

Page 35 Agenda Item 10 Cheshire and Wirral Partnership

NHS Foundation Trust

Report

Title of Meeting	Board	of Directors	
Date of Meeting	May 26 th		
Agenda item number			
Title of Report	consu	t on the independent analysis of response to the Itation 'Delivering High Quality Services Through nt Design'	
Presented by	lan Da	avidson, Medical Director/ Deputy Chief Executive	
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Purpose of the report	То ар	To appraise the Board on the outcome of the consultation exercise	
	SO1	Deliver improved and innovative services that achieve excellence	x
	SO2	Ensure meaningful involvement of service users, carers, staff and the wider public	Х
	SO3	Be a model employer and have a competent and motivated workforce	х
	SO4	Maintain and develop robust Partnerships with existing and potential new stakeholders	
Related to strategic goals	SO5	Performance Manage all services using an evidence based approach within a Risk Management Framework	
	SO6	Improve quality of information to improve service delivery and longer term planning	
	S07	Sustain financial viability	Х
	SO8	Develop Trust's brand value	
Financial and legal implications			1
Patient and public implications	CWP will prepare report informing the public on the outcome of the consultation exercise		
Staff implications	CWP will prepare report informing staff on the outcome of the consultation exercise		
Partner organisation implications	CWP will prepare report informing partner agencies on the outcome of the consultation exercise		
Equality issues			
Risk score and assurance rating			
Action required	To receive		
	To review		
Recommendations	То ар	prove	

Page 36

 1	-
To confirm	x

Document History

Revision History

Version	Date Revision	Change by	Brief Summary of Change/Sections Changed
1			

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Version	Name/Group	Date Issued
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Page 37

Report on the Independent Analysis of Responses to the Consultation 'Delivering High Quality Services Through Efficient Design'

1.	EXECUTIVE SUMMARY
2.	INTRODUCTION
3.	DISCUSSION
4.	CONCLUSION
5.	RECOMMENDATIONS
6	APPENDIX 1 (SUMMARY OF COMMUNICATIONS AND ENGAGEMENT)
7.	APPENDIX 2 (CHESTER UNIVERSITY REPORT)

CONTENTS

1. EXECUTIVE SUMMARY

This report appraises the Board on the independent analysis of the consultation exercise 'Delivering High Quality Services Through Efficient Design'.

The independent analysis was undertaken by the Faculty of Health and Social Care at the University of Chester. A copy of the draft report is attached to this document as Appendix 2. (The final copy is awaited. The reasons for this not being currently available are given below).

The overall conclusion of the report was that there were a small number of respondents to the questionnaire contained within the consultation document (32), and a significant majority supported the position of CWP in terms of the necessity to redesign mental health services to deliver greater efficiency. There was a general view that the main impetus for the development of mental health services was underpinned by a reduction in inpatient beds, which, in turn, pivots on fiscal concerns in the current financial climate. Some concerns were raised regarding access to inpatient services and poor public transport facilities. There was general support for the development of small specialist units across the Trusts' geographical areas and a request for an improvement in communication of information.

No significant issues were raised that would suggest that, from a consultation point of view, the Trust needs to reconsider the general direction of future service delivery. However local implementation and communication plans should be developed to underpin service changes that take into account comments and feedback from the consultation process.

2. INTRODUCTION

The Trust undertook a public consultation between 1st December 2009 and 9th March 2010 on its plans to deliver high quality services through efficient design. This consultation was managed in parallel with a consultation on redesigning inpatient services in Central and Eastern Cheshire. It was agreed prior to the consultation that Chester University, which had provided an independent analysis on a previous consultation exercise, should be approached to provide this service again. All responses were therefore sent directly to the University using a Freepost service.

A summary of the communications and engagement process for the consultation is attached as Appendix 1.

The first draft of the consultation report from the University was received at the beginning of April. Two changes to the text have been requested (as well as a number of typing corrections). However the author of the report has been on an extended holiday and then delayed overseas due to airline difficulties and the corrected final report has not yet been returned.

The two suggested changes are;

In the first paragraph refers to the 'consultationundertaken by Chester University', rather than stating clearly that the consultation was undertaken by CWP, and the independent analysis was provided by the University.

Throughout the document, responses provided by Trust Members have been abbreviated to 'Trust' as opposed to 'Member'. Within the context of the report this implies that a member of staff submitted the response.

It is not considered that these changes significantly affect the sense of the report which is attached at Appendix 2.

3. DISCUSSION

3.1 The Report

The report provides an analysis of, from whom and from where, the responses to the consultation questionnaire were received. It then provides an analysis of the responses to each question contained within the consultation document.

A total of 32 completed questionnaires were received plus four letters from service user and carer groups and forums. (Three of these were identical)

A total of eight questions were included in the questionnaire at the end of the consultation document with some key themes highlighted below.

- 1. The first question referred to removing age discrimination by providing services based on need. While 88% of people supported this there were a number of qualifying comments included across three areas -: Still a need for wide range of services, mixing of individuals with different clinical conditions, perception that choice is being reduced.
- 2. The second question asked about developing community services effectively and efficiently that may mean changes to care pathways. Again a high number of people (85%) supported this while raising some concerns in relation to increased pressure on clinical staff, reduction in inpatient beds and the need to further develop crisis support services.
- 3. The third question referred to the need to reduce inefficiencies in inpatient services due to large numbers of empty beds. 66% of people supported this however concerns were raised regarding possible lack of access in an emergency and access, location and transport to services. Many people also commented that communication of information should be improved particularly bed occupancy statistics.
- 4. Question four asked people if they agreed that CWP should develop specialist inpatient services eg. Eating Disorders. 93% of people agreed and many offered suggestions for services which should be developed eg. Dementia, Drug and Alcohol, Autism
- 5. The fifth question asked about making best use of specialist staff with an example given relating to specialist dementia wards. 69% of people agreed with support for reducing staff travel between sites balanced against need for access for service users and carers. Other comments related to the need to develop some staff and skills in different areas eg rehabilitation.
- 6. Question 6 was concerned with the need to use CWP buildings flexibly. 86% of people agreed with this but many complained that the question was too vague for them to give a proper response.
- 7. Question 7 asked for views on reporting back to governors and members and people were asked to tick events, meetings, newsletters or a combination of all three. Most (but not significant) responders voted for newsletters but requested a mixture of communication strategies.
- 8. The last question asked for suggestions for further improving services or ideas for services we should or shouldn't be providing. Six major themes emerged which include, environmental standards, support groups, community services, service delivery, communication and information. There was awareness by many respondents that CWP provide excellent services but only in certain areas and improvements in poorer quality services should be made.

The report ends with an overall conclusion that the majority of respondents answered yes to the questions but with certain qualifications regarding their answers. A major issue was the number of comments requesting further information on facts and figures

4. CONCLUSION

There was, despite a publicity campaign and seven public meetings, very few responses to the consultation exercise. The majority of respondents did support the Trust plans to deliver high quality services more efficiently and the depth of responses and the number of qualifying comments will need to be incorporated into the Trust response to stakeholders on the outcome of the consultation exercise.

The Trust report will provide a response to the individual comments made within questionnaires and will also summarise and provide responses to the questions raised at each of the public meetings which were recorded for this purpose.

No significant issues were raised that would suggest that, from a consultation point of view, the Trust needs to reconsider the general direction of future service delivery however local implementation and communication plans should be developed to underpin service changes that take into account comments and feedback from the consultation process.

5. **RECOMMENDATIONS**

It is recommended that the Board of Directors;

- Note the content of this report and the University of Chester independent report on the outcome of the consultation exercise
- Commissions the preparation of a report to stakeholders on the outcome of the consultation exercise

APPENDIX 1

Summary of communications and engagement for both consultations

A communications and engagement strategy for the inpatient reprovision project was in place via the Programme Board and Project Group from April 2009. The efficient design consultation joined together with the inpatient reprovision comms and engagement plan in October 2009, and both were managed through a task and finish group. The task and finish group included membership from the service innovation and development team, communications team, patient experience team, company secretary, and learning disabilities communications officer. It met throughout the period to ensure a comprehensive, joined-up approach.

The engagement process

The consultation documents themselves were produced as part of a much wider process of engaging with stakeholder views. The documents were the mechanism for capturing responses; however they were clearly placed within the wider context of support materials to help people understand the issues involved¹. This included the public meetings, frequently asked questions, examples of successful service redesigns, and the freephone helpline.

A clear communications/engagement process was in place for the consultation, supported by a task and finish group including the expertise of the patient experience team and communications team. They advised on content within materials, including reducing/ explaining jargon (eg. footnotes explaining who the OSC is, what 'contracts' means, who Lord Darzi is, what a 'surplus' is).

This included real Trust examples being given for all of the factors that were being considered as part of the consultation and for the proposals in the 'way forward' section. Additionally these were cross-referenced in the 'your views' section to make it clear what each question referred to. The freephone helpline was advertised for any questions relating to the document, as were the public meetings – and the additional information and links on the website provided further background on key terms such as 'surplus' and 'best practice'.

Advertising and promotion

External stakeholder direct mail exercise

The January edition of CWP Engage newsletter featured full details of the public meetings and other ways to respond to the consultation. This was sent to all 12,000 of the Trust's members, as well as external stakeholder groups and voluntary organisations. We also sent a cover letter and copies of the consultation documents to MPs and governors. In addition, during the consultation we responded to a further 25 requests for copies of the consultation documents from organisations, individuals and staff.

Patient representative groups and PPI representatives

We wrote to over 200 representative groups across Cheshire and Wirral to raise awareness of the consultation process, ways to get involved and the public meetings – those groups were listed on our website and we encouraged people to contact us if any groups were missing from the list. We also sent copies of the consultation documents directly to all PPI representatives.

Staff, site signage/ direct patient comms

The consultation documents and ways to respond were promoted to staff through the weekly enewsletter, via the intranet, and the November and February editions of the staff newspaper. In addition, we issued posters to main reception areas and encouraged staff to share the information with service users and carer groups that they worked with.

¹ Page 3 of efficient design document: "The document should be read together with additional information available on our website including frequently asked questions and more information...we would encourage you to attend one of our public events"

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<u>Website</u>

A dedicated feature was published on the Trust website (with link from staff intranet) on 1st December. It featured:

- interactive pdf versions of both consultation documents;
- audio message from Ian Davidson encouraging people to 'have their say';
- frequently asked questions;
- service redesign achievements;
- lists of organisations the documents had been sent to;
- contacts for further information.

Public meetings/other meetings

Seven public meetings were held from 22nd January to 5th February across Cheshire and Wirral covering the two consultations, with about 150 attendees. In addition, Trust personnel attended local meetings to further raise awareness of the issues including West Cheshire Mental Health Forum, Central and Eastern Cheshire LINKS and GP leads meetings. A dedicated response to a series of queries was provided to Family Tree. We also covered the topic of efficient design in the three annual planning events held in November.

Advertising

We paid for the following advertising in newspapers covering the Cheshire and Wirral area: Chester Chronicle/Chronicle website Chronicle Xtra (free paper) Wirral Newsgroup (range of titles) Ellesmere Port Pioneer Mid Cheshire Buy Sell (Tarvin, Tarporley, Middlewich, Winsford, Frodsham, Helsby) Crewe Chronicle Series (Crewe, Sandbach, Nantwich) Crewe Xtra (free paper) Congleton Chronicle (Congleton, Sandbach, Biddulph) Macclesfield Express

Media relations We issued press releases to all local media and achieved coverage in the following: Crewe chronicle Macclesfield Express Chronicle (Sandbach edition) Nantwich Chronicle

Freephone helpline

We publicised the 0800 freephone helpline number on all documentation relating to the consultations and it received 15 direct enquiries during this period, most enquiries related to requests for hard copies of the consultation document.

APPENDIX 2

University of Chester report on the responses to the Consultation Questionnaire 'Delivering High Quality Services Through Efficient Design'

