

**HEALTH OVERVIEW AND SCRUTINY PANEL  
7 OCTOBER 2010**

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**CONSULTATION ON MENTAL HEALTH INPATIENT FACILITIES  
Head of Overview and Scrutiny**

**1 INTRODUCTION**

- 1.1 The Berkshire Healthcare NHS Foundation Trust has issued a consultation on mental health inpatient facilities serving east Berkshire. The Health Overview and Scrutiny Panel offered views on the approach to the consultation, it is to receive a presentation on it, and the Panel has the opportunity to respond to the consultation.

**2 SUGGESTED ACTION**

**That the Health Overview and Scrutiny Panel:**

- 2.1 **Notes the correspondence with the Berkshire Healthcare NHS Foundation Trust concerning the public consultation, at Appendices 1 and 2.**  
2.2 **Considers the Panel's response to the consultation.**

**3 SUPPORTING INFORMATION**

- 3.1 The Panel was invited to comment on the approach planned by the Berkshire Healthcare Trust to the consultation. This was considered at an informal meeting of the Panel on 21 July, and the Panel Chairman subsequently wrote to the Trust on 23 July (Appendix 1). The Trust responded on 30 July (Appendix 2).
- 3.2 The Panel is to receive a presentation by the Berkshire Healthcare NHS Foundation Trust, concerning the consultation on mental health inpatient facilities. The consultation document is attached.
- 3.3 The specific questions posed by the Trust are reproduced in Appendix 3 to this report.

Background Papers

None

Contact for further information

Richard Beaumont – 01344 352283  
richard.beaumont@bracknell-forest.gov.uk

Doc Ref

08 Berks Healthcare Consultn cover report

## Appendix 1



Philippa Slinger  
Chief Executive  
Berkshire Healthcare NHS Trust  
Fitzwilliam House  
(2nd/3rd Floors)  
Skimped Hill Lane  
Bracknell  
RG12 1LD

23<sup>rd</sup> July 2010

Dear Philippa,

### **PUBLIC CONSULTATION ON MENTAL HEALTH INPATIENT FACILITIES**

At the meeting of our Health Overview and Scrutiny Panel on 17 June, you said you would welcome our comments on the draft consultation document for mental health inpatient services. Our Health Overview and Scrutiny Panel Members met this week to consider it.

We have a number of queries and suggested changes to the draft consultation document, as follows.

#### Page 1

Paragraph 3 of the context section refers to the current number of people living in East Berkshire, and the current resources deployed. It would be helpful if this could be expanded to include the future projections which the proposals in your paper are designed to address. This is particularly relevant for the anticipated growth in the over-85 population, also a distinct growth in dementia sufferers in their 50's.

On the final paragraph, could you please confirm that Dr Foster Intelligence has the necessary experience and expertise for this consultation?

#### Page 2

The second paragraph in the 'Why we are seeking views' sections could usefully be updated to reflect the key changes in the recent White Paper.

The fourth paragraph (and elsewhere) refers to services being provided over the next three years, and it would be helpful to make clear the long term position.

The final paragraph refers to an overall reduction in bed numbers. We think the reasons for that need to be more clearly set out either here or in the public meetings; also we would question whether this is consistent with the expected growth in demand caused by the forecast substantial growth in the over-85 age group.

### Page 3

On the first paragraph:

- Is the investment referred to going to be completed within 12 months?
- On what basis has the figure of 64 beds been derived?

### Page 4

We regard options 2 and 4 to be a dilution of service.

We note that the Trust have decided to delete option 3, and suggest that the document should briefly explain why an option involving Heatherwood Hospital has not been included.

We have the following queries and concerns about the third paragraph, concerning transport assistance, which we think is an important issue for service users and their visitors:

- How has the sum of £100,000 been calculated?
- We would like to see some demographic and travel data included in this section of the document.
- Is the sum an annual, ring-fenced amount?
- Will this sum be sufficient to guarantee that the extra travelling costs of patients and visitors are reimbursed?
- Will this sum be available in perpetuity?
- Has the Trust approached the transport companies to enquire whether they could provide assisted travel?

### Page 5

The presentation of financial information at the top of page 5 is confusing:

- The fall-off in expected income does not seem consistent with the government's statement in the recent White Paper that they will increase health spending in real terms over the next five years. Consequently the savings requirement of £12 million may be overstated.
- In the second table, it is not clear whether this covers a two year period (implied from the title '2010-2012') and whether the savings requirement and cost reductions are annual or cumulative sums.
- We would welcome some details of exactly how the Trust will reduce the cost of management and administration, and make service efficiencies.

The paragraph in the middle of the page says 'the other three options are more expensive' – it would be helpful to have some quantification of the amounts.

In the section headed 'What we know so far':

- We think it is important to canvas the views of visitors as well as service users.
- Could you please advise how many people were approached to take part in the survey, and over what period the survey took place?

## Page 6

In the first paragraph, could you please advise how many people were approached to take part in this survey?

In the second paragraph, could you please advise what was the median (as opposed to average) travel time. Also was the average of 23 minutes from peoples' home or the start point of their journeys?

Members were interested to see the results of the research, and endorse the view that the quality of service is more important than its location.

## Page 7

In the final paragraph, we suggest that respondents are also given the opportunity to make any other observations they may have.

## Page 8

Whilst Option 1 is clearly most likely to be adopted, we are concerned that the case for it should be put forward in a balanced way. For example: there will be costs of relocating staff from their existing locations to Prospect park; and operating from a single site brings a higher risk of business continuity than with multiple sites.

## Page 12

We strongly suggest – if only for cost reasons - that it would be unjustified to put a leaflet through every door in East Berkshire. Given the traditionally low response to earlier NHS consultations, the limited interest in mental health issues, and the pressures on NHS resources, we think it would suffice to make the leaflets available at public buildings and on demand, sending it to everyone known to the Trust, and having a web presence, along with the programme of public meetings. Bracknell Forest Council can also publish the consultation on our website if you wish.

Finally, on some general points:

- Whilst the proposals are concerned with inpatient services, we would like to make the point that the Trust must not cut back on local services; for example the Coopers Hill facility in Bracknell is a lifeline for young people here.
- Can you confirm the proposals will not increase the reliance on local authority adult social care services?
- Could the consultation paper explain why the outcome of the 2008 consultation – the decision to build an in-patient unit at Upton Hospital – was not implemented?
- We suggest the document should have fuller references to Day Care, and Carers.

We will be putting the consultation on the agenda for our Health O&S Panel meeting on 28<sup>th</sup> October, and would be obliged if you could be present. Meanwhile, if there is anything in this letter you would like to discuss, do please contact Richard Beaumont on 01344 352283.

I would ask for a response to this letter by the end of July, and can you please copy the response to Richard Beaumont here?

Yours

**Councillor Ian W. Leake**  
**Chairman, Health Overview and Scrutiny Panel**

Copy:  
Dr Philip Lee MP  
Adam Afriyie MP  
Councillor Dale Birch  
Glyn Jones  
Health Scrutiny Panel Members



Councillor Ian W Leake  
Bracknell Forest Council  
Easthampstead House  
Town Square  
Bracknell  
RG12 1AQ

30<sup>th</sup> July 2010

Dear Ian,

Thank you for taking the time to respond so fully to Philippa, it is a very helpful reply and many of your suggestions will be included in the document and I will not therefore refer further to them in this letter. Philippa is on holiday at the moment and given your request that we reply before the end of July, I trust that you will accept a response from me.

I will respond to your points in turn:

- With regard to Dr Foster Intelligence, we conducted a procurement exercise for the independent support to the consultation process, receiving bids from a number of organisations that we had pre qualified as being capable of performing this type of work. We are confident from our own experience and those of others that Dr Foster are an excellent choice.
- The issues that you raise with regard to bed capacity were considered during the “Right Care Right Place” consultation in 2008 that generated the plan to concentrate East Berkshire inpatient beds on the Upton site. The actual bed numbers were informed by a specific health planning analysis which was undertaken by a specialist organisation. The factors that were relevant at the time in terms of demographic effects are relatively unchanged. The fact that our plans towards the Upton site had not progressed beyond a point when a further consideration was still possible is of course helpful in view of the changed economic circumstances. Since the conclusion of the previous consultation, the Trust’s work on the Upton scheme had concentrated on the activities to develop a business case and in particular to identify favourable funding arrangements for the scheme. The business case had not been completed before the Trust commenced the work to review its services.
- We note the statement that you regard options 2 and 4 (now 3) to be a dilution of service. It would be useful to have an explanation of this perception.

- It is our intention to make the investment in services next year, ahead of the full implementation of whichever option is chosen.
- The decision to delete the Heatherwood option follows receipt of a letter from the Chief Executive of the Heatherwood & Wexham Park NHS Foundation Trust, which informed us that our tenure beyond the short term cannot be guaranteed given their plans for the ward space that we occupy. The level of investment that we would need to make in that site requires us to have long term access to their facilities.
- The £100,000 is a provisional sum applied to Options 1 and 2 and has been scoped based on running a transport service between agreed points during visiting hours (rather than reimbursing travel claims). We intend to use the consultation process to develop these ideas further, given the ability to interact directly with potential users of the service. We anticipate that the service will be adapted to meet the need identified and that it will exist all of the time that demand for it justifies the cost. It is not intended to cover all of the travelling requirements of all possible visitors and it will be focused on the groups identified as being most in need given that many residents in East Berkshire will not have any material change in travel costs as a result of the potential options for service.
- We will make the financial information clearer in the document although it is proving a challenge to achieve clarity, simplicity and transparency simultaneously. Our income is almost entirely derived from the two PCT health commissioners in the County and the figures we have used are regarded as the best case outcome that we can achieve. The rationale for this is that a marginal increase in real terms as defined by CPI falls a long way short of the real inflation rate in the NHS given ever increasing medical capability, expensive but valuable drug therapies and the demographic effect and population growth element that you refer to. This typically means that any increase less than 10% annually requires cost improvements by the NHS and even during the last 5 years, when settlements have been circa 7%, we have had to deliver significant and recurrent efficiencies to enable our services to be able to continue and be improved and our income growth as a Trust has been significantly less than the headline figure.
- The annual financial shortfall is in the order of £4m and consequently over a three year period we need to find £12m of recurrent benefits that deliver value every year thereafter and we have no guarantee that that will be the end of the matter. Put another way we need to deliver £4m in the first year, £8m in the second and £12m in the third or £24m over the three years in total.
- With regard to your questions regarding the transport survey, we have contacted the organisation that conducted the work to clarify these points. At the time of writing we are awaiting a response and (mindful of your request to respond by 30<sup>th</sup> July) we will forward this information once it is available.
- Financial evaluation was performed on a "differential cost" basis and therefore costs that would be the same or very similar have been ignored. The cost of additional staff travel has been scoped and included, although accuracy will only be possible when we know exactly who will be affected.
- The consultation covers our plans to change Inpatient Services and we are looking at all other areas of cost given that although a very important element of our plans, £2m is still only one sixth of what we need to achieve over three years. I cannot therefore give assurances that other areas of service will not be affected. Our broader plans are however to make other savings through efficiencies rather than service reductions and as things stand at the moment, we believe that we can deliver £12m without reducing

services to any significant extent. If commissioners require even higher levels of savings then it is very likely that we will be unable to sustain this position as we are stretching every sinew to deliver the £12m as it is. We are not relying on any "cost transfer" to social services in our plans and have engaged senior officers within local authority organisations at every stage.

- We note the comment questioning the plan to send leaflets to all households in East Berkshire. However, you will appreciate that it is essential that we make every effort to seek to engage local people in the consultation process and this is a relatively inexpensive means to achieving a wide coverage.

I am most grateful for your comments on our proposals and I will ensure that a copy of the final document is sent to you on the 11<sup>th</sup> August, when we intend to publish the final version.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Julian Emms', with a stylized flourish at the end.

**Julian Emms**  
**Deputy Chief Executive**

Copies to  
Dr Philip Lee MP  
Adam Afriyie MP  
Councillor Dale Birch  
Glyn Jones  
Health Scrutiny Panel Members  
Philippa Slinger



### **Appendix 3**

## **BERKSHIRE HEALTHCARE NHS FOUNDATION TRUST – CONSULTATION ON INPATIENT FACILITIES**

### **Question 1**

To what extent do you agree or disagree with the aim of providing all mental health inpatient services at one site in Berkshire (Prospect Park Hospital in Reading)?

Please select ONE of the following.

Agree Strongly	Agree	Neither Agree nor Disagree	Disagree	Disagree Strongly	Don't Know
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please indicate below any particular reasons for your choice.

### **Question 2**

To what extent do you agree or disagree with the aim of retaining mental health inpatient facilities within the East of the County?

Please select ONE of the following.

Agree Strongly	Agree	Neither Agree nor Disagree	Disagree	Disagree Strongly	Don't Know
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please indicate below any particular reasons for your choice.

### **Question 3a**

To what extent do you agree or disagree with the Trust investing NHS funds to maintain and improve community services for people with mental health needs?

Please select ONE of the following.

Agree Strongly	Agree	Neither Agree nor Disagree	Disagree	Disagree Strongly	Don't Know
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please indicate below any particular reasons for your choice.

### Question 3b

To what extent do you agree or disagree with the Trust investing NHS funds to improve inpatient facilities?

Please select ONE of the following.

Agree Strongly	Agree	Neither Agree nor Disagree	Disagree	Disagree Strongly	Don't Know
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please indicate below any particular reasons for your choice.

### Question 4

To what extent do you agree or disagree with the aim of having good transport links (including public transport services) to sites providing mental health inpatient services?

Please select ONE of the following.

Agree Strongly	Agree	Neither Agree nor Disagree	Disagree	Disagree Strongly	Don't Know
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please indicate below any particular reasons for your choice.

### Question 5

To what extent do you agree or disagree with ensuring that people across Berkshire who need mental health inpatient care are admitted to facilities of a comparable standard (in particular that they have their own bedroom and that their ward will have direct access to an outside garden area)?

Please select ONE of the following.

Agree Strongly	Agree	Neither Agree nor Disagree	Disagree	Disagree Strongly	Don't Know
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please indicate below any particular reasons for your choice.

### Question 6

Of the criteria declared within the consultation document which the Trust will be using to make its decision on the future of mental health inpatient services, which would you consider to be the most important? Please identify and rank your top three considerations in order of your priority (1 to 3, with 1 indicating the most important).

Criteria	Rank (1 to 3)
Does the option have a clinical / quality evidence base?	<input type="text"/>
Does the option maximise the benefits that we can offer to the majority of service users?	<input type="text"/>
Will the option ensure we can provide care that meets our Quality and Financial regulator's requirements?	<input type="text"/>
Does the option offer clear Value for Money for the taxpayer?	<input type="text"/>
Does the option have the support of GPs?	<input type="text"/>

Overall, to what extent do you agree or disagree with the criteria declared within the consultation document?

Please select ONE of the following.

Agree Strongly	Agree	Neither Agree nor Disagree	Disagree	Disagree Strongly	Don't Know
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please indicate below any particular reasons for your choice.

### Question 7

How do you rate the options in order of preference? Please rank them from 1 to 3 (with 1 being your most preferred) and add any comments you may have.

#### Option 1

All inpatient services to move to Prospect Park, Reading. All current wards in the east of the County to be vacated, in line with the Trust decision following the public consultation in 2008.

Your ranking for Option 1:

If you have any specific comments on this option, please provide this in the box below.

#### Option 2

All inpatient services to move to Prospect Park Hospital except for those for older people, which would be located in Charles Ward, St Mark's Hospital, Maidenhead. The ward at St Mark's Hospital would be redecorated and new furnishings provided (the building itself cannot be altered to provide single room accommodation).

Your ranking for Option 2:

If you have any specific comments on this option, please provide this in the box below.

**Option 3**

The creation of a new mental health inpatient unit at Upton Hospital to provide all general adult and older people beds for people from East Berkshire. All current hospital beds in East Berkshire would be vacated, in line with the Trust decision following the public consultation in 2008.

Your ranking for Option 3:

If you have any specific comments on this option, please provide this in the box below.