

Briefing Paper for Overview and Scrutiny Committees

September 2010

Proposed Changes to Mental Health Services in central and eastern Cheshire

Contents:

Context for these proposals	2
Summary of proposals.....	3
Key tests for service change	3
Consultation on proposals.....	4
Appendix 1: Prioritisation Process - toolkit	5
Appendix 2: The Willows Day Services, Macclesfield: Substantial Variations or Developments to Services Document.....	7
Appendix 3: Learning Disability Respite Services, Riseley Street, Macclesfield: Substantial Variations or Developments to Services Document	10

Proposed Changes to Mental Health Services in central and eastern Cheshire

The attached paper has been written to advise Overview and Scrutiny Committees within the area served by Central and Eastern Cheshire PCT (the PCT) of proposed changes to mental health services provided by Cheshire and Wirral Partnership NHS Foundation Trust (CWP) within the central and eastern Cheshire area.

This paper will be presented by CWP and the PCT at the September 2010 meetings of the following committees:

- Cheshire East Health and Adult Social Care Overview and Scrutiny Committee
- Cheshire West and Chester Health and Wellbeing Select Panel
- The Cheshire and Wirral Councils' Joint Scrutiny Committee

An initial briefing about the process used in the development of these proposals was given to the Joint Scrutiny Committee in July 2010.

Context for these proposals

As a result of changes to the way that some mental health services are funded, the PCT has identified a shortfall of £1.4 million in its budget to commission mental health, learning disability and drug and alcohol services.

CWP and the PCT have worked together over recent months to identify how services can be delivered even more effectively whilst maintaining and improving quality and ensuring that care is provided within the funding available. Both organisations are committed to ensuring that there is no negative impact on the quality of health care as a result of any changes.

The PCT and CWP have applied a prioritisation tool to all of the mental health, learning disability and drug and alcohol services that are commissioned from CWP for residents of central and eastern Cheshire. Use of the prioritisation tool ensured that the process of identifying potential service changes was fair, as all services were reviewed using the same criteria. Copies of the prioritisation tools are included in Appendix 1.

Having applied the prioritisation tools, three proposals have emerged, which are summarised below. Two of the proposals are also described in detail in Appendices 2 and 3. The proposed service changes will deliver the almost all of the recurrent savings required from 2011-12 onwards (The Willows: £561k, IAPT: £546k and Riseley Street, £245k).

Summary of proposals

- 1) CWP would no longer be required by the PCT to provide social support services at The Willows day centre in Macclesfield. All service users that access this service are already cared for by community mental health teams, and would be supported to use alternative day services through mainstream facilities such as colleges and local authority run schemes.
- 2) CWP would no longer be required by the PCT to provide learning disability respite care services from Riseley Street Macclesfield. Service users that require this specialist care would receive it from Crook Lane in Winsford.
- 3) CWP would redesign the central and eastern Cheshire Improving Access to Psychological Therapies (IAPT) service to make it more efficient, with no adverse impact on care for patients.

Key tests for service change

In August 2010, David Nicholson, the NHS Chief Executive, advised all NHS organisations that the Secretary of State had identified four key tests for service change, which are designed to build confidence within the service, with patients and communities. The tests, and our response to these, are as follows:

1) Support from GP commissioners

Individual GP commissioners have been involved throughout the prioritisation process and the wider GP community has been updated regularly about progress with this work through communication with the PCT's Commissioning Executive whose membership includes GPs from each of the Practice Based Commissioning Consortia. The Commissioning Executive has given their support to these proposals.

2) Strengthened public and patient engagement

There has been public and patient involvement in the development of the proposals to date through the project board for the prioritisation process, which includes representation from service user and carer groups (including LINK members). The prioritisation process has also been widely discussed at the PCT led service development group, which includes service users, and at a number of service user and carer forums including East Cheshire Mental Health Forum.

Plans to consult service users and the wider public on the proposals and their implementation are included in Appendices 2 and 3.

3) Clarity on the clinical evidence base

The clinical effectiveness and outcomes delivered by each CWP service that the PCT commissions were among the criteria considered as part of the prioritisation process.

4) Consistency with current and prospective patient choice

In the case of The Willows, patient choice will be ensured by facilitating access to services in mainstream locations and supporting organisations to ensure that service users from The Willows can access their services directly.

The proposals for Riseley Street are made in the context of a range of respite services being available in Cheshire including health respite provision at Crook Lane in Winsford local authority provided residential respite services and other options for individualised support.

The redesign of IAPT services is intended to increase efficiencies and productivity within the service and has no implications for levels of patient choice.

Consultation on proposals

Guidance is sought from the committees as to the level of consultation that is required relating to each of the proposals outlined above and described in full in Appendices 2 and 3.

The first two proposals would affect 115 service users at The Willows and 22 at Riseley Street. The PCT and CWP believe that the focus of consultation activities should be on minimising the impact of any service changes by supporting individuals and their families and carers to make a successful transition to alternative provision.

Staff consultation is already underway and will continue in line with CWP management of change policy.

Once guidance is received from the OSCs, the PCT and CWP's draft communication and engagement plans will be revised accordingly and it is envisaged that consultation about the proposals will begin in October 2010. The PCT and CWP will continue to brief the OSCs throughout the consultation period as required.

FOR RESOLUTION: Guidance is sought from the committees as to the level of consultation that is required relating to each of the proposals in order for the PCT and CWP to fulfil their obligations in relation to the Local Government and Public Involvement in Health Act.

Appendix 1: Prioritisation Process - toolkit

The first stage in the process was to score each CWP service that is currently commissioned by the PCT against a set of 10 criteria as follows . The scoring was carried out by CWP staff including clinicians and managers and submitted to the Prioritisation Steering Group.

	SCORING CRITERIA SCALE			SCORE
	LOW 20 points	MID 30 points	HIGH 50 points	
1. Is there evidence that the service produces an effect?	If still experimental, case series or opinion	Modest evidence that the service works	Definite experience that the service works	
2. Magnitude of benefit (incl. impact on other services – wider benefits to society)	No benefit to society (no improvement in health or life expectancy)	Moderate benefit to society (moderate improvements in health or life expectancy)	Major benefit to society (large improvements in health or life expectancy)	
3. Numbers that will benefit	Less than 10	Between 10-499	>500 people who would benefit	
4. Total cost of development	More than £500,000	Between £500,000-£50,000	Less than £50,000	
5. Patient Acceptability/strength of local feeling	Patients find the service unacceptable, no local interest	Patients find the service somewhat acceptable, moderate local interest	Patients find the service highly acceptable, massive local interest	
6. National requirement or NHS Target	If it addresses only 1 target or national requirement	If it addresses only 2/3 targets or national requirements	If it addresses only 4 or more targets or national requirements	
7. Addressing health inequality or health inequity – improving access to a service - i.e. where patients have not had service	It doesn't address inequality or inequity	It partially addresses inequality or inequity	It completely addresses inequality or inequity	
8. Only treatment or alternative	Many other treatment options with better outcomes	Other options but equivalent outcomes	No treatment options at all	
9. Innovation – demonstrates new ways of working with evidence of improved outcomes	No new ways of working	Limited new ways of working	Entirely new way of working	
10. Quality – delivers outcomes that are meaningful to patients and carers, delivered with dignity & respect	No/limited impact on meaningful outcomes	Some impact on meaningful outcomes	Significantly improves meaningful outcomes	

Each service was then impact assessed using the tool below:

	IMPACT/RISK	Insignificant	Minimal	Significant	Severe	Catastrophic
Score						
1	Patient and Public	No reduction in accessibility 0	Majority of patients continue to receive a service in their locality 5	Service still available within PCT area 10	Limited service available in PCT. Service available only if full referral criteria met. 15	No service available 20
2	Political / PCT reputation	Media coverage-little effect on public confidence/staff morale 0	Local media – short term – minor effect on public attitudes/staff morale 5	Local media –long term –moderate effect – impact on public perception of PCT and staff morale 10	National Media <3 days-public confidence in organization undermined 15	National/International adverse publicity >3 days 20
3	Impact on other service providers	No impact on other service providers 0	Minimal increase in demand 5	Significant increase in demand which stretches other service providers 10	Severe increase in demand. Severely stretches other service providers 15	Demand increases beyond service capacity 20
4	Financial risk of decommissioning	No financial impact to health economy 0	Minimal financial impact to health economy- <50K 5	Significant financial impact to health economy £51-200K 10	Severe financial impact to health economy £201-500K 15	Inevitable catastrophic impact >500K 20

All of the evidence and scores were reviewed by the Steering Group, who then agreed the proposed service changes.

Appendix 2: The Willows Day Services, Macclesfield: Substantial Variations or Developments to Services Document



Cheshire and Wirral Partnership 
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PRO-FORMA: CONSULTATION ON SUBSTANTIAL VARIATIONS OR DEVELOPMENTS TO SERVICES: LEVEL 2

1 Title of Proposal:
Closure of the Willows Day Services, Macclesfield

2 Summary Rationale

Central and Eastern Cheshire PCT (CECPCT) have recently undertaken a prioritisation exercise of all commissioned mental health services within Cheshire And Wirral Partnership NHS Foundation Trust (CWP), and, as the Willows offers services which are available via other social support channels, and similar services are not commissioned from CWP in other areas of the Trust, it is proposed by CECPCT that it be decommissioned

3 Outline of Proposal

Within the CWP East Adult and Older People's Mental Health Services (A&OPMH) Clinical service Line, work is in progress to redesign services to incorporate Access, Acute, Recovery & Rehabilitation pathways with a single point of access to mental health services.

The Willows is a part of the overall review of services commissioned by CECPCT; consideration has been given as to whether this is part of CWP NHS business, whether it benefits a sufficiently large number of patients to justify the overall costs, and whether there is equity of access across the CECPCT footprint.

The Willows offers day services to patients already under CPA care of a Community Mental Health Team (CMHT). It is a service which serves a small population of 115 patients based in and around Macclesfield at an annual cost of £561,000. It offers support to service users in, for example, wellness recovery action planning (WRAP), social skills training, computer literacy and horticulture, and operates a small print workshop, all in collaboration with external agencies such as Macclesfield and Reaseheath Colleges and Connexions. All of the services provided are available via mainstream Local Authority or Educational initiatives and service users could be supported to access these services. This type of day service is not available from CWP in other parts of the Trust footprint.

The proposal is to close the Willows; The Willows (based in Macclesfield) is only accessed by service users from the eastern part of the area i.e. Macclesfield but not Crewe nor Vale Royal, it serves a relatively small population of our 5332 Adult & Older People service users (currently 115 out of 1015 for Adult service users known to the Macclesfield Adult Community Mental Health Teams). These 115 people would be supported by their care co-ordinators to access alternative services as identified in their care plans which could include. Macclesfield College, Cheshire East Council (Social Care), Supported Employment, Reaseheath College, Macclesfield Volunteer Centre, Richmond Fellowship, Making Space and Macclesfield Town Football Club. Mind,

4 Consultation Process

4a.. Consultation already undertaken

The prioritisation exercise was undertaken jointly between senior representatives of CECPCT and senior managers and clinicians from the Adult and Older peoples Clinical Service Unit in CWP.

All CWP staff involved in the provision of the day service within the CECPCT area have been contacted by letter and invited to attend one of five briefing sessions regarding this and other proposed service changes. Staff briefings were delivered by Sheena Cumiskey, CWP Chief Executive, Andy Styring, and CWP Director of Operations on Thursday 05.08.10. Cathy Walsh, General Manager for the Adult and Older peoples Clinical Service was also present at all briefings to deal with queries and speak with staff at their request. A briefing for Governors was also delivered on 05.08.10.

The prioritisation process has been widely discussed at a number of service user and carer forums including East Cheshire Mental Health Forum.

The project board for the prioritisation process led by the PCT had representation from service user and carer groups via Link members.

There is also a PCT led service development group where the prioritisation process has been discussed and members have been briefed throughout the process.

4b. Proposed Consultation

If the proposal by CECPCT to decommission the day service delivered at the Willows is accepted then there will be two main aspects of consultation and further work required to be carried out.

1) Service users, Carers and Staff

Service users and their carers will be contacted individually advising them of the proposed change and accessible meetings led by the commissioner at CECPCT will be held to give people the opportunity to raise any concerns. We would explain how people will be supported to access mainstream services and the wider opportunities that this will bring. This will improve the social inclusion of people with mental health problems and contribute to challenging stigma – a key issue raised by many of CWP service users and carers.

Staff consultation will be carried out in line with Trust management of change policy.

2) Facilitating access to existing services in mainstream locations

We will work with partner organisations (eg. those listed above in section 3) to communicate the changes and to discuss the support they may need to ensure service users can access services directly (as opposed to outreach services at the willows.)

5 **Timescales**

From date of approval for this service change it is estimated that the service will be closed within 3 months.

Completed Pro-forma to be forwarded to Joint Overview and Scrutiny Committee for noting. Consultation and Negotiation Partnership Committee/ Local Medical Negotiating Committee for comment.

Appendix 3: Learning Disability Respite Services, Riseley Street, Macclesfield: Substantial Variations or Developments to Services Document



Cheshire and Wirral Partnership 
NHS Foundation Trust

PRO-FORMA: CONSULTATION ON SUBSTANTIAL VARIATIONS OR DEVELOPMENTS TO SERVICES: LEVEL 2

1. Title of Proposal:

Central & Eastern Cheshire Primary Care Trust (CECPCT) proposal is to decommission the provision of learning disability respite services delivered at 28 Riseley Street, Macclesfield

2. Summary Rationale

As a result of financial efficiencies Central & Eastern Cheshire Primary Care Trust have recently notified Cheshire and Wirral Partnership Trust of a reduction in income. In order to reach decisions about how this reduction in income can be accommodated CWP and the PCT have undertaken a '**prioritisation process**' to evaluate all CWP services that are commissioned for residents in central and eastern Cheshire. All services have been reviewed using the same criteria to ensure that the process is fair and both CWP and CECPCT have made a commitment to ensuring that there is no negative impact on the quality of health care as a result of any changes.

One of the outcomes of the prioritisation process is the proposal to decommission the respite service currently delivered at 26 Riseley Street in Macclesfield and consolidate all Cheshire health respite services for people with learning disabilities onto the Crook Lane site in Winsford. .

1. Outline of Proposal Background

There are a range of respite options for people with learning disabilities who live in central and eastern Cheshire. At present these include residential bed based services provided by CWP at Primrose Avenue in Crewe (due for closure), Crook Lane in Winsford, and Riseley Street in Macclesfield. Further residential respite services are provided by Cheshire East Council social services department at Warwick Mews in Macclesfield and at Queens Drive in Nantwich. In addition to these bed based services, people with learning disabilities and their families are able to make use of direct payments in order to fund alternative individual personalised options for support. This approach provides greater choice and flexibility than traditional bed based provision and allows families to be provided with a break from their caring responsibilities whilst still allowing people to access the support necessary for them to remain within their home environment and participate in preferred activities in familiar surroundings.

Following a previous consultation process plans are in place for the closure of the respite service provided at Primrose Avenue in Crewe and consolidation of health respite services in central Cheshire on to the Crook Lane site. The closure of Primrose Avenue is due to take place on 13th September 2010. The respite needs of all clients who currently use the service at Primrose Avenue will be met for a transitional period at Crook Lane.

The previous consultation and planning process also confirmed eligibility criteria for health respite services provided by CWP. The agreed eligibility criteria and assessment process will soon be used to review the needs of all existing respite service users, i.e. including those who have received a service at Primrose Avenue, Crook Lane and Riseley Street. This work will commence in September 2010. Respite services provided by CWP in central and eastern Cheshire will then be allocated on the basis of the outcome of this assessment process and the resources available.

CWP will continue to provide a mix of health and social respite for an agreed period of time to allow for the transition resulting from the closure of Primrose Avenue; there is a commitment from CWP, partners in the local authority and the PCT that all people who currently use the service at Primrose Avenue will be provided with health respite services at Crook Lane during the transitional period.

Where the assessment process in relation to Primrose Avenue service users identifies the need for health respite this will continue to be met at Crook Lane. Health and social services staff will work together to develop individual plans with timescales to provide alternative social care respite solutions for service users whose needs do not meet the eligibility criteria for health respite.

This Proposal

The PCT proposal is to decommission the respite service provided at Riseley Street and for all health respite services in Cheshire to be consolidated into a single unit and provided out of Crook Lane in Winsford. The proposal is made in the context of a range of respite services available in Cheshire including local authority provided residential respite services and other options for individualised support.

Riseley Street Respite Unit provides up to 6 respite beds to adults with learning disability. 22 clients are currently in receipt of respite care at Riseley Street. This number has been static for some time and the rate of referral for respite care at Riseley Street had reduced to one per year for the past 3 years. As a result of reduced demand, the occupancy rate for Riseley Street is running at 45%.

During the previous consultation an exercise was undertaken to test out eligibility criteria for health respite services. The purpose of this exercise was to confirm eligibility criteria and develop and agree a standardised assessment process. This exercise involved table top assessments of all health respite service users. The findings from this exercise in relation to the 22 people who use the service at Riseley Street indicated that between 2-4 clients met the eligibility criteria for health respite (based on needs of client for a specialist health learning disability service), a further 4 clients were assessed as potentially being able to be supported in social care accommodation with some Primary Care support /Specialist Health Support. The exercise identified that the remaining 16 clients respite needs could be met within a social care environment or package of respite care.

As previously stated the needs of all respite service users are shortly to be assessed against the agreed eligibility criteria and assessment process. Whilst the outcome of the forthcoming assessment process may differ from the findings of the table top exercise as described above it is probable that this will result in a significant number of people being assessed as having needs that can be met with social care respite options.

It has been identified that the environment at Riseley Street has shortfalls, for example; it is not purpose designed, offers limited ground floor accommodation and upstairs areas are inaccessible for some service users, there is no catering or housekeeping provision and nursing staff therefore do the cooking and laundry.Some investment has been made recently to address these shortfalls however the age, layout and fabric of the building at Riseley Street means it is more difficult and costly to achieve the changes necessary to address all its shortfalls and make it fit for purpose.

The Trust has recently made significant investments in Crook Lane to ensure the Unit meets all environmental standards and represents a comfortable environment for service users.

As previously agreed CWP will assess all people who use the respite service at Riseley against the agreed eligibility criteria (this process is due to commence in September 2010). This will provide the basis for future allocation of health respite services and initiate joint planning to provide social care respite solutions for people whose needs do not meet the eligibility criteria for health respite. It has been identified that Crook Lane will be able to meet the needs of the small number of people who require health respite services into the future.

The assessment process will identify those people using the service who do not meet the eligibility criteria for health respite. Plans will be developed to provide services to these people either via use of existing social care residential respite services or through the establishment of individualized packages of respite care / short breaks. In addition work will be undertaken with commissioners to ensure the needs of this group of people are reflected in the joint commissioning strategy for respite care/ short breaks.

The Trust is not resourced to provide a day service during periods of respite care and most service users therefore continue to attend day services whilst in respite. Changes in transport arrangements will be required to ensure that service users are able to continue to travel to and from day services during respite stays. As part of the previous consultation transport arrangements have been discussed with the Local Authority Transport Department who have indicated that, with suitable notice they could plan for rerouting of existing transport to accommodate the changes arising from the closure of Primrose Avenue. Work will be undertaken to extend these arrangements to accommodate the changes resulting from the closure of Riseley Street.

4. Consultation Process

4a. Consultation already undertaken

The prioritisation exercise was undertaken jointly between senior representatives of CECPCT and senior managers and clinicians from the learning disability Clinical Service Unit in CWP.

All CWP learning disability staff involved in the provision of respite services within the CECPCT area have been contacted by letter and invited to attend one of five briefing sessions regarding this and other proposed service changes. Staff briefings were delivered by Sheena Cumisky, CWP Chief Executive, Andy Styring, and CWP Director of Operations on Thursday 05.08.10. Adrian Moss, General Manager for the Learning Disability Clinical Service Unit was also present at all briefings to deal with queries and speak with staff at their request. A briefing for Governors was also delivered on 05.08.10.

4b. Proposed Consultation

The learning disability Clinical Service Unit senior management team will work with the PCT to consult with service users, their families, carers and other interested parties on the proposal to close Riseley Street. Consultation will focus upon how the impact of these changes can be minimized, ensuring that the respite care needs of people who use the service at Riseley Street continue to be met. The consultation process will include discussion with:

- Service users and families / carers
- Local learning disability partnership board
- Local authority partners including transport departments

5. Timescales

As a result of a shortfall in the PCTs budget for mental health, learning disability and drug/alcohol services it has become imperative that CWP and CECPCT agree and implement plans for changes in services that will continue to meet the needs of the local population within the available financial envelope. It is therefore proposed that the closure of Riseley Street and transfer of health respite services in Cheshire to Crook Lane is achieved within 3 months of the approval decision.

Date of Report: 11th August 2010