRUST

1. INTRODUCTION

This outline consultation plan details:

- Why we are consulting
- 'Programme of Change'
- What from within the 'Programme of Change' we are consulting upon
- Who will be consulted and how
- Timetable
- Consultation evaluation process

The document also explains how:

- Conflicts and complaints relating to the consultation will be resolved
- Responses will be fed into the application process
- Feedback will be made available to individuals and organisations involved - either indirectly or directly - in responding to the consultation

2. WHY WE ARE CONSULTING

- 2.1 Part of the Government's requirements for changes to the way the NHS is run is that all NHS organisations need to prioritise achievement of financial balance in-year and pay off deficits brought forward from previous years.
- 2.2 To achieve financial stability in 2006/7, NHS organisations in Gloucestershire need to make significant savings. The Trust for its part needs to make savings of £9.5m in 2006/7 to:
- Clear an underlying recurring deficit of £4.6m
 - Clear an expected deficit of £1.2m for 2005/6
 - Meet a cost reduction and efficiency savings target of £1.5m for 2006/07
 - Contribute £2.2m to the county's NHS financial recovery programme
- 2.3 This is a reduction of 12.8% to the Trust's planned spending. Savings of this scale will only be achieved by improving efficiency and reducing costs through service restructuring. The Trust has developed a programme of change to achieve savings. The Trust will be required to consult publicly in relation to some of the proposed changes.

3. PROGRAMME OF CHANGE

The programme of change to achieve savings includes:

3.1 Mental Health Services to Adults of Working Age

Adult acute wards (Hidcote and Sudeley) at Charlton Lane Centre, Cheltenham will close to their current client group and inpatient services will be concentrated at Wotton Lawn. Barnsley Ward's Psychiatric Intensive Care Unit (PICU) will remain at CLC, but the Trust plans to establish a single PICU and Section 136 place of safety facility on the ground floor at Wotton Lawn, Gloucester.

Specialist community teams will be re-structured with the aim of achieving around the clock crisis cover across the county, delivering a modified version of the model indicated in the National Service Framework (NSF).

Existing Community Mental Health Teams will be restructured to focus on the role identified in the National Service Framework of working with people with severe and enduring mental health problems.

3.2 Older People's Mental Health Services

Inpatient bed numbers will reduce to 65. Instead of concentrating these services in two sites, the likely proposal is to concentrate these services on the Charlton Lane site, using Hidcote and Sudeley wards in addition to the current older people's services at Bourton and Leckhampton wards. The other existing inpatient units will be closed to their current use, although in each case the Trust will look to see if they can provide opportunities for re-use as part of the drive to reduce overhead costs.

3.3 Learning Disability Services

The Trust will advance plans to make alternative placements for people currently using the Windrush Unit and will close this unit when this has been achieved. There will also be a review of community team structures and composition to reduce overheads.

3.4 Substance Misuse Services

Options will be developed alongside the inpatient rationalisation to increase the number of beds from six to 12 or so to increase income generation and improve the efficiency of the existing inpatient service. Community team structures will also be reviewed.

3.5 Child and Adolescent Mental Health Services

Team structures and staff skill mix will be reviewed. The children's National Service Framework sets the standard of a next day response from specialist CAMHS, so out-of-hours on-call arrangements will be suspended to save costs. Alternative arrangements will be developed for managing out-of-hours needs for clinical advice.

3.6 Day Services

The Trust will be consulting on the range of NHS-funded mental health day services it proposes to offer to working age adult and older people and the consequences of this for the provision/location of services.

3.7 Corporate Services

The number of senior manager posts will be reduced. Overheads and agreements for the provision of support services such as maintenance, laundry, catering and transport will be reviewed to make savings. The Trust will also take the opportunity to reduce costs by rationalising its estate.

4. WHAT WE ARE CONSULTING ABOUT - PROPOSALS REQUIRING FORMAL CONSULTATION

The Trust remains in discussion with the county's Overview and Scrutiny Committee about the nature of consultation that will need to be carried out in respect of the proposals and hopes to achieve the committee's agreement that not all of the changes the Trust need to make require formal public consultation. It is envisaged that the elements of the programme which will require public consultation are the proposals that relate to the number and location of inpatient mental health services for adults of working age and older people and NHS-funded day services.

5. WHO WILL BE CONSULTED AND HOW

5.1 The purpose of the consultation will be to explain what changes the Trust proposes to make, why the changes are needed and to receive and reflect upon the views of staff, service users, carers, statutory and non-statutory agencies and the public as they consider and respond to the proposals.

5.2 A consultation document will be made widely available and - where possible - mailed directly or emailed to a range of individuals and groups, including:

- Staff
- Prospective Gloucestershire Partnership NHS Foundation Trust Governors
- Prospective Gloucestershire Partnership NHS Foundation Trust Members

- Carers/Carers Groups
- County Council/Borough, City and District Councils/Parish and Town Councils
- General public
- Local media
- Local politicians
- Partnership agencies
- Patient and public involvement bodies - Patient Forum/ overview and scrutiny committee
- Service Users/Service User Groups
- Statutory bodies
- Voluntary organisations and community groups

5.3 The Trust will hold a number of meetings to give individuals, groups and organisations the opportunity to contribute to the discussion. An up to-date version meetings schedule will be available on the Trust website. The accompanying communication plan will ensure that all those who may wish to do so, will be able to participate and contribute to the consultation.

6. PROVISIONAL CONSULTATION TIMETABLE

An initial draft of the consultation plan and communication plan will be considered by the Trust on the 8 May 2006. These documents will be presented to the Gloucestershire County Council's Overview and Scrutiny committee for consideration on the 11 May 2006, with the intention being that consultation might commence on Monday 22 May 2006. Consultation would be for a five week period and would finish on Friday 23 June 2006. The timing of events that form part of the consultation would be posted on the Trust's website. A consultation lead/coordinator would be designated to ensure the consultation was coordinated and its progress monitored. Analysis of responses would be considered by the Board at its July 2006 meeting.

7. CONSULTATION DOCUMENT

A consultation document is being drafted so as to be accessible to a broad audience. The document will be clear about the Trust's wish to pursue service restructuring and why the proposed changes are needed. The document will discuss the impact of the proposed changes for services users, carers, partner agencies, staff and the NHS Foundation Trust application. The consultation document will invite staff, service users, carers and the public to comment upon on the programme of changes proposed but will clearly distinguish those areas subject to formal public consultation, from those which are not. The document will also make clear the Trust's provisional preferred option, where options in relation to specific service change may exist. The document will specify that responses may be made public, unless confidentiality is requested.

The document will be:

- Simple and concise
- Written in a plain language and not too glossy or elaborate

The document will also be:

- Available in paper format, on the Trust intranet and website from the start of the consultation

The consultation document will:

- Contain numbered paragraphs
- Set out the main information relevant to the consultation
- Include a set of key questions
- Give email and website addresses, as well as a postal address for responses
- Provide contact details of someone who will respond to questions or comments about the consultation process

The suggested outline for the consultation document is as follows:

1. Purpose

2. Background

- 2.1 NHS Operational Framework
- 2.2 Gloucestershire NHS Community
- 2.3 Trust Situation
- 2.4 Overview and Scrutiny Committee Requirements

3. Context

- 3.1 The Programme of Change

4. Proposals Requiring Formal Consultation

- 4.1 Inpatient Mental Health Services for Adults of Working Age
- 4.2 Older Peoples' Inpatient Mental Health Services
- 4.3 Day Hospitals for Adults of Working Age
- 4.4 Day Hospitals for Older People

5. Implications

- 5.1 For people who use services
- 5.2 For carers
- 5.3 Partners
- 5.4 Staff
- 5.5 Progress with Foundation Trust Application – members etc

- 6. Consultation Questions**
- 7. What Happens Next?**
- 8. Appendices**

To ensure consistency the Chief Executive will respond to conflicts and complaints, including requests for the consultation deadline to be extended.

8. RESPONSES

A full account of all responses will be kept. All contributions will be acknowledged and comments respond to, so respondents will be asked through the consultation document to ensure that full details are included. Representative groups will be asked to provide a summary of the people and organisations they represent when responding. The analysis of the responses will be made available to all respondents and made available on the website. Individual responses will be made available to anyone who requests one. The July 2006 Board will consider responses to the consultation.

9. EVALUATION

The consultation will be evaluated to find out which techniques were most effective in securing a range of responses. The evaluation will also seek to establish the Trust's response to feedback in implementing the programme of changes.

10. COMMUNICATION PLAN

10.1 AIMS

The aim of the consultation communication strategy is to ensure that a range of people and organisations – staff, service user, carers and the public - have the opportunity to consider and comment upon the organisation's proposed programme of service changes.

10.2 PRINCIPLES

The principles which underpin the communications strategy derive from the Trust's communication strategy and recognised communication practice.

The general principles of the strategy are to promote an approach which:

- Engenders genuine two-way communication;
- Seeks to understand and manage the dynamic elements of the communication process, in essence who says what; to whom; with what, and to what effect;

- Identifies and analyses key individuals and groups of people;
- Recognises the flow of information outside the control of the organisation;
- Establishes clear communication objectives;
- Seeks to evaluate the effectiveness of on-going communications.

In addition:

- Communication must be an essential element of the consultation process; intimately and dynamically supporting delivery of project objectives and deadlines;
- Communication issues and actions must be determined, as items are discussed; key messages need to be determined as decisions are taken;
- Communication must be open, transparent and timely;
- The content of communication must be coherent and consistent;
- Communications must seek to create a recognisable visual identity;
- Communication must use language which is appropriate to the target audience and avoid jargon;
- The content of communications - whatever medium employed – must be scrutinised to ensure the agreed message is being effectively conveyed and - in terms of tone, language and style – is consistent with previous and planned communications;
- Communications will employ - from a range of options – the most appropriate method for the target audience;

10.3 TARGET AUDIENCES

INTERNAL	Staff Prospective Governors Prospective Members
EXTERNAL	Service Users/Service User Groups Carers/Carers Group General public Local media Local politicians Voluntary organisations and community groups Town and Parish Councils County Council and District Councils

- Partnership agencies
- Statutory bodies
- Patient and public involvement bodies:
 - Patient Forum
 - Overview and scrutiny committee

10.4 METHODS OF COMMUNICATION

A table at Appendix one outlines communication methods and audiences to be targeted.

Communication with Service Users and Carers

The Trust has a system of engaging with service users and carers that offers opportunities to promote the consultation. This system includes:

- Patient Advice and Liaison Service (PALS)
- Centre/Unit/Ward Meetings
- Joint Agency Carers Network
- Learning Disability Forums
- Service User and Carers Theme Committee
- Acute inpatient user forums
- County Wide Patient and Public Involvement Group
- Patients' Forum

Communication with Staff

The Trust will use the following systems of communication with staff to promote the consultation:

- Clinicians and Senior Managers Forum
- Executive Team meeting
- Clinical Boards
- Medical Staff Committee
- Nursing Professional Advisory Group
- AHP Forum
- Social Care Forum
- Executive and non executive directors' programme of visits to facilities and services

Communication with Local Media

The Trust will work with local editors and journalists to promote the consultation and its key messages, employing regular briefings.

Communication with Voluntary and Community organisations

Engagement with Gloucester Assembly for the Voluntary and Community sector will be vital to promoting the consultation amongst the community and voluntary sector. This will involve holding a meetings/ workshop, as well as utilising opportunities available through:

- Weekly email to Board of Representatives of Gloucestershire Assembly for the Voluntary and Community Organisations
- County News – a quarterly newsletter
- Bi-monthly meetings of the Gloucestershire Assembly

The Assembly is linked to in excess of 1,000 voluntary and community groups and plays an important role in supporting the development of a strong 'user voice' in the planning, delivery and monitoring of local services. Groups linked to the Assembly work in the areas of:

- Race
- Sexuality
- Faith
- Advocacy
- Women's issues
- Young children and adolescents
- Rural communities
- Refugee and asylum seeker status
- Caring,
- Mental health,
- Substance misuse
- Homelessness,
- Older people,
- Disability
- Volunteering

Communication with Governors and Members

The consultation will provide the opportunity to continue developing effective two-way communication with Members and Governors.