

Finding a long-term solution for the inpatient mental health services previously provided at the George Bryan Centre

Communications and Involvement Plan



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This document follows previous communications and engagement (C&E) plans for the inpatient mental health services previously provided by the George Bryan Centre in south east Staffordshire. The contents are subject to discussions following the assurance process – the document sets out two anticipated scenarios and will be updated to reflect the required activity once known.

Background

Following a fire in the West Wing of the George Bryan Centre, Tamworth, in February 2019 – inpatients of the West Wing were transferred to St George’s Hospital in Stafford. The decision was also taken by the Midlands Partnership NHS Foundation Trust’s (MPFT) Board that the 12 inpatient beds on the East Wing supporting older adults should also be temporarily closed due to clinical safety reasons.

This closure impacts on two services:

- Acute inpatient for functional mental health illness for working age residents (18+) – currently transferred to St George’s Hospital in Stafford

- Inpatient beds for older patients (65+) (the majority of which had forms of dementia) – with a primary community model put in place to support their needs. If an inpatient stay were required, they would be transferred to St George’s Hospital in Stafford.

It was recognised a long-term solution would need to be identified to provide acute mental health inpatient services for adults with severe mental illness and older adults with severe mental illness or dementia who were previously supported at the George Bryan Centre.

In 2019, MPFT led a listening exercise to understand people’s experiences of using the services before the fire occurred. They held five events in south east Staffordshire and received a range of correspondence. More details about this activity are available on the [MPFT website](#).

This listening exercise was also held alongside a larger listening exercise by the Together We’re Better Partnership in summer 2019, which gathered views on a range of services including mental health. More details about this activity are available on the [Staffordshire and Stoke-on-Trent Integrated Care System \(ICS\) website](#).

Information gathered during these activities was considered by MPFT’s clinicians and staff to inform the development of proposals for the future of inpatient mental health services formerly provided by the George Bryan Centre.

The programme was paused in March 2020 to allow clinicians and staff to respond to the COVID-19 pandemic. It was restarted in 2021 with a sense-check involvement to understand any new considerations or experiences. The details of this work are available on the [dedicated Integrated Care Board \(ICB\) website page](#) for this programme.

Current position

This plan has been drafted to cover the period **after** the completion of the Business Case and the relevant corresponding governance steps required – it has been prepared in the event that any further formal involvement activity is necessary. Given the uncertainty, this plan includes two potential scenarios:

- Involvement to gather views before a decision is made
- Involvement to share information about a decision, after a decision has been made.

This **draft document** will support planning in the event that further involvement activity may be required to articulate the outputs of the activity since 2019, and to explain the latest position and proposed future of inpatient mental health services previously provided at the George Bryan Centre. Insight from our work in 2021 has identified a need to articulate the wrap-around services and community offer to ensure people are aware of the additional support available.

If required, any further involvement would include the service users, staff, the wider public, and other stakeholders.

Scope of this work

This involvement activity will inform the decision-making about the long-term solution to the inpatient services that have temporarily been suspended at the George Bryan Centre.

We recognise this work has connections with the involvement activity for the Community Mental Health Transformation Programme and the Mental Health Strategy for Staffordshire. Comments received will also be shared with these programmes to support the wider mental health vision.

Aims and objectives

In the event that further involvement activity to gather views is required, the aims of this would be to:

- inform and involve staff, service users, carers, carer representatives and other stakeholders about the work to date and the single viable proposal identified through the options appraisal process and wider involvement activity since 2019
- understand views about the Business Case and the technical group's recommendation about the single viable proposal detailed within it
- review the views of the service users, carers, and carer representatives to date to inform our approach to involvement to articulate the current position and the single viable proposal for the future of inpatient mental health services previously provided at the George Bryan Centre
- inform decision-making, by listening to the views of:
 - people involved in the 2019 and 2021/22 engagement activity and others who were not to understand if there is anything new/additional that needs to be considered
 - service users and carers living in south east Staffordshire who have experienced the temporary arrangements between February 2019 and July 2021
 - other stakeholders with views about the provision of mental health services.

We will seek to understand people's views on the proposal, and in particular:

- if there are any ideas we have not considered
- if there is any positive or negative impact we need to plan for if we decide to go ahead with this proposal
- how we can support people if these changes are agreed, including how we can support people with travel.

The objectives of this work will be to gather any further information needed to inform the decision by decision-makers to meet our statutory duties.

In the event that further involvement activity to share information is required, the aims of this would be to:

- inform and involve staff, service users, carers, carer representatives and other stakeholders about the work to date and outcome of the involvement activity since 2019 to identify long-term solutions for inpatient mental health services previously provided by the George Bryan Centre
- articulate the current position and the single viable proposal for the future of inpatient mental health services previously provided at the George Bryan Centre
- communicate the future solutions for inpatient mental health services previously provided by the George Bryan Centre.

Ongoing dialogue would continue with service users and other stakeholders through the usual and current channels during service delivery.

Key messages

- We're committed to an open and transparent dialogue with service users, carers and carer representatives, staff, and partners
- Clinical evidence and best practice shows that a community-led model of mental health is better for the individual than admitting them to hospital
- When an inpatient stay is needed, we want it to be delivered by specialists, as short as possible and focussed on recovery
- We are investing in long-term community mental health services
- This exercise is focused on the services and when this is complete, we will look at the building

Key spokespeople

The following key spokespeople will be media trained and will act as spokespeople for the ICB and MPFT.

Clinical spokespeople:

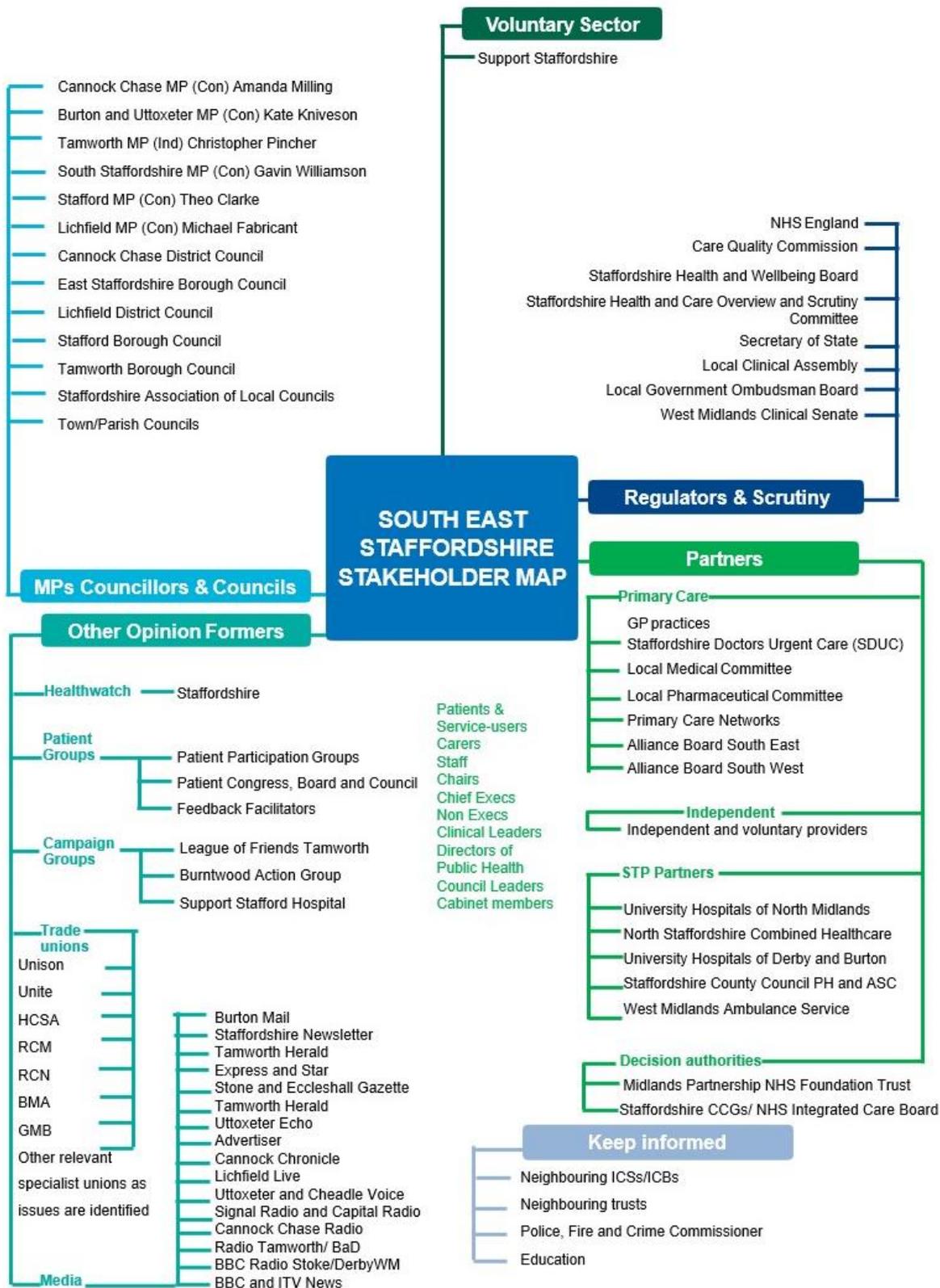
- Paul Edmondson-Jones, Chief Medical Officer, ICB
- Mental health clinician at MPFT – to be identified.

Executive spokespeople:

- Paul Edmondson-Jones, Chief Medical Officer, ICB
- Steve Grange, Deputy Chief Executive, MPFT

Key stakeholders

Our work to map stakeholders has been an iterative process throughout this programme of involvement activity and continues to be so. We have developed a comprehensive database of stakeholders. This is a live stakeholder management system which is updated as details change, and new or additional stakeholders are identified. This is the high-level stakeholder map:



Approach to involvement

Recognising that this phase follows involvement activity in 2019 and 2021/22, we will seek to build on the relationships already established and previous conversations with stakeholders as well as giving people who have not participated so far, the opportunity to have their say.

We will involve the Staffordshire Health Overview and Scrutiny Committee (OSC) in developing our approach to involvement and information activity in autumn 2022. This plan is an iterative document and sets out our initial thinking, subject to the views of the OSC and the ICB Board.

We have reflected on all previous engagement activity and are recommending a six-week involvement period. We believe this will give sufficient time for people to participate and provide an informed response – but is balanced against the demand on our clinicians during winter and also the potential for ‘involvement fatigue’. This timeline is subject to our discussions with the OSC and ICB Board. A midpoint review will guide whether there is a need to undertake more targeted activity with certain groups and whether there is a need to extend this timeline.

Face-to-face activity will be subject to COVID-19 Infection Prevention Control (IPC) requirements to ensure the public safety of staff and public who participate in events and discussions. We will also prepare for a **digital first** approach in the event national guidance or restrictions are in place. Should face-to-face events need to be replaced with online alternatives, this would be communicated at the earliest opportunity.

We would also be looking to launch a range of activities, including but not restricted to:

- **Survey** – To gather views about the proposal and understand if there is anything else that should be taken into consideration. The survey will also allow us to understand any potential impact of the proposal to retain the additional beds at St George’s Hospital, Stafford, and the enhanced community-led model. We would also seek to understand if there are any alternative considerations to this proposal that are viable
 - **Traditional responses** – In addition to our online survey, people will be invited to phone our Involvement Team on [*insert telephone number*] or to send a survey to our freepost address [*insert address*] to be received by the closing date. People can request a paper copy of the survey or can request support in completing the survey by phoning [*insert telephone number*] or emailing [*insert email address*].
- **Offer a meeting with campaigners/campaign groups** – To seek their views on the proposal, the impacts and the mitigations
- **Online meetings** – Two meetings (one in working hours and one during an evening). These will include a presentation from the ICB and MPFT and a series of breakout sessions to seek views on the proposal
- **Drop-in roadshow events** – These would be face-to-face, subject to any Government guidance and organisational policy in place at the time in relation to COVID-19. Recognising this involvement activity is in the autumn or winter, we believe drop-in events will give the opportunity for face-to-face dialogue but will mitigate any risk of infection transmission. There will be a minimum of four roadshows, in the key towns of Tamworth, Lichfield and Burton, and at least one event each at Sir Robert Peel Hospital and at St. George’s Hospital in Stafford. We will review the level of interest in and attendance at these events and organise more if appropriate. In selecting suitable venues, we will seek COVID-19 secure areas and areas of high. They will be promoted through traditional media, digital channels and through stakeholder channels.
- **Break-out rooms** – These would be provided at both face-to-face and online events and meetings to allow space for one-to-one discussions or to support people requiring time away from the main meeting
- **Targeted focus groups/one-to-one interviews** – We recognise that for some seldom heard groups, alternative channels may be needed. We will work closely with Healthwatch and the voluntary sector to identify existing community and voluntary groups that we can attend. These will be detailed in our action plan.

Provisional timeline

Milestone	Anticipated Date/Timeline
NHS England Assurance Process	November 2022
Update to Staffordshire County Council Health and Care Overview and Scrutiny Committee (status of programme and potential plans for involvement)	January 2023
Integrated Care Board to decide whether to proceed with involvement	January 2023
Potential involvement activity launches	February 2023
Analysis of involvement activity	April- June 2023
Develop decision-making business case	Summer/Autumn 2023

Communication channels

We recognise there is a need to keep people informed throughout this journey to develop a long-term solution for the inpatient mental health services previously provided by the George Bryan Centre. We will use the following channels to keep people informed:

Channel	Stakeholder	Frequency/timeline
Newsletters / intranet / team meetings, and dedicated focus groups	Staff	Monthly
Stakeholder bulletin – using existing bulletins through ICS and MPFT	Partners/other health and care professionals	Monthly
One-to-one virtual briefings/correspondence	MPs/Council Leaders/OSC	As required
Website – the dedicated website page will be updated to provide the latest information about the programme	All (including service users and public)	Ongoing
Media – we welcome the support of the media in helping us to deliver balanced information that will support patients to participate and share their	Media/public	At key milestones

views. We commit to providing regular and timely press releases that are written in plain language and, where appropriate, giving advance notice to reporters. We will launch an ongoing dialogue through the local media, including press releases, social media posts and radio interviews. We will respond to media enquiries in a timely manner, recognising the deadlines that reporters operate within		
Social media – promotion of opportunities to have say.	All	At key milestones
In-depth interviews with representatives or and members of seldom heard groups to gather people’s experiences and views as appropriate	Service users / interested public and seldom heard groups (targeted engagement)	Ongoing
Workshops to be organised to gather people’s experiences and views (as appropriate)	Service users/ interested public/seldom heard groups	TBC
Survey tool to seek feedback from people who cannot attend events	All	TBC

Communications and Engagement resources

We are developing a range of resources to support the planned involvement activity. The resources have been planned to support stakeholders who are interested in the subject matter and will be used as required and as appropriate.

Resources include, but are not restricted to:

Public Information Products:

- Integrated consultation document and survey – online. Including videos or animations where applicable

- Printed consultation document and survey. Links to online resources provided to facilitate access to videos/animations etc
- Summary consultation document
- Accessible consultation document and survey.

Promotional Information Products:

- Website content (including the Business Case and a range of case studies and further information)
- Handout flyer for events
- Poster to promote consultation and/or events. To include QR code to facilitate online access to materials. Translated posters to also be prepared
- Videos/animations
- Toolkit to support partners to promote on social media channels
- Press releases and media briefing
- Stakeholder updates (letters, emails and telephone scripts).

Event Products:

- Event registration form
- Event participation form, including demographic profiling questions
- Facilitator briefing notes and note-taking templates for events
- Presentations for deliberative online events
- Presentation for focus groups and voluntary sector events
- Voluntary sector collateral – presentation, facilitator booklet, and copies of printed promotional materials.

Supporting seldom heard groups

An Equality Impact Assessment (EIA) will be produced that outlines the approach to involving seldom heard groups. We will work closely with the ICS' Local Equality Advisory Forum (LEAF) and the voluntary sector to identify opportunities to involve and empower these groups to get involved.

We will ensure our communications are accessible by:

- Writing in plain language
- Using visuals (including diagrams, animations and accessible documents)
- Providing access to other languages, other document formats (large print, Braille, etc) and British Sign Language (BSL) interpretation when needed
- Arranging events to be at various times and days of the week to maximise attendance
- Asking people if there are any reasonable adjustments needed when attending virtual events and offering alternative ways for people to share their feedback (for example by phone)
- Providing reasonable adjustment and support, for example using interpreters or offering smaller focus groups with existing networks where appropriate.

We will build on our relationships with the voluntary and community sector, to utilise existing networks and their knowledge of working with seldom heard groups. Using these networks, we will work with trusted advocates, for example liaison officers for the homeless or the Gypsy, Roma and travelling communities to support conversations in a way that is approachable and understandable.

Action Plan

The activity set out below is indicative of what would be included in the event future public involvement is required. This is a summary of the key milestones.

Task	Description	Stakeholder	Timeline
TCl review of involvement document	TCl advice on involvement document	TCl	August – September 2022
Business case taken to ICB Board meeting	Approval to go to NHS E assurance	Public meeting	22 September 2022
Internal briefing for staff	West Midlands Clinical Senate Report published	Staff	September 2022
Stakeholder letter including MP briefing	West Midlands Clinical Senate Report published	Stakeholders including MPs/Councillors	October 2022
Press release and offer for proactive interviews	West Midlands Clinical Senate Report published	Media	September 2022
NHS E assurance process	Assurance review meeting	Internal/regulators	November 2022
User testing of involvement document	Small focus group of service users/clinicians	N/A	November 2022
TCl review of revised draft of involvement document	TCl advice on involvement document	TCl	November 2022
Ongoing development of a toolkit of public resources	See communications and involvement products	N/A	September – January 2022

Monthly update in ICS newsletter/ internal channels	Regular (monthly update) on programme's progress	All	w/c 26/09/22 and ongoing thereafter as applicable
Health Overview and Scrutiny Committee	Involving the Committee in planning the approach for involvement activity	Scrutiny Committee	17 October 2022 January 2023
ICB Quality and Safety Committee	Update on programme and sharing draft involvement plan	Assurance	9 November 2022
MPFT Board meeting update	Update on programme	Board	27 October 2022
Media release and offer for proactive interviews	Update on the paper to ICB Board	Media	1 week before ICB meeting
Stakeholder update/ website update	Promotion of Board meeting and what will be discussed	Stakeholders including MPs/Councillors	1 week before ICB meeting
ICB Board meeting	Outcome of NHSE assurance and decision on whether to proceed to involvement, including plan and draft involvement document	ICB meeting	January 2023
Stakeholder update/ website update	Post Board update on next steps and potential involvement activity – include save the dates for events	Stakeholders including MPs/Councillors	After the ICB meeting
Media release and offer for proactive interviews	Post Board update on next steps and potential involvement activity – include save the date for events	Media	After the ICB meeting

Finalise involvement document and materials, finalise events post Board	Final amendments post Board meeting Accessibility checks Printing	N/A	2 weeks after ICB meeting
Offer of phone call to MPs/Council Leaders pre-launch	Update on planned involvement activity	MPs/Council leaders	Week before launch
Website updated	Programme documentation, survey, involvement document, events, animation	All	Day 1
Staff promotion	Internal channels/posters on site	Staff	Day 1
Stakeholder letter	Letter to announce launch of involvement activity and promote ways to participate	All	Day 1
Media release and social media updates	Promotion of ways to participate and information e.g. animation/summary	Media	Day 1
Toolkit for partners	Promotional materials and key messages to cascade information across ICS channels	All	Day 1
Email to voluntary sector groups	Offering attendance at meetings seeking support for promotion	Seldom heard groups	Day 1
GP bulletin	Promotion to GPs through weekly bulletin	GPs	Week 1

Launch of advertising	Social media adverts to target groups Potential newspaper adverts to promote drop in events	All	Week 1
Community/voluntary sector events	One-to-one/focus group conversations	Seldom heard/targeted groups	Week 1-2
Meeting with campaign group	Deliberative event to understand any views	Campaign Group	Week 1
Focus group for staff	Promotion of focus group for staff	Staff	Week 2
Existing service user focus group	Dedicated focus group	Service users	Week 2
1 st Roadshow drop in event	See approach	All	Week 3
Community/voluntary sector events	One-to-one/focus group conversations	Seldom heard/targeted groups	Week 3-4
1 st Online event	First online event	All	Week 4
2 nd Roadshow drop in event	See approach	All	Week 4
Community/voluntary sector events	One-to-one/focus group conversations	Seldom heard/targeted groups	Week 3-4
Midpoint review	Review of activity at mid-point to understand efficacy of messaging, responses to information and ask of the activity and identification of any further activity which may be required as part of	Internal teams	Week 4

	the overall action plan		
2 nd Online event	See approach	All	Week 5
OSC meeting	Offer for update to OSC through involvement activity	Scrutiny Committee	TBC
3 rd Roadshow drop in event	See approach	All	Week 5
4 th Roadshow drop in event	See approach	All	Week 6
Community/voluntary sector events	One-to-one/focus group conversations	Seldom heard/targeted groups	Week 5-6
Staff message	Reminder of deadline for involvement and how to participate	Staff	Week 5
GP bulletin	Reminder of deadline for involvement and how to participate	GPs	Week 5
Press release	Reminder of deadline for involvement and how to participate	Media	Week 5
Stakeholder letter	Reminder of deadline for involvement and how to participate	Stakeholders	Week 5
Closure of survey on website	Website updated to thank people for participating and to explain next steps	Stakeholders	Midnight last day of survey Week 6
Analysis of findings	Report of findings and public summary to be developed to inform decision making process	N/A	Week 7-17 (depending on volume of responses)

Next steps

A detailed analysis report will be produced by MLCSU on the comments from the involvement activity; this will include a thematic breakdown of comments received and demographic analysis from participants, subject to them sharing this information.

These reports will be shared with the programme team to conscientiously consider the findings to inform the next steps and any decision-making resulting from the findings.

The proposals will be reviewed by the relevant governance routes within MPFT and ICB (with statutory responsibility for decision making). The findings will be shared with the Staffordshire Health Overview and Scrutiny Committee for discussion. The full report of findings and a public summary will be published on our ICB website.

Appendix one: What people have told us so far

2019 listening exercise:

- [Listening exercise paper](#)
- [Summary listening exercise paper](#)
- [Report of findings](#)
- [Summary report of findings](#)
- [Public responses on general practice](#) which should be read with the main report of findings.

2019 involvement activity (MPFT):

A series of engagement events took place in 2019 to establish what was good about the services and what needed improving, to help shape the long-term solutions. Feedback could also be submitted by email or by post.

The Board of MPFT received [a report detailing the outcomes of the engagement exercise](#) on 30 January 2020.

2021 listening exercise refresh:

- [Listening exercise refresh issues paper](#)
- [Summary listening exercise refresh paper](#)
- [Report of findings](#)
- [Summary report of findings](#)
- [Reference Group report of findings](#)

Appendix two: Our Communications and Involvement Charter

Our approach to communications and involvement includes:

- **Awareness** – we will provide clear and timely communications that help stakeholders to understand the complex case for change. We will ensure that the people involved have enough information to make an intelligent contribution and input into the discussion and any later process of options development. We will use multiple channels to help a wide range of stakeholders to understand and influence the issues
- **Discussion** – we will actively encourage two-way dialogue to understand the concerns, ideas, and solutions our stakeholders have. Our clinicians and decision makers will be proactively shaping and attending our public events to listen to feedback first-hand. We will utilise the knowledge, experience, and existing networks of patients, third sector and staff champions to involve as many people as reasonably possible
- **Inclusion** – we will support seldom heard groups to actively participate. Our communications will meet recognised accessibility standards and our activities will be designed to reach groups that may find it difficult to take part
- **Clinically-led** – we will listen to our workforce and clinicians as the experts in their field. We recognise how busy they are and will use the latest tools and technology to support

them to participate in meaningful conversations. Our clinical leaders will encourage their peers to actively participate in clinically led workshops and debates

- **Collaboration and co-creation** – we will work in partnership, facilitating workshops with clinicians, service users and partners to design the right services based on local needs. During the listening exercise phase, we will work to gather information and insight, which we might use later to develop selection criteria
- **Openness and transparency** – we will be open minded and not pre-determine any decisions. We will assure our ICS, Healthwatch and Health Overview and Scrutiny partners, in their essential remit of providing critical challenge. We will provide regular updates and seek their views at every stage of the process
- **Compliance** – we will undertake a robust communications and involvement programme, following the latest best practice and legal guidance. We will adhere to the guidance and statutory duties of the regulators in designing our approach. We will work closely with the Consultation Institute to seek assurance on our approach
- **Feedback** – we will evidence how decision-makers have taken public opinion into account and provide feedback to those consulted.

Appendix four: Version control

Version	4b
Status	Draft
Name of originator / author	Communications and Engagement Team
Name of responsible committee	Transformation Programme Board
Date issued	17 May 2022
Last review	17 June 2022 – signed off by CT
Activity	26 September 2022 refreshed and shared with Programme leads 30 September 2022 26/09/22 Timeline updated following latest meeting with NHS England and shared with Board 09/11/22 Shared with ICB Quality and Safety Committee 10/11/22 Provisional timeline updated
Next review date	Live document
Target audience	Internal with the intention to become a public document