

Report To: Health Overview & Scrutiny Panel

Date: 19th June 2012

Report By: Jackie Charlesworth, Senior Programme Manager,
Integrated Commissioning Unit

Subject: Consultation with families and patients in respect of
proposals to reprovide the service on Exbury Ward,
Solent NHS Trust

1. Purpose of the Report

The purpose of the report is to provide clarification to Panel members on the consultation process being undertaken in relation to the proposal to reprovide the service for long term patients with severe dementia currently resident on Exbury Ward. This follows concerns raised with Ward Councillors, the HOSP Chair and Leader by a number of relatives of patients on Exbury Ward about the validity of the consultation process.

This paper will not repeat that which was presented to the HOSP meeting on 22nd March which set out the proposal by NHS Portsmouth to reprovide this service in appropriate settings in line with local and national models of care. The resolution from that meeting was: *Resolved that the report on Exbury Ward be noted, that HOSP members be notified about the results of the consultation process and that a further update be presented at the HOSP meeting three months following closure of the ward.*

2. Consultation Plan

It was acknowledged early on by those involved with developing the proposal that any plans to change the service would create anxiety and concern for both patients and families. The impact on people affected by the proposal was not underestimated and discussions took place to ensure that the consultation process was handled as sensitively as possible, given the difficult issue that was being discussed, and that both families and patients had every opportunity to give their views and have their voice heard.

To this end it was agreed that:

- The initial contact regarding the proposal would be via the service as relationships already existed between those staff and managers, and families and patients

- People would be asked how they wanted to be involved and consulted (ie, one-to-one meetings; group meetings; letters, by telephone; ad-hoc conversations)
- The consultation would take place over 12 weeks, but be flexible in its dealings to ensure people's needs were met
- External independent advocacy would be commissioned and made available to patients and family members
- Independent 'Best Interest' assessments would be carried out and used to influence the decisions which needed to be made
- An Equality Impact Assessment would be carried out

The consultation timeline is outlined below:

Date W/C	Activity	Attending (as appropriate)
2 April	5 April letter from Maggie Vilkas to families advising them of reprovision intention and invitation to personal 1:1 meeting to discuss further	N/A
9 April	Individual meetings with families with Maggie Vilkas, Jan Johnson Telephone conversations Ad-hoc discussions Provide contact details/leaflet for SEAP (independent advocacy)	
16 April	Individual meetings with families with Maggie Vilkas, Jan Johnson Telephone conversations Ad-hoc discussions Provide contact details/leaflet for SEAP	
23 April	Individual meetings with families with Maggie Vilkas, Jan Johnson Telephone conversations Ad-hoc discussions Provided contact details/leaflet for SEAP	
30 April	No specific activity planned, ad-hoc discussions/telephone contact/response to individual queries Review of consultation feedback	
7 May	10 May joint letter from Maggie Vilkas and Jackie Charlesworth inviting people to open meeting to discuss reprovision plans	N/A
14 May	No specific activity planned, ad-hoc discussions/telephone contact/response to individual queries Review of consultation feedback	
21 May	24 May open families meeting with Jackie Charlesworth, Maggie Vilkas, Jan Johnson, Stephen Corrigan to discuss proposals and get feedback from families	Families Jackie Charlesworth Maggie Vilkas Jan Johnson Stephen Corrigan

		SEAP representatives (2)
28 May	1 June letter and meeting feedback from meeting on 24 May to families. Families asked to raise any further comments/questions on issues discussed prior to next open meeting on 20 th June to give time for comprehensive responses to be given at the meeting	
4 June	No specific activity planned, ad-hoc discussions/telephone contact/response to individual queries Review of consultation feedback	
11 June	No specific activity planned, ad-hoc discussions/telephone contact/response to individual queries Review of consultation feedback	
18 June	20 June open families meeting with Jackie Charlesworth, Maggie Vilkas, Jan Johnson, Stephen Corrigan	Families Jackie Charlesworth Maggie Vilkas Jan Johnson Stephen Corrigan SEAP representatives (2)
25 June	No specific activity planned, ad-hoc discussions/telephone contact/response to individual queries Review of consultation feedback	
2 July	End of consultation Review of consultation feedback	
9 July	Review of consultation feedback	
16 July	Report writing for CCG Executive meeting for decision (August)	

3. Progress

Following the initial letter in April, face to face meetings were held with relatives to discuss the proposal and people's individual views, and people's preferences for involvement were ascertained.

Everyone indicated they would like to have a meeting as a group with the commissioner as well as service representatives. This was arranged, and took place on Thursday 24th May.

The purpose of the meeting was to give families the opportunity to talk together about the proposal and give feedback and air their views and concerns. Two representatives of SEAP, the independent advocacy service also attended.

At the meeting they explained their role and how they could support patients and families to express their views and opinions and ensure that people had a voice. A number of people indicated they would like to talk to them further about the support they could provide.

The commissioner and service representatives sought to ensure that the meeting was managed in such a way as to enable a full and frank discussion and exchange of views to take place. To assist this, families were provided with information about the proposal both verbally and in the form of a summary paper which they could take away to peruse outside of the meeting.

Notes from the consultation meeting were provided to families on the 1st June, and a copy of this is attached as Appendix A to this paper.

Families asked for a second meeting which has been arranged for 20th June. At that meeting families will have the opportunity to meet together for an hour prior to the full meeting in order that they can discuss their thoughts and views, and discuss these with the health professionals attending in the second part of the meeting.

Future Actions

As you will see, the consultation process is only part-way through and there will be further discussion with families as a group on the 20th June and individually with people as they wish.

I would like to stress to Members that the final decision regarding the future of Exbury has not yet been made. The paper which was discussed at the March HOSP meeting stated the commissioning position and the case for this, and it was clear that the next step was to consult formally with families and patients on this intention.

Following the consultation a report will be compiled for the Clinical Commissioning Group Executive which will combine the original proposal with the outcomes of the consultation, an Equality Impact Assessment and the independent Best Interest Assessments. The CCG Executive will use this document to help them make a decision about the proposal at their August meeting.

Jackie Charlesworth
Senior Programme Manager
Integrated Commissioning Unit