Older people's mental health inpatient services consultation

Recommendations

3 September 2024

In partnership with:

South West Yorkshire Partnership NHS Foundation Trust

NHS West Yorkshire Integrated Care Board

Introduction

The purpose of the extraordinary programme board meeting on 03 September is to review the findings from the consultation and agree recommendation of the preferred option.

Consultation exercise and deliberations

Public consultation: 12 weeks through Jan – Mar 2024
Analysis of findings was commissioned independently of the programme.
Feedback that we delivered robust findings – report and EIA:

ICBJC and JHOSC both felt that the Equality Impact Assessment Report is robust and demonstrates that equality and diversity has been considered both in the consultation delivery and in the independent report of findings and that the key themes, identified and considered in the report.

These were tested with a range of stakeholders and in a workshop in August 2024

Assured that it's given us the correct themes need to be considered for the decision phase.

All of these findings have been taken into the decision-making process to support reach a recommendation of preferred option.

No other options were identified during formal consultation.

Initial scoring matrix

The table below summarises the overall scoring across the domains when weighted (for example, 8 out of 10 for quality would be weighted to 24 (out of 30)). This is based on the work done through to May 2023 to inform which options should be taken into public consultation.

		Quality Domains				Total quality score	Value for Money	Total
	Option	Quality (clinical)	Access	Deliverability / Sustainability	Strategy alignment			
Weight		30	20	10	10	**70**	30	**100**
1A	W19 dementia unit, 10 extra beds at Crofton (managed as 2 wards), Poplars not in this model	21	14	6	8	**49**	19.2	**68.2**
1B	W19 dementia unit, 6 extra beds at Crofton, Poplars not in this model	15	8	4	5	**32**	21.6	**53.6**
2	Crofton being a 26-bed dementia unit (2 separate wards), all other wards functional	18	12	6	8	**44**	19.2	**63.2**

Information used for review

Original options appraisal and rationale were reviewed . The review to reach a recommended option used the same criteria to rescore.

Updated information used:

Quality Impact Assessment – revised 2024
Travel Impact Assessment – revised 2024
Sustainability Impact Assessment
Strategic Alignment Assessment – revised 2024
VfM assessment
Equality Impact Assessment – updated post consultation
Consultation findings, including independent report, feedback from key stakeholder and workshop outputs.

Quality Domain

Option 1a is the strongest option from an equality perspective. 1a Gives the best option for more people over a greater span of time. **1a – increase from 7 to 8.**

Option 1b received negative feedback in relation to the lack of single sex wards for functional needs.

- No single sex option for functional needs if a patient wants or requires this.
- Inequality of access – this maintains a barrier of access, but 1a and 2 offer options to address the barrier as they include a single sex functional ward.
- Score for option **1b reduced from 5 to 4 in quality** as it means that there is more than one key area that can't be met: though mitigations could be put in place to manage, this is sub optimal.

Option / Weight	30
1A	21 **rescored to 24**
1B	15 **rescored to 12**
2	18 **no change**

Option 2 – no change.

People with functional needs more likely to benefit from en-suite but no / very limited access to this in option 2. Option 1a has no/very limited en-suites for dementia, but patients with dementia more likely to need bathroom/bathing support.

Access Domain

- Calderdale most impacted by the options and there is a greater impact with option 2. Extra travel for option 2 raised as key specific negative themes by people in Calderdale:
  - This option will create difficulties around transport for patients, carers and families (14 / 19%)
  - Locations are hard for patients, families and carers to reach (9 / 12%)
- The updated Travel Impact Assessment identified that whilst all options created extra travel, the overall impact of option 2 is greater (more people impacted and a bigger impact for those that are).
- Consultation theme in relation to access: the lower number of dementia beds in option 2 and whether there is capacity to meet demand.
- Consideration was given as to whether the access score for option 2 should be reduced but these issues were identified in 2023 options assessment and scored accordingly then.
- For criteria of access for **1a, 1b, and 2 options scores remain the same.** No additional considerations.

Option / Weight	20
1A	14
1B	8
2	12

Other domains – no change to scores

Sustainability

- The focus of the sustainability criteria was primarily on whether each solution could be sustained for a period of up to 10 years – see domain.
- Nothing to indicate a change to scores based on these criteria
- Contribution to wider sustainability plans could be factored in but based on existing criteria no change.

Strategic Alignment

- No significant changes but this will be validated the next WY MHLDA PB, where there is an update on priorities for Older people's work programme.
- Both option 1a and 2 scored well from strategic point of new, no new information to date that changes that.

VfM

- Agreed the previous assessment does not change.
- Noted though that Option 1b was not recognised as offering the same value for money in the consultation feedback compared to other options, even though it is lower cost.
- Score remains because it does not change the scoring assessment.

Though some scores to the options appraisal weren’t changed as a result of consultation, the findings supported the previous analysis and options appraisal that has taken place.

Revised scores following review of findings:

		Quality Domains				Total quality score	Value for Money	Total
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1A	W19 dementia unit, 10 extra beds at Crofton (managed as 2 wards), Poplars not in this model	21 **rescored to 24**	14	6	8	**49**	19.2	**72.2**
1B	W19 dementia unit, 6 extra beds at Crofton, Poplars not in this model	15 **rescored to 12**	8	4	5	**32**	21.6	**50.6**
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Based on the updated findings of the consultation and impact assessments, the overall ranking hasn't changed but some scores have.

Summary

Equality considerations have been woven through each of the domains.
JHOSC asked how travel factored in – part of access scoring above and considered.

Feedback from the consultation has reinforced what we knew but some feedback from consultation has changed scores resulting **in a clear recommendation for option 1a**

We have captured and considered the mitigations required and will factor these into the implementation plan.