

## Castle Lodge – Formal Consultation Response Report

### 1. Introduction

This paper provides the formal response and outcome to the public consultation on the proposed future options for the provision of Inpatient Mental Health Services located at Castle Lodge in Telford. The format of the paper follows guidance provided by Monitor, the independent regulator of NHS Foundation Trusts on reporting on and responding to, the outcomes of public consultations.

The report includes an independent analysis by Edwards Healthcare Consultancy Ltd of the consultation process and responses received.

#### ***Background Information***

Castle Lodge is situated in a residential area of Dawley in Telford and was set up as a community based facility for people from Telford and Wrekin who suffer from mental health problems. The facility was established in January 2004 as a 12 bed nurse led unit with limited medical input and also a base for Telford and Wrekin Crisis Resolution/Home Treatment Team and the Criminal Justice Liaison Service Team. The inpatient unit originally provided for adults from Telford & Wrekin requiring planned and respite care and as a “step down” for those who no longer needed to be in acute care but required 24 hour nursing support in an inpatient environment.

During 2008 the development of an outline business case for the modernisation of mental health services in Shropshire, Telford and Wrekin was undertaken. This included detailed modeling of inpatient and community activity and capacity, development of new models of care and ways of working and planned rationalisation of community based care locations. The final business case clearly stated that the Castle Lodge facility would be retained for inpatient use although there was no specific detail on the model of care presented.

Since the new facilities at The Redwoods Centre formally opened in September 2012, there has been subsequent investment in crisis resolution, home treatment and Community Mental Health teams. This has meant that the facility at Castle Lodge (for the purpose that it was established) became increasingly under used. Telford and Wrekin residents were being supported in their own homes more and the length of stay for Telford and Wrekin patients in the Redwoods Centre could be measured in days and weeks as opposed to months and years.

Castle Lodge evolved into a facility that looked after patients with a very different range of clinical needs and behaviours, varying significantly in nature and severity. The Unit also began to accommodate patients from outside of the Telford and Wrekin area, in particular from Shropshire and Powys. This presented a considerable challenge to meeting the needs of all the patients admitted to Castle Lodge and posed potential risks to quality and safety of care.

A clinical review of care in the latter half of 2013 found that from its origin as a nurse run unit with carefully selected patients who could be safely and appropriately transferred or admitted there, the unit now provided for patients with a markedly different range of clinical presentations, needs and behaviours. Through no fault of their own but as a relatively isolated unit, staff were increasingly unable to adequately,

consistently or safely address the needs of those admitted and clinical issues and concerns were becoming evident. In essence Castle Lodge was not resourced to function as either an acute inpatient unit, or a "step down from inpatient" unit and there were a number of serious incidents and near misses.

The nature of some the patients admitted there and the severity of behaviour displayed, required the governance and infrastructure of an acute inpatient unit. As a result, a number of patients were transferred to more appropriate care, in the Redwoods Centre. Castle Lodge was temporarily closed to admissions in September 2013 and a formal public consultation on the suggestions for its future use was undertaken, commencing on 1 December 2014 and closing on 6 February 2015.

This report sets out the details of the consultation process, the responses and feedback received particularly pinpointing the consistent themes raised and the Trust's and Clinical Commission Group's joint response to the feedback and recommendations.

## **2. Pre Consultation**

Castle Lodge is part of the continued modernisation of mental health services in Shropshire, Telford and Wrekin, the ethos of which was that more people were to be cared for in their own home, with a reduction of beds and length of stay in acute hospital beds. This was very much a theme and a requirement as part of the modernisation of Mental Health Service Business Case already referred to earlier in the paper. As such it is also important to understand the formal consultation which led to the enhancement of community services and building of the Redwoods Centre. Also, as is good practice, there has been much ongoing engagement over the last few years and up to the public consultation about the future of Castle Lodge.

This includes extensive public consultation undertaken between the 6<sup>th</sup> September and 6<sup>th</sup> December 2010, which was about the replacement of Shelton hospital and the modernisation of mental health services across Shropshire, Telford and Wrekin.

The consultation was led jointly by Telford & Wrekin and Shropshire PCTs in conjunction with South Staffordshire and Shropshire Healthcare NHS FT, and ran for 13 weeks. Prior to consultation, the PCTs submitted evidence to NHS West Midlands to demonstrate that the pre-consultation activity (the "Lansley Tests") had been met sufficiently to enable the PCTs to initiate the consultation process. This consultation is of relevance as it was about the future provision of mental health services for Shropshire County as a whole, which included the population of Telford and Wrekin and the facility at Castle Lodge.

Pre-consultation activity included presentations to GP Commissioning Leads, the Mental Health Forum, Acute Care Forum, Voluntary Sector Forum, Cabinet members, Scrutiny and Cabinet leads. Meetings were held with all the relevant MPs, who were supportive. Presentations to the Joint Health Overview and Scrutiny Committee took place in Dec 2009 and March 2010, who were supportive and understood the rationale for the community services and in-patient bed numbers. The consultation process was also subject to scrutiny by the Health Overview and Scrutiny Committees (HOSCs) of Telford & Wrekin Council and Shropshire Council.

This consultation included a wide range of public meetings on the following dates and locations:

- 21<sup>st</sup> September 2010 at Meeting Point House, Telford
- 27<sup>th</sup> September 2010 at Shelton Hospital, Shrewsbury
- 6<sup>th</sup> October 2010 at the Civic Centre, Whitchurch
- 15<sup>th</sup> October 2010 at the Community Centre, Craven Arms

Events also took place across Shropshire, Telford and Wrekin health economies, beginning in May 2008 and continuing until the end of formal consultation in 2010. Some examples of these events, which shows

the wide spectrum of groups involved in the formal engagement and involvement activities, which took place, can be seen as follows:

- Work stream and Locality meetings held during the period from May 2008 onwards. Comprising Trust staff, service users, local authority representatives and commissioners.
- Shropshire Health Overview and Scrutiny Committee, July 2009.
- Presentation to Shrewsbury Town Council, July 2009.
- Presentation to SSSFT Membership Council, July 2009.
- Presentation to and engagement with local Residents Group in July and August 2009.
- Presentations to Telford & Wrekin Mental Health Forum in July, August, September 2009 and May 2010.
- Presentation to Shropshire Council, July 2009.
- Engagement with Joint Health Overview and Scrutiny Committees for Shropshire and Telford meetings, held quarterly throughout period.

The engagement process also included a series of presentations and discussions with Shropshire, Telford and Wrekin commissioners and councils.

Staff, the public, service users and carers were invited to consider the modernisation plans and the development of new, modern mental health inpatient facilities to replace the Victorian hospital at Shelton. Widespread support for these proposals was publicly reported, with plans including the retention of Castle Lodge inpatient facility for use by Telford & Wrekin service users. The consultation was named 'Next Steps' in recognition that it was the final 'check and balance' in a long process of engagement and ongoing discussions on developing services for mental health and dementia care.

The public were also asked what factors were most needed to take into account in strengthening community mental health services across Shropshire, Telford and Wrekin, and in replacing Shelton Hospital with brand-new facilities that reflected modern mental health care. There was a majority of positive responses to the consultation, and almost 70% of people broadly supported the proposals. This support was often provided with requirements for certain priorities to be met and some concerns to be addressed. The strongest concerns that were voiced related to the potential closure of Beech Ward in Whitchurch.

Following this extensive consultation, the full business case was formally approved by the Boards' of South Staffordshire and Shropshire Healthcare NHS Foundation Trust (SSSHFT), Shropshire Primary Care Trust and Telford & Wrekin Primary Care Trust.

The modernisation programme commenced in January 2011 to ensure that, via a phased approach, the changes to practice and increased community capacity were seen to be reducing reliance on inpatient beds prior to the opening of new the facilities at Redwoods. The mental health modernisation plan was then closely monitored through the Mental Health Modernisation Sub Committee, which included wide stakeholder representation including Telford and Wrekin and Shropshire Councils.

Since 2012, the number of patients that were suitable for admission at Castle Lodge was gradually reducing, this follows a general pattern for mental health services across the country where new and expanded community services are enabling far more people to be cared for in their own environments within the community.

As a result, people who now require admission to inpatient services have more complex needs and require more intensive support, as provided by the Redwoods Centre where 24 hour / 7 day week medical support is available, together with other nursing staff who can respond in a crisis situation. Unfortunately, due to increased demand, bed pressures at the Redwoods Centre and staffing/training issues within the crisis resolution teams, Castle Lodge had become increasingly used for patients with more complex needs

Work was undertaken to improve the acute care pathway in the Redwoods, by introducing the, Purposeful Inpatient Process for Admission model (PIpA) and providing more home based support. PIpA is a nationally recognized new way of working in acute mental health Inpatients provision.

By autumn 2013, there were very few Telford and Wrekin patients being cared for at Castle Lodge and the continued concerns about the safety for both staff and patients at this isolated stand-alone unit, resulted in Castle Lodge being temporarily closed in September 2013.

There has been an ongoing process of engagement concerning services at Castle Lodge. This engagement can be summarised as follows;

Date	Details
16 <sup>th</sup> November 2012	Meetings with David Wright MP with service users from MIND and Castle Lodge. At this meeting wide ranging concerns were raised by a number of service users about the quality of care and suitability of staff at Castle Lodge and the Head of Mental Health Services agreed to undertake a review of the provision.
17 <sup>th</sup> December 2012	Castle Lodge was discussed at the Trust's Council of Governors meeting where Lesley Crawford gave an update of the position at that time.
20 <sup>th</sup> September and 8 <sup>th</sup> October 2013	Meetings took place between the Associate Director of Care and Support from Telford Council and the Head of Mental Health Services, to discuss the temporary closure and to enable Local Authority elected members to be appraised. The Council raised concerns about the way in which the closure had occurred and requested that wider consultation and engagement be undertaken.
23 <sup>rd</sup> September 2013	The plan and rationale for the service change was presented to Health Overview and Scrutiny Committee (HOSC). This was in the form of a full PowerPoint presentation by the Head of Mental Health Services, which included preliminary data and time for further discussion. This also led to wider discussion amongst the council and local community including GPs.
October 2013	The Deputy Clinical Director/ Consultant Psychiatrist attended a practice meeting in Dawley to discuss the rationale for the closure with GPs who had initially raised concerns on the 8 <sup>th</sup> October 2013. The Trust was able to discuss and explore the clinical concerns however were pressed hard on the reasons for closure which received some critique.
October 2013	Further to the September meeting of HOSC, a meeting was arranged which involved David Wright MP, SSSFT, TWCCG, members of HOSC and local councilors. In this meeting the rationale and process for the closure were again discussed and it was further agreed to produce a wider review of the whole modernisation programme.
24 <sup>th</sup> March 2014	Castle Lodge was discussed at the HOSC meeting and it was clarified that it remained open, with a temporary closure of the 12 beds and the crisis team continued to work from there.
29 <sup>th</sup> September 2014	A review of the modernisation of mental health services paper was presented to HOSC which included an update on Castle Lodge and proposed consultation. Discussion indicated that although there had been a long journey to this point and tremendous strides forward had been taken, the conclusions of the report could not be endorsed. The committee resolved that the Co-Chair would write to appropriate organisations to set out the Committee's concerns and identify areas

	which require further reporting, and that the Committee engage with service users and appropriate community groups to invite them to share their experiences of Mental Health Services.
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The Trust staffs involved have also been kept engaged and updated with the process of the temporary closure of Castle Lodge as follows:

- Following the temporary closure in September 2013, Castle Lodge has been a standing item for the monthly Joint Staff Partnership Meeting (JSP).
- Managers have kept staff side and trade union representatives updated about the position and staff side have been heavily involved in the support of staff directly involved. In addition, managers, staff side and HR representatives met with displaced staff on a regular basis to address any concerns.
- A regular weekly newsletter was provided to all Adult Mental Health Division staff briefing them on current issues and changes to services.
- An Impact Assessment can be found at Appendix I.

### 3. Formal Consultation on Castle Lodge

The following section is intended to outline the information provided during the formal public consultation on the proposed future options for the provision of mental health services located at Castle Lodge and to inform the Trust and its key stakeholders that:

- Robust public consultation has been undertaken.
- Staff and stakeholder involvement in the development of the preferred option has been actively sought and impacted.
- The organisation can demonstrate a continued commitment to the social responsibility required as an NHS Foundation Trust.

Background		
1.	Name of Organisation	South Staffordshire and Shropshire Healthcare NHS Foundation Trust (SSSFT)
2.	Area served by the Trust	The area of South Staffordshire, Shropshire and Telford & Wrekin is the core activity but some services are also provided on a wider regional or national basis.
3.	Area engaged in consultation	Telford & Wrekin was the focus but also the wider Shropshire community could contribute to the debate.

About the public consultation			
4.	Contact details of person responsible for the public consultation	Martin Evans Head of Communication Tel: 01785 783042 Email: <a href="mailto:Martin.evans@sssft.nhs.uk">Martin.evans@sssft.nhs.uk</a>	
5.	Dates of consultation	Started: 1 <sup>st</sup> December 2014 Ended: 6 <sup>th</sup> February 2015	
6.	Which media were used for the public consultation document?	Full consultation document in hard copy	Yes
		Summary consultation document in hard copy	No
		Web-based consultation document	Yes

		Talking book/audio tape/CD-ROM/other (please specify)	No
		Large print versions	Yes, on request
		Versions in ethnic languages (please specify which)	Yes on request
		<p><b>Presentation at public meetings:</b></p> <p>The Trust facilitated 5 formal public consultation meetings:</p> <ul style="list-style-type: none"> <li>• <b>Meeting Point House</b>, Telford – 17:00 – 09/12/14</li> <li>• <b>Meeting Point House</b>, Telford – 17:00 – 16/12/14</li> <li>• <b>Meeting Point House</b>, Telford – 17:00 – 05/01/15</li> <li>• <b>Castle Lodge</b>, Telford – 17:30 – 12/01/15</li> <li>• <b>Castle Lodge</b>, Telford – 17:30 – 26/01/15</li> </ul> <p>The Trust has also attended and presented at a number of other public and partner meetings:</p> <ul style="list-style-type: none"> <li>• <b>Presentation to the GP Forum</b> – 18/11/14 – Attendance of 39</li> <li>• <b>Presentation to Voluntary Sector Mental Health Forum</b> – 13:45 - 04/12/14 – Attendance of 15</li> <li>• <b>Presentation to Dawley County Council</b> –19/01/15</li> <li>• <b>Presentation to Listen not Label</b> – 14:00 – 04/02/15 – response from 45 people gained</li> </ul>	
		<p><b>Other Consultation and Engagement:</b></p> <p>The Trust undertook a variety of activities to ensure the widest possible distribution of information amongst its key stakeholders:</p> <p><b><u>Internal Communication</u></b></p> <p><b>Online</b> – there were newsletters to staff and closure notices published on the intranet at the time of the temporary closure.</p> <p><b>Staff sessions</b> – A significant number of staff engagement sessions were held, both in the form of team meetings and one to ones.</p> <p><b>All user emails</b></p> <ul style="list-style-type: none"> <li>• Information on the consultation was promoted internally to Shropshire teams via EPOD (Trust internal E Magazine) and email’s from Team Leaders to staff.</li> </ul> <p><b>Meetings</b></p> <ul style="list-style-type: none"> <li>• Presentation and updates provided to the Trust Council of Governors.</li> </ul> <p><b>Staff newsletter</b> – briefings included in EPOD the Trust’s staff eNews facility.</p> <p><b><u>External Communication</u></b></p> <p><b>Online</b></p> <ul style="list-style-type: none"> <li>• A web page on the Trust web site was set up which detailed the</li> </ul>	

proposals and allowed feedback. The public facing document and questionnaire were also made available online. There were 206 views of this of which 80% were unique visitors.

- Flyer promotion was used on social media sites of the Trust Facebook page and Twitter feed. There were some retweets of this link.
- Corporate social media promotion was ongoing throughout the whole process.
- A link to the Trusts consultation website was put on the CCG's website.

#### **Hard copy**

- The consultation public written engagement document was distributed at all public presentations and made available. This document allowed hard copy feedback.
- The public presentations were promoted with a flyer, which was distributed to local residents and service users.
- The flyer was also made available at the Redwoods reception and at Meeting Point House. In addition other voluntary organisations were sent an e-copy of the flyer to print and Healthwatch Telford and Wrekin took some hard copies.
- A letter was sent to the two local relevant MP's, David Wright MP and Mark Pritchard MP offering a meeting with Lesley Crawford to inform the said MP's of the consultation.
- Information was also included in the January 2015 Trust Stakeholder briefing.

#### **Emails**

- An email was sent to the Trust's 15,000 Foundation Trust members informing them of the public consultation, which included the documentation.
- Emails, which included links to the public consultation document, the flyer and website, were distributed via the CCG contact network. This went to GP surgeries in Telford and Wrekin and details of the consultation were sent in 2 newsletters December 2014 and January 2015.
- An email of all the promotional documents and link to the website was sent to Dawley Town Council.
- An email of all the promotional documents and link to the website was sent to the Chorus Service User Network, which they then promoted.
- An email with the link to the Trust's consultation website sent to local voluntary organisations on 03/12/14.
- An email of all the promotional documents was sent to the Trust Telford Community Development worker for use to bring awareness to groups which were hard to reach with the other forms of promotion.
- The CCG also sent an email to its partners advising of the consultation and providing the web link to the public consultation document.

#### **Meetings**

The Trust held five formal public consultation meetings to discuss its proposals for the future of Castle Lodge. These meetings aimed to cover the immediate area of Telford & Wrekin. The Trust consulted with approximately 85 people using this method of engagement and attendees of the meeting had the

		<p>opportunity to question the SSSFT responsible Divisional Director, senior clinician and CCG commissioning lead about their proposals and intentions for Castle Lodge.</p> <p>The Trust also consulted with people attending other public and partner meetings and these meetings had representation from GP's, councilors and volunteers. The Trust consulted with approximately 100 people using this method, bringing the overall total of those face to face interactions consulted to circa 180.</p> <p><b>Advertising/Media</b></p> <ul style="list-style-type: none"> <li>• Media press release was sent to local news channels, informing of the public consultation on 28/11/14.</li> <li>• A further press release was sent to local news channels informing of the public consultation on 11/12/14.</li> <li>• One media inquiry was received from the Shropshire Star on 30<sup>th</sup> January 2015.</li> </ul>	
7.	Number of formal responses received		<b>Number</b>
		Hardcopy, using proforma provided as part of the consultation exercise	15
		Others in hardcopy – letters etc.	1
		On website	5
		By email	9
		Verbally at public meetings	55 questions answered
		Collated from other meetings	Comments collated from meeting notes 45
8.	<p>Was the pattern of responses to the consultation in line with the demography and geography of the area? Were there any groups that were not adequately represented in the responses received? Please provide explanations where necessary, and details of any plans to engage with under-represented areas.</p>		
	<p>Unsurprisingly, geographically, the main body of consultation responses was from the area of Telford and Wrekin. The Trust held five formal public consultation meetings located in two different areas of Telford, one of which was Castle Lodge, giving local residents the opportunity to attend. The meetings were held in the evening to maximise potential participation and were well publicised in the local media with press releases, via email distribution, circulation of flyers and with a specific area of the Trust's website dedicated to the consultation.</p> <p>Contact and information was given to the following;</p> <ul style="list-style-type: none"> <li>• Dawley Town Council</li> <li>• Local GP's</li> <li>• Local MP's</li> <li>• Voluntary organisations</li> <li>• FT members</li> </ul>		

All the public meetings, apart from one, were well attended by local people from the Telford and Wrekin area with a total of 85 attendees from a population of around 166,000. Whilst seemingly a small percentage, this compares favourably with attendance at public meetings when benchmarked with other NHS public consultation exercises:

Location	Public event attendance	Population
Black Country	50	570,000
South Devon	70	300,000
South East England	130	2,694,000
Staffordshire	40	500,000

*Information from Edwards Healthcare Consultancy Ltd*

Senior members of the Trust's staff have also attended formal meetings during the consultation process to discuss the plans and gain feedback (as listed in section 6).

The Trust also ensured promotion of the consultation to 'hard to reach' groups via its Community Development Workers.

About the comments				
As part of the consultation, 2 options were given for people to support or oppose. These 2 options were:				
<ol style="list-style-type: none"> <li>1. Continue the use of Castle Lodge inpatient facility</li> <li>2. Permanent closure of Castle Lodge and disposal of the facility.</li> </ol>				
9.	How many responses were received in total?			
	<p>A total of 30 formal responses were received.</p> <p>Additional comments were received from four out of the five consultation meetings in the form of questions and answers, which totaled 55. Also the group Listen not Label gained and collated comments from 45 of their clients.</p>			
9a.	Was there a HOSC review process?			
	<p>Yes. Once the consultation response is complete and discussed and approved by the SSSFT Trust Board in May 2015, the response will be presented to the Joint HOSC for discussion and comment, before presented to the Telford and Wrekin CCG Board.</p> <p>HOSC have regularly received reports, presentations and papers regarding the modernisation of mental health services during which there have been various discussions regarding the future of Castle Lodge, most recently this was discussed on the 29<sup>th</sup> September 2014.</p>			
10.	Total amount of formally submitted responses:	Broadly in favour	Broadly neutral	Broadly opposed
		<p><b>2</b></p> <p>Agreement in support of option 2 on the basis that are funds redeployed locally to benefit Service Users</p>	<p><b>10</b></p> <p>A significant number of people did not express a view on a preferred option but raised queries and concerns regarding the current and future provision of mental health services</p>	<p><b>18</b></p> <p>Strongly opposed the preferred option 2 and want Castle Lodge to remain open but not necessary with the same services. For example suggestions included a crisis house,</p>

				therapeutic interventions, respite care and a step up/down provision
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### Trust Response

The section below sets out the general tone of responses received and whether or not these are in support of the preferred option of Option 2

11.	<p>Commentary regarding the general tone of comments received.</p> <p>By comparison to other similar NHS public consultations, the public engagement and response levels benchmark very positively.</p> <p>The general tone of responses to the Trust's consultation on the closure of Castle Lodge was very positive towards the quality of care provided by the Castle Lodge Team. A large proportion of responses overall did not express a view on the unit staying open in its original form. However, there was significant concern that the permanent closure of the unit left a gap in service for the people of Telford and Wrekin. The gap was defined by many as a level of care provision that sits between acute inpatient and community support services. People were also concerned that social and healthcare services were not effectively integrated.</p> <p>The most common suggestions from respondents were that Telford and Wrekin was in need of a step down/up service, a crash pad type service and more support with crisis care. There was a strong feeling that community care needed the option of a service that offered respite to carers and somewhere for service users to use when necessary.</p> <p>There was acknowledgement that there are issues regarding the suitability of the Castle Lodge building itself and maintaining this particular building may not represent efficient use of public monies, thus if a facility was to remain in Telford then other premises may need to be considered.</p>
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### 12. What were the topics that attracted critical comment? What is the Trust & CCG response?

Issue	No of responses to the issue	Trust & CCG response
Will the resources saved be reinvested into local services?	8	There has already been significant investment in community mental health services over recent years. Further work is in progress to consider future options and models of care.
What plans are there to provide short term housing and facilities for the homeless in T&W?	3	Patients with no fixed abode, once mental health needs have been supported, is a multi-agency function. Social services, homeless agencies and healthcare do need to work better together.
The Trust and CCG should explore future options for alternative uses of the facility and consult/engage on options and proposals.	1	The Trust and CCG will jointly explore the potential options for the future of Castle Lodge in conjunction with the overall model of care and needs of the population of &W as a whole. In doing so there will be further engagement with a range of stakeholders on the options identified.

Lack of consultation / communication prior to the decision to close beds at Castle Lodge.	6	We accept that the initial temporary closure could have been handled in a more inclusive way and the senior team has learned lessons from this. Through this current consultation we have sought views and want to listen. Also over the last 3 years there has been significant involvement and engagement on broad modernisation across T&W and Shropshire, as this paper highlights.
Requirement for crisis house type provision for the care of T&W residents.	5	The Trust is looking to co-locate Crisis/Home Treatment and CMHT in a more suitable, accessible site.
Services and Castle Lodge should be retained and possibly expanded	3	The site itself is too small to expand as there is only one access, which would cause a lot of traffic for residential street, and there is no guarantee of obtaining planning permission for this.
T&W has no other alternative to hospital admission and travel distance to Redwoods & Stafford is an issue for Service Users and their visitors	11	We have invested in developing our community services in order to provide care in the least restrictive environment and as close to peoples' homes as possible. Whilst we believe that acute mental health services are best provided in fewer specialist Units we do recognise that their location can cause transport issues. Nonetheless, more acute local Units would not be financially viable nor best use of scarce resource.
Service Users should be able to access multi-agency, integrated community care, which includes for example volunteers who could help within the community and telephone help lines.	2	We recognise that in the development of future services we need to work in a more integrated way across all health and social care sectors.
Discharge can be rushed and must ensure that a follow up after discharge is undertaken	1	If a follow up is not undertaken the service user or carer should always notify their care coordinator. The Trust is under contract to ensure 95% of all service users are followed-up within 7 days of the date of discharge.
Felt that crisis resolution was not always available, make poor decisions and home treatment not suitable in some cases, therefore a need for a step down/up facility	4	Our staff are well trained and senior clinical staff are always on call. Advice is always available from the Psychiatrist on call. Following on from this consultation there were individual issues raised, which the senior team is reviewing and is dealing directly with the carers and service users involved.
Evidence to show that Castle Lodge was under-utilised and outdated before its closure – bed occupancy figures	4	The figures state that there was never 100% bed occupancy. These figures were placed on the Trust's website under consultations. Also there were inappropriate admissions being made to

			Castle Lodge and residents from outside of Telford area being admitted.
	Need a partnership approach with, Service Users, Carers, Voluntary sector to develop mental health care pathway which includes low level preventative co-ordinated support	2	Within Telford there are integrated teams but we recognise that in the development of future services we need to work better together, across all sectors of health and social care.
	Consultation dates were not widely advertised	1	The events were advertised through full press releases to local media, through social media and details placed on the Trust's website. Also event details were leafleted around the local area and emails sent to a number of relevant organisations. The promotion process and detail is highlighted earlier in this paper. In benchmarking with similar NHS consultation processes the engagement and degree of feedback was of a high level.
	What analysis was done prior to closure/consultation to assess the needs of the Telford and Wrekin population regarding community, step down/up, and social care provision?	1	The unit was temporarily closed for reasons of clinical effectiveness and risk.
<b>13. What were the main areas attracting support locally?</b>			
	<p>The main areas of support were:</p> <ul style="list-style-type: none"> <li>• That the quality of care offered at Castle Lodge was outstanding.</li> <li>• Local investment to develop alternative services for local people.</li> <li>• Better integration of health and social care.</li> <li>• Further engagement on both changes to service provision and potential disposal of Castle Lodge if that is the outcome.</li> </ul>		
<b>14. What was the general tenor of responses? Specifically with regard to:</b>			
	Quality & safety	The high quality of service and safety offered to service users was highlighted in many of the responses.	
	Transport	The general theme with regard to transport was that Shrewsbury and Stafford were a significant distance for Telford service users to travel. Also family members and visitors may not be able to easily travel further afield.	
	Finance	Should Castle Lodge be sold people expressed an interest in where any funds raised would be spent. They want reinvestment of funds in local services.	
	Impact on residents	Many of the local residents of Telford felt there was a need for a local service for mental health service users in Telford and Wrekin	
	Bed closures	There was some interest in how the Trust and CCG analysed the reduction of beds for the Telford and Wrekin community. Also interest in the Trusts statement that Castle Lodge was under-utilised.	
<b>15. What were the main areas in which people said they would like to see improvements made?</b>			
	The consultation asked in what areas people would like to see improvements in mental health services. There were 4 core themes that people were keen to see:		

- More effective Integration of care
- Local provision for local people
- Service gap between acute inpatient and community support
- Local engagement with residents on future options for use of Castle Lodge site

Some of the qualitative responses, grouped under the core themes are highlighted as follows:

#### **Integrated Care**

- Investment in 3<sup>rd</sup> sector services similar to those provided by MIND, Path House and Oak Paddock.
- Development of future models of care to include voluntary and third sector agencies that could provide things like a 'buddying' system of volunteers to help maintain people in the community.
- Improved communication between mental health and other healthcare providers, together with better integration of mental and physical healthcare and improved partnership working between commissioners and providers.
- Improved awareness of mental health.
- Multi-agency funded and staffed mental health services with increased use of personal budgets.

#### **Local services for local people**

- Local reinvestment of funds within Community Mental Health Teams and Crisis Resolution Home Treatment services to provide more support at an earlier stage and development of local alternatives to formal admission.
- Improved 'prevention' services and more support for low level anxiety in addition to the service provided by MIND (Sutton Hill).
- A single community team for Telford and Wrekin, centrally located closer to the town centre.
- Locally provided places of safety for mental health sufferers.
- Awareness raising and increased understanding/education for GPs about mental health conditions and their management.
- Comprehensive local assessment of need and unmet need to inform future community service provision.
- Increased service provision for young people.

#### **Gap between inpatient and community support**

- Locally available step up/step down care including sub-acute care for when home treatment is not effective.
- Improved specialist skills and training particularly in crisis resolution out of hours care.
- Provision of local crisis beds or crash pad facility that is available out of hours.
- Improvements in staff skills around listening and holistic person-centred care.
- Facilities/integrated care for homeless people following their discharge from acute inpatient care.
- Transparent 'buffer' arrangements for bed capacity should Redwoods beds become full and unable to accept admissions.
- Improved discharge planning that ensures NICE guidance is followed and provision of appropriate follow-up care with better continuity of familiar staff.
- Increased provision of cognitive Behavioural Therapy, therapeutic intervention and occupational therapy.
- Single unit that provides beds for older persons with mental and physical healthcare needs, enablement and intermediate care.

	<ul style="list-style-type: none"> <li>• Provision of respite care for carers as well as service users.</li> </ul> <p><b>Local engagement of residents regarding future options</b></p> <ul style="list-style-type: none"> <li>• The local community could raise funds to support Castle Lodge financially.</li> <li>• The lessons learned regarding communication and consultation prior to the temporary closure should be used inform future engagement.</li> <li>• Local residents and the Town council need to be involved in understanding potential future options of Castle Lodge.</li> </ul>
16.	How have the staff been given ample opportunity to play an active part in dialogue and deliberations around the proposals?
	Staff have been made aware and given the opportunity to give their opinions concerning the options for Castle Lodge. They were free to attend any of the public meetings and were able to respond to the consultation via the Trust website or email. Additionally the locality team leaders are always a conduit for opinion and concerns of staff.

#### 4. Consultation summary

In summary:

The consultation process was well advertised and promoted, leading to positive turnout at events/meetings and a good level of response when compared to other similar NHS consultations.

People were keen to express a view about the high quality of care provided by Castle Lodge staff.

The majority of respondents did not specifically answer the question of which of the 2 options were favoured but there were strong views highlighting perceived gaps in current local service provision and there were many suggestions for improvement.

There were four main themes that emerged:

- More effective Integration of care.
- Local service provision for local people.
- Service gap between acute inpatient and community support.
- Local engagement with residents on future options for use of Castle Lodge site.

#### 5. Recommendations

From the analysis of the consultation it is recommended:

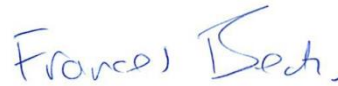
1. To close the bed base provision at Castle Lodge, for the purpose that they were originally intended.
2. In line with Health Scrutiny guidance , the CCG and the Trust have
  - Met with the Chairs of Telford and Wrekin and Shropshire joint HOSC on the 16<sup>th</sup> April 2015 to discuss the outcome of the consultation and the responses received, with the recommendation to close the Inpatient provision in Castle Lodge.

- South Staffordshire and Shropshire Foundation Trust Board will consider the paper and the recommendations on 28<sup>th</sup> May 2015.
  - Telford and Wrekin Health and Adult Care Scrutiny Committee will discuss and comment on the paper in June 2015 (date to be confirmed), prior to it being tabled at Telford and Wrekin CCG Board on 14<sup>th</sup> July 2015 for consideration and ratification of the recommendation regarding the future use of Castle Lodge.
3. To support a commissioning review to be completed jointly by Telford & Wrekin CCG and the Council:
- To clarify the current investment profile for mental health services.
  - To identify service redesigns to address the issues highlighted through this consultation, e.g. provision of crisis support. The review will inform the commissioning intentions for mental health provision for 2016/17 onwards for both organisations. Through this mechanism the partners will ensure that we optimise investment in the 'right' services to improve both outcomes and value for money.



Lesley Crawford  
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South Staffordshire and Shropshire Healthcare  
NHS Foundation Trust



Fran Beck  
Executive Lead for Commissioning

NHS Telford and Wrekin CCG

20 May 2015