

Barnet, Enfield and Haringey



Mental Health NHS Trust

**Improving Mental Health Services in Haringey
Draft Consultation Plan**

21 August 2008

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Consultation Plan

Appendix A – Draft Consultation Paper

Appendix B – Draft easy read Consultation (to be attached later)

DRAFT



1 Introduction

There is a clear case for speedy interim change in the provision of mental health services in Haringey. The change being consulted on is the reallocation of resources from in-patient beds in Finsbury Ward, St Ann's Hospital, so that there can be an increase of capacity in the two Home Treatment Teams, and additional investment and improvement in the remaining four wards at St Ann's Hospital.

2 Purpose

The core reasons for the proposal and the consultation are:

- **Clinical quality of inpatient services.** Lengths of stay are excessive, by comparison with other areas and Trusts, and there are too many delayed transfers of care. This impacts the individual's recovery and has other serious adverse effects on their life such as loss of home and work, causing perpetuation of a vicious cycle.
- **The care is too focused on inpatient services.** More patients should be treated in their own homes and in locations closer to where they live, as set out in the Haringey Joint Health and Social Care Mental Health Strategy 2005 – 2008.

For these reasons there is a need for some specific interim changes to be consulted on. The Mental Health Strategy highlighted the need to modernise mental health services, provide person centred care in the most appropriate service settings, and reduce the existing reliance on hospital based care. These proposals respond to that requirement.

3 Context

In the longer term, major changes must be made to Haringey Mental Health Services, and St Ann's Hospital redeveloped. In the meantime, services cannot stand still and user experience is prejudiced by delay.

It is clear that the balance of services will over time shift into community or home settings with the in-patient element decreasing in proportion, in line with good practice elsewhere. Policy and research pointing to that change are described in the National Service Framework for Mental Health, as well as the Haringey Joint Mental Health and Social Care Strategy 2005-2008.

The Trust is committed to the Recovery Model of care, and user preferences, as well as the widely recognised need to reduce the stigma of mental illness, all similarly indicate that Home Treatment needs to expand to meet the demand.

The proposal in this consultation is a step in this direction, to improve services and offer enhanced care, within the constraints of current conditions.

Therefore,

- (i) this focussed and specific formal consultation will take place regarding a proposed shift of resources from Finsbury Ward, and,
- (ii) a separate public engagement process (in October-November 2008) will prepare for the production of the Strategic Outline Case for how mental health services in Haringey are to be delivered in the longer term, including the redevelopment of St Ann's Hospital.

4 Principles and Methodology

In order to make appropriate decisions, the Trust needs to ensure that effective consultation and engagement takes place, with service users, carers, local people, local authorities, Haringey TPCT and other partners, healthcare professionals and other staff, Foundation Trust shadow members, voluntary organisations, faith groups, and stakeholders who act on behalf of others such as councillors, MPs, and the media. It must therefore be as easy as possible to communicate with the Trust about the impact of the proposed service change.

It is our intention to consult and engage in an open and transparent manner, ensuring that, so far as possible, the widest audience is reached, regardless of age, disability, ethnicity, location, or language. To this end we will ensure that, in partnership with Haringey Council, we use appropriate mechanisms, translation services etc in order to target the various groups.

5 Timescale

Preparation of documents and consultation programme	June – August 2008
Meeting with OSC Task and Finish Group	2 September 2008
Launch of consultation programme	8 September 2008
Consultation process runs for 12 weeks	
End of consultation programme	3 December 2008
Assessment and collation of results, production of report of results and the Trust's responses, publication of report and submission to Trust Board.	December 2008 – January 2009
Decisions about the way forward and implementation according to results begins	February 2009

6 The Proposals

The proposals involve:

1. reducing the length and number of hospital stays on adult (18 – 65 year old) acute in-patient wards in Haringey;
2. treating more people in or close to their own homes by providing more Home Treatment Team resources;
3. closing Finsbury Ward (an adult acute ward for males) at St Ann's Hospital, as and when a gradual implementation of 1 and 2 can be safely and successfully achieved.

7 The Communications Plan

- The formal Consultation will be launched on 8 September, following a meeting with the Task and Finish Group of the Overview and Scrutiny Committee of Haringey Council on 2 September to present and agree the approach and timetable.
- A local media briefing will be given during the week of 8 September to publicise the consultation.
- In the run up to the launch, informal meetings have been held with representatives of users and carers and the draft consultation documents made available to them, to gain their input and advice on the content and the principles involved.
- Two Consultation documents will be produced –the formal Consultation paper, and a summary ‘easy read’ version. With the partnership of Haringey Council services, both documents will offer a language translation service and an alternative format for visually impaired people. The documents are attached to this Consultation Plan, as Appendix A and B.
- Just prior to the launch a newsletter will be produced, at the beginning of September. This will outline the formal consultation process under way and invite comments. The newsletter will be circulated to all stakeholders. It will also be made freely available in mental health and other healthcare locations.
- The full and summary documents will be circulated to all stakeholders as appropriate, for consultation. This will amount to some 6500 organisations and individuals, including:
 - Service users – via Trust internal mechanisms and groups such as the Patients Council , and external voluntary groups
 - Carers – through surveying a sample of carers of in-patients from the last two years.
 - the Haringey public via local media
 - Haringey TPCT and other partners
 - Haringey LINKs (subject to the development of the LINK)
 - GPs
 - healthcare professionals and other staff
 - Foundation Trust shadow members
 - Local community and voluntary organisations
 - faith groups
 - Haringey Council councillors and officers
 - other representatives - MPs, London Assembly members, MEPs
 - local media.

- During the consultation period a number of meetings will be hosted by the Trust so that views can be presented in person. They will be designed to be accessible and led by clinicians as well as service managers.
 - There will be a number of meetings according to demand from groups and individuals who are existing and past service users and carers.
 - Two open meetings will be held, aimed at a wider public audience including community and voluntary groups as well as service users and carers. These meetings will be well publicised in advance
- Staff affected have already been consulted on the proposals. Their views and preferences will be taken into account so far as possible. Subject to the need to provide the best service for service users, if the proposal goes ahead, staff would be relocated to their preferred posting in the hospital or a Home Treatment Team.
- All Trust staff will be further invited to comment on the proposals during the formal Consultation Period. They will be able to do this via the Trust's normal management process or the Trust's intranet or through the external consultation response mechanisms if they prefer.

A range of mechanisms, which will all be free to the respondents, will be provided for responses:

- Website pages
- Email address
- Freepost address for people returning paper forms or who do not have internet access.

8 Report and Recommendations for decision

A report of the results of the consultation will be prepared, and will be published and submitted to the earliest meeting of the Trust Board in 2009. The report will analyse the responses to the consultation and detail an appropriate way forward in the light of the feedback.