



Sussex and East Surrey CCGs
Sussex Partnership NHS Foundation Trust
Working Together



Report on pre-engagement activity around proposals to improve mental health services in West Sussex

July 2019

**A partnership between NHS Coastal West Sussex,
NHS Crawley, and NHS Horsham and Mid Sussex
Clinical Commissioning Groups and Sussex
Partnership NHS Foundation Trust**

Independently analysed by Public Perspectives



Background

This report summarises the key comments from pre-engagement activity with service users, carers, staff and other stakeholders carried out as part of the proposals to improve mental health services in West Sussex.

These proposals have been developed by the three West Sussex Clinical Commissioning Groups (CCGs) - Coastal West Sussex, Horsham and Mid Sussex and Crawley - in partnership with the Sussex Partnership NHS Foundation Trust (Sussex Partnership).

The pre-consultation activity was managed jointly by the CCGs and Sussex Partnership between June 2018 and July 2019 – a one-year period before the start of the formal consultation on 17 July 2019.

The feedback and results have been analysed and reported on by independent research and consultation organisation, Public Perspectives Ltd: www.publicperspectives.co.uk

Our proposals in brief

Demand for mental health care is growing all the time so we need to make sure our services can meet that demand, now and in the future. In addition, our proposals should be underpinned by an approach that considers the effect of physical, psychological, social, housing and environmental factors on health and well-being. This means that we want to ensure that our patients receive safe, high quality care in settings that provide high standards of privacy and dignity.

There are two units in Chichester and Horsham that are of poor quality and where safety concerns have been raised.

Our proposal is to:

- Move services from the Harold Kidd Unit in Chichester to:
 - Dedicated dementia care wards for men and women in single-sex wards in Worthing, and
 - Modern, single-sex wards for older people in both Worthing and Crawley.

- Move services from the Iris Ward at Horsham Hospital to:
 - A new modern ward for women with dementia in Worthing.

- Create a centre of excellence for dementia care in Worthing

In making these changes, the aim is to:

- Meet national standards that say that people should be cared for on single-sex wards
- Further improve and strengthen community services so that people can be cared for in their own homes where possible and help people remain independent, and
- Provide an opportunity to create a centre of excellence in Worthing for people living with dementia.

The number of hospital beds for people with mental health needs in West Sussex will remain the same under these proposals.

Methodology

In order to gain feedback on the proposals to improve mental health services in West Sussex, we used a variety of different methods throughout the pre-engagement activity.

Methods used are listed in the table below, with further information on the feedback gathered provided in the following section 'Pre-Consultation and Engagement':

Focus group discussions with service users and carers across West Sussex
Engagement with Community and Voluntary Sector organisations and groups
Engagement with faith groups, including Worthing Churches
Sussex Partnership NHS Foundation Trust stakeholders and service users
Staff engagement meetings and discussion groups
West Sussex Health and Adult Social Care Select Committee (HASC)
Capital Project Trust AGM presentation and Q&A
Letters, emails and phone calls were received providing feedback from the public in response to the proposals

Pre-Consultation and Engagement

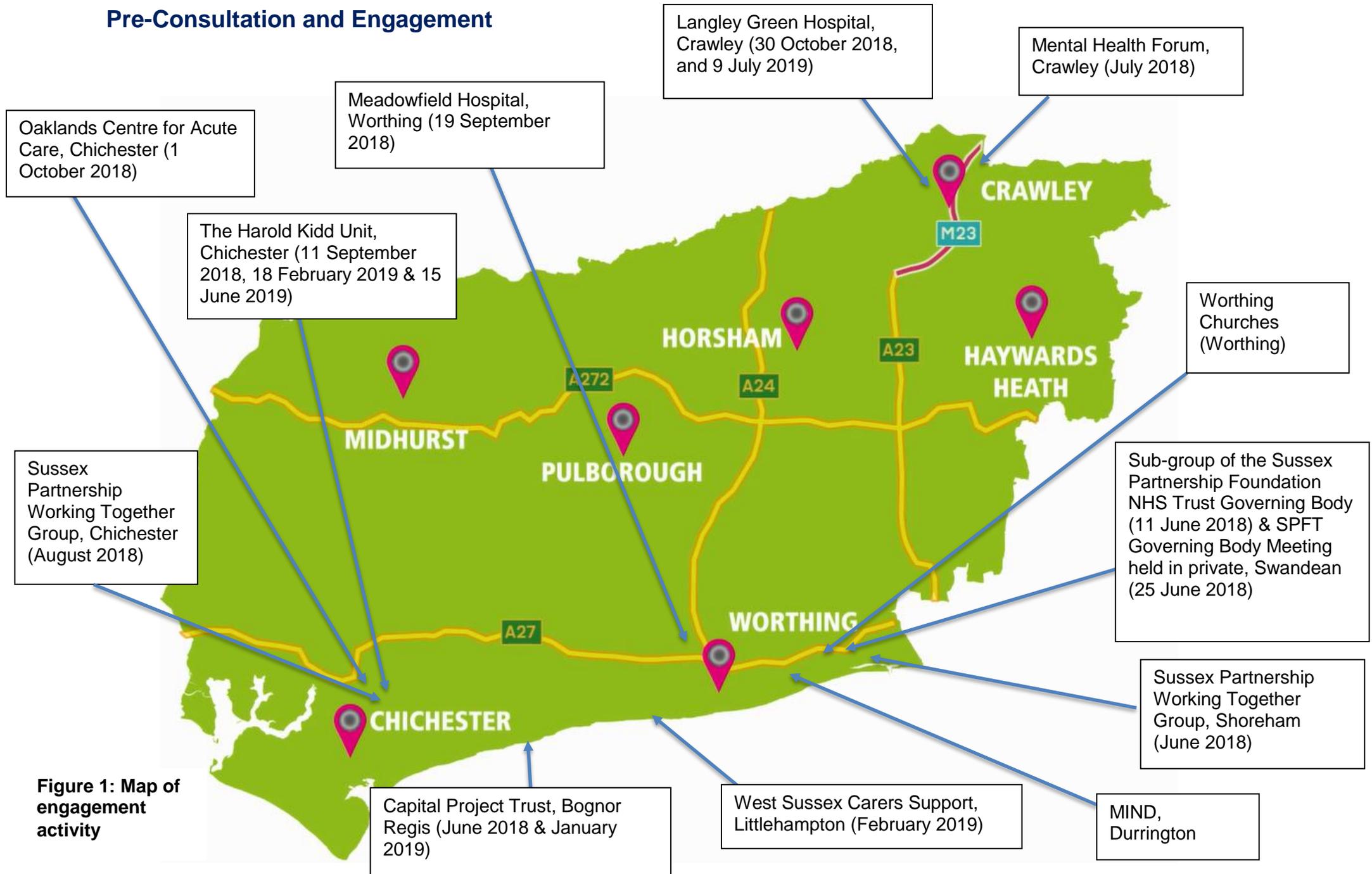


Figure 1: Map of engagement activity

Service user and carer engagement

As part of the pre-engagement activity undertaken to date, service users and carers were involved in reviewing the rationale for change and proposed options, and providing their views on plans.

These included the following:

Crawley Mental Health Forum
Sussex Partnership Service User Working Together Groups
Chichester Carers' Support Group
Engagement with service user representatives through the Capital Project Trust
Engagement with service user representatives through MIND.
Age UK West Sussex
Worthing Churches
Dementia Alliance
Capital Project Trust (a West Sussex wide charity run by and for people with mental health issues) AGM on 7th June 2018 (attended by over 50 service users).
Event with Capital Project Trust on 25th January 2019.
Sub-group of Sussex Partnership Governors meeting on 11th June 2018.
Chair of Governors private council meeting on 25th June 2018.
Meeting with West Sussex Carers Support, Littlehampton, 28th February 2019 (approximately 20 carers).

In addition, a number of letters/e-mails from service users, carers and staff have been received in response to engagement activities or media articles about the proposals, as well as various ad-hoc comments and feedback.

Staff engagement :

There has been a significant and ongoing programme of staff engagement events during 2018. A video featuring the clinical director detailing the proposals was viewed more than 350 times.

Staff, including senior clinical representatives from all disciplines, have been involved at an early stage in the development of the proposals.

Monthly staff engagement events have also taken place since the beginning of 2019, where group discussions were held for staff to provide their feedback on the suggested proposals.

Over 70 staff were spoken to across the following events:

Staff meeting at Harold Kidd Unit on 11th September 2018.
Staff meeting at Meadowfield on 19th September 2018.
Staff meeting at Oaklands on 1st October 2018.
Staff meeting at Langley Green Hospital on 30th October 2018.
Staff meeting at Harold Kidd Unit on 18th February 2019.
Staff meeting at Harold Kidd Unit on 15th June 2019.
Staff meeting at Langley Green Hospital on 9th July 2019.

Engagement with the West Sussex Health and Adult Social Care Select Committee (HASC)

Discussion was held in March 2018 with the West Sussex HASC and the outcome of this discussion was a revision of the proposed options for change.

Options Appraisal

Option appraisal was undertaken to develop a shortlist of options, and a preferred option, which was discussed with West Sussex HASC in October 2018.

At the time, these service change proposals involved some reduction in adult and older people's beds. Subsequently, proposals were revised, resulting no loss of beds to West Sussex.

The following is a summary of the main comments from the various activities, organised into key issues and themes.

1. Single sex accommodation

- There were mixed views among service users, carers and staff about introducing single sex wards
 - Some consider it will provide a better and safer environment for service users.
 - Others are concerned it will be practically difficult to implement, impact on the quality of care and does not reflect real-life situations.
- Comments that single sex wards are an external requirement, and not rooted in service user experience were received.
- Comments that single sex wards could have implications for gender equality, especially if particular genders have to travel further to access services were also stated.
- Concerns were raised that gender segregation will have a negative impact on the flexibility of inpatient beds, and the potential fluctuation in need between men and women, which could affect the availability of provision.
- Reassurance was sought that the transgender community are supported in being cared for on the appropriate gender ward.
- Questions were raised about why certain wards are identified as male or female wards and the implications of this for service users. For example, Oaklands is proposed to be male, which has implications for female service users in the area.

How does this feedback link to our proposed options and consultation?

There is a national requirement for single sex wards, and as such, any new arrangements will adhere to this.

We will, however include shared areas where people are able to mix, if they would like to.

There is currently inequity in that female patients with dementia are cared for in Horsham and male patients in Chichester. We aim to improve standards of care and dignity through creating a centre of excellence, which will benefit both male and female patients.

2. Bed losses/changes

- Concerns that proposals will lead to bed losses overall (although subsequently the proposals aim to maintain the current level of bed spaces).
- Concerns that shutting units will reduce flexibility and capacity in the future, especially with a perception of already stretched service provision, which will mean that mental health provision is not able to cope with the projected population growth and the likely increase in demand for services.
- Calls for more beds/more provision, not less or the same provision, including new facilities with the appropriate specifications, to meet demand and improve standards.
- Calls to bring the existing provision up to specification, rather than closed, despite the financial and practical challenges involved in upgrading existing facilities.

How does this feedback link to our proposed options and consultation?

Our original proposals to reduce bed numbers were amended – now there are no bed losses planned.

We have explained in our consultation document why we cannot invest to bring the current facilities to the required standard; we have ensured that we have linked our plans to work taking place to improve and increase community services, which means that there would not be a need for increased bed numbers in future.

3. Transport

- Concerns about having to travel further for treatment, or for families and friends to visit inpatients. Perception that this could have a negative impact on recovery and undermine the service user and their family's experience, with unintended consequences for quality and cost.
- Some comments that Chichester (where Harold Kidd Unit and Oaklands are located) is disproportionately affected by the proposals, and local residents will have to travel further for care, negatively impacting on service users and carers.

- A request for the new transport options to mitigate the impact of the proposals to be sustainable i.e. green, reducing the carbon footprint, reducing parking problems and increasing accessibility for service users, carers and staff. This could involve both public transport as well as CCG and NHS provided transport and travel options.
- Staff at sites that may close were concerned about difficulties travelling to new sites.

How does this feedback link to our proposed options and consultation?

As a result of this feedback, a Transport Review Group was established, comprising senior clinical and operational staff, service users and carers, Healthwatch and representatives from local Clinical Commissioning Groups, to further consider transport related issues.

This group looked at a commissioned independent transport analysis, and suggested innovative and workable solutions to help those people who may face travel difficulties under the proposed change in services.

The transport analysis and the group's findings and conclusions are available in full on the consultation website.

4. Community services

- Requests from service users, carers, staff and other stakeholders for more community provision to support people outside of hospital and prevent relapses or people entering into crisis in the first place.
- Need for assurance that a robust community strategy is in place for the future in order to support the above.
- Similarly, some staff felt there is scope for more joint working between community teams, crisis response teams and inpatient services, as well as social care services and the community and voluntary sector, to support recovery and prevent relapse and/or crisis.

How does this feedback link to our proposed options and consultation?

We have ensured that we have referenced our work to improve community services in both the consultation document and as a separate document on the consultation website.

The proposed centre of excellence for dementia care will facilitate and improve collaborative working between services.

5. General points

- Calls for service users, carers and staff to be involved in developing proposals, the consultation and implementation of any changes.
- Requests that service users and carers are supported, if proposals are implemented, to reduce the impact of any changes.
- Similarly, requests by staff to be supported throughout the changes to reduce the impact on them and reduce staff leaving due to uncertainty and change.
- Some comments that current service provision needs to be improved, including access to appointments, quality of care and information.
- Concerns that money/funding is not spent efficiently and consequently not resulting in the highest standards of care possible.
- Some support, especially amongst staff, for more joint working and creating centres of excellence or high-quality services through consolidation of existing provision.
- Some requests for the financial aspects of the proposals to be made public to inform consultation responses.
- Questions raised about what will happen to the closed buildings/sites if the proposals are implemented.
- Clarification sought by some stakeholders about what will happen to the bed spaces in West Sussex/Langley Green Hospital previously allocated to Surrey residents, which are to be vacated.

How does this feedback link to our proposed options and consultation?

We have made sure that the consultation includes extensive engagement with various groups and communities, which also links to our Equality and Health Inequality Assessment (EHIA) which is available on the consultation website.

We will ensure that, if our proposals are implemented, we continue to inform service users, carers and staff who would be directly affected, and also wider stakeholders; we will also continue to gather feedback as plans progress to help ensure that any other impact is identified and mitigated.

The pre consultation business case is available on the consultation website, and includes information about financial aspects of our plans.

We have included answers to the questions about the existing buildings in our frequently asked questions, available on the consultation website.

6. 'Coming through loud and clear'

- The CCG and West Sussex County Council-led consultation “**Coming through loud and clear**” in the summer of 2013 was mentioned at the Capital Project Trust AGM as a rich source of feedback.
- It highlights the following relevant points, many of which are also mirrored above:
 - Improve the quality and consistency of service provision.
 - Improve information and access to services.
 - Improve early intervention and prevention, including better community service provision to prevent crisis, support recovery and avoid relapse, especially for service users discharged from inpatient or other specialist mental health services.
 - Encourage better/more joint or partnership working and more seamless service delivery to improve the customer experience.
 - Increase and improve service user and carer involvement and consultation.

How does this feedback link to our proposed options and consultation?

We believe that our proposals respond to the need to improve the quality and consistency of service provision, through the provision of modern facilities that will support improvements in care, privacy and dignity.

Our proposals complement our plans to improve community services, as mentioned previously, and our proposed centre of excellence for dementia care will facilitate and further improve collaborative working.

We have ongoing methods to involve service users and carers as routine within Sussex Partnership services, and this consultation will involve further targeted engagement on our proposals for change.

Outcomes of pre-engagement

1. Bed numbers - West Sussex HASC

Following engagement with the committee and its business planning group, more detailed options appraisal work was undertaken, which was presented to the HASC business planning group. This included, at the time, a loss of beds for the area.

Following this, and our wider service user and carer engagement, we revisited our preferred option and arrived at an option which did not mean any reduction of beds in West Sussex.

2. Transport Review Group

The suggested solutions from this group will be included in the consultation document and further views and other suggestions sought. This will be reported as part of the overall consultation final reporting process.

3. Additional feedback

Much of the feedback confirmed our thinking and planning for change; however, there were some points that have:

- Ensured that we provide the information needed during our consultation
- Informed our EHIA and subsequent actions and engagement
- Informed our plans for reaching groups and communities during our consultation
- Provided information for the implementation of change, dependent on the results of the consultation.