Improving mental health services in Sussex
Communications and engagement action plan

1) Background

The NHS is working to improve the mental health services available to people in Sussex. The East and West Sussex PCTs and Sussex Partnership NHS Foundation Trust (SPT), the main provider of secondary care mental health services across Sussex, have been working with service users, staff and stakeholders to develop proposals which will go to formal consultation early in 2010.

This communications and engagement action plan sets out a shared, co-ordinated approach between the PCTs and SPT to communications and engagement around the consultation and the consultation process itself.

2) Aims and objectives

The overarching aim of the communications and engagement activity is to deliver a successful consultation. This means that:

- all members of the public, service users and stakeholders have the opportunity to have their say
- each Health Overview and Scrutiny Committee (HOSC) and Local Involvement Network (LINk) is satisfied that the final proposals submitted for implementation have been subject to sufficient consultation.

Additionally, communications and engagement should also enhance the reputations of the PCTs and SPT, increase public confidence in the NHS in Sussex and contribute to efforts to tackling the stigma around mental health.

3) Audiences

We want to ensure that all members of the public are aware of the proposals and have an opportunity to have their say and will ensure we reach out to groups that do not traditionally engage. However, we need to be mindful that with only 6% of the population using mental health services in the last year or so, general public interest in the consultation may not be high.

We will focus particularly on service users and carers, an audience segment where we can be confident of a high level of interest and feedback. Many stakeholder groups, such as community and voluntary groups, will be an important audience, especially where they are able to act as a channel to reach service users, carers and people who do not traditionally engage.
Effective staff engagement is vitally important and essential if change is to be successful. As well as being a crucial audience in their own right, health and social care staff are also a vital channel to reach the wider public and service users. GPs are a particularly important group within the staff audience.

Health Overview and Scrutiny Committees (HOSCs) and Local Involvement Networks (LINks) are a critical audience. Their input is fundamental to shape the consultation process, the proposals consulted on and then to approve the plans that emerge from the process and they should be fully engaged at every stage.

MPs and councillors represent the interest of their constituents and as such are an important audience. They also have a significant impact on the media.

4) Strategic approach

There are several strategic principles which will underpin our communications and engagement activity:

- **Compelling vision**
  Communications and engagement activity based on our compelling vision for the future of mental health services in Sussex.

- **Clinically led**
  The proposals are based on clinical evidence and judgement and clinicians will present and explain them to the public.

- **Discreet but linked consultations**
  There are two separate consultations but we will bring economies of scale where possible and ensure we tell a joined-up story about mental health services across Sussex.

- **Targeted, effective communications**
  While ensuring all members of the public have opportunity to have their say, some audiences will be more interested than others and we will target our resources accordingly, working with partners where that is the most effective way to reach our audiences.

- **Supporting broader communications aims**
  Where possible communications and engagement activities will support each organisation’s broader strategic communications aims at the same time as delivering the consultation.

5) Action plan

There are a series of activities and products that will be delivered to implement this communications and engagement action plan.

- **Core narrative and key materials**
A core narrative, set of key messages, detailed Q&A and set of core presentation materials will be produced to support each consultation and the communications around it.

- **Bank of case studies and evidence**
  A bank of case studies, real patient stories, examples, quotes, evidence, graphs, illustrations and photographs will be built to help set out improvements so far and to bring to life the vision for the future. We will also identify clinicians, service users, carers and stakeholders willing to advocate the proposals.

- **Continual engagement**
  A significant amount of work has already been undertaken, and is continuing before the formal consultation begins, to engage stakeholders in the development of the proposals and the process. We will build on this, ensuring all key stakeholders are identified and engaged in advance of the formal consultation. We will also use this ongoing dialogue to identify potential advocates.

- **Briefed and prepared spokespeople**
  We will identify a panel of key spokespeople from both commissioners and providers, managerial and clinical, who will take public platforms and speak with the media. We will ensure that they are fully prepared, briefed and media trained from the outset and that they receive regular updates of key messages, Q&A etc.

- **Public meetings and events**
  Each PCT is arranging its own programme of public and stakeholder meetings and events to ensure they are tailored to best meet local circumstances and stakeholder expectations in terms of the number, location, format and content. There will be central co-ordination to ensure that events in different areas do not clash and they are supported by core materials, suitable spokespeople from the PCT and SPT and other advocates and that we are striking a balance between targeting audiences and demonstrating that we are giving all sections of the public a chance to have their say.

  Where appropriate, events will be extensively promoted through the media, targeted distribution of leaflets and posters, and through partner stakeholder channels and followed up through proactive media relations, in staff communications and in updates to stakeholders.

  We are seeking to ensure scheduling of public meetings so that none are planned for the anticipated purdah period.

- **Staff communications**
  Template newsletter articles and team briefings will be produced regularly to support consistent and timely communication with staff across all organisations, signposting the website for further details, maximising the use of existing staff communications channels within organisations without creating further communications vehicles where they are not needed.
These briefings and materials will be provided to all NHS and social care organisations in Sussex, including acute trusts and the ambulance trust, to encourage widespread staff engagement.

- **GP engagement**
  Each PCT is developing its own GP engagement plan to maximise the use of local channels and networks, supported by centrally produced materials and jointly coordinated approaches to LMCs.

- **Stakeholder engagement**
  Each PCT is identifying its key stakeholder groups (see Annex A). Each stakeholder will be communicated with as soon as possible to ensure that it is aware of the process and current proposals. Once the formal consultation has begun, all stakeholders will receive regular updates on progress. Spokespeople will be provided to present the proposals and receive feedback at stakeholder events and meetings.

  We are seeking to set up meetings with stakeholders groups to fall during the anticipated purdah period, when more public activity would not be possible.

- **Media relations**
  Key media will be identified and briefed on the consultation by each PCT before it launches. Following the consultation launch we will maintain a regular flow of proactive media stories to promote and report on consultation events. We will use existing media monitoring arrangements to keep abreast of any media coverage and to ensure that any inaccurate or adverse coverage is addressed immediately.

  We will not conduct any proactive media during any period of purdah.

- **Consultation documentation**
  We will produce a full consultation document and a summary document for each PCT. There will be economies of scale in the design and drafting of the documents, with content shared between the documents where appropriate.

  Documents and summaries will follow current accessibility best practice in terms of font sizes and colour schemes. They will be made available in alternative formats and will offer advice in the most common community languages on how to receive more detail in other languages.

- **Websites**
  Detailed consultation materials (including reference material such as research documents and national and regional vision document and policy frameworks) will be hosted on the relevant PCT’s website, along with updates, latest information on events and opportunities to provide feedback and get involved.

  In addition, the PCT websites and SPT website will feature core information about the overarching plans, providing links to the other consultation materials and more detail on the PCT websites.
Response handling
We will establish (or use existing, where possible) a wide range of mechanisms to capture consultation responses in each PCT, including:
• Freepost address
• E-mail address
• Online response form
• Dedicated phone line with voicemail
• Provision to transcribe comments from those unable to use other means.

We have appointed an independent analyst to collate and review all the feedback received, along with notes of public and stakeholder meetings. They will produce a report identifying the themes and issues raised which will be presented to the PCT and SPT boards.

All consultation responses will be received by the two PCTs. Any responses received by SPT will forwarded to the most relevant PCT so that all feedback is included only once in the analysis.

6) Equality impact assessments and monitoring

Equality impact assessments will be carried out on the consultation process and the consultation documents (equality impact assessment on the proposals put out to consultation will also need to be undertaken). Equality monitoring will be carried out alongside the consultation to ensure that all sections of the population are able to have they say on the proposals.

7) Resources

The communications and engagement programme is being delivered by the communications and engagement teams at each of the PCTs and SPT. A virtual team has been convened and an external programme lead has been brought in to co-ordinate the work of the group. Overarching programme costs and the costs of the documents are being shared between organisations involved. Each PCT is meeting its own costs for public events.

8) Evaluation

This communications and engagement strategy will be formally evaluated against the SMART objectives being developed in line with section 2 above. In line with established best-practice (and budget allowing) we will also seek to conduct formal evaluation through research to assess the effectiveness of our communications and engagement activities and to ensure that any lessons can be learnt and shared with the wider health and social care community.
Annex A:
Key stakeholders

East Sussex and Hastings & Rother:

- Groups who do not traditionally engage
  - Sompriti
  - BME Community Partnership
  - Other BME contacts – to follow from East Sussex PPE team plus PHAST (via Anita Counsell) and Val Biggs at ESCC
  - Homeless community – awaiting local contacts from Claire Isted from Homeless Health Service
  - Gypsies and travellers – awaiting local contacts from Fran Edmunds local NHS Children’s Services Manager
  - People with disabilities – see below
- HOSC
- Local authorities
- Parish and Town Councils
- Local Strategic Partnerships
- MPs
- Local Involvement Network chair and members
- Mental health patient groups / forums
  - Active8
  - Rethink
  - Wellmind
  - Mind
- Older people’s groups
  - Age Concern
  - East Sussex Seniors’ Association
  - Wealden Senior Citizens’ Partnership
  - Abbeyfield Sussex Weald
  - Hastings Seniors’ Forum
- Patient Participation Groups
  - PCT Expert Patient contacts
  - Physical and Sensory Disability Forum
  - Health User Bank
  - Patient and Public Involvement Steering Group
- Voluntary and Community Groups
  - Eastbourne Community Network
  - Hastings and Rother Counselling Service
  - Action in Rural Sussex
  - Battle CVS
  - Care for the carers
  - Citizens Advice Bureau
  - Crossroads (Lewes)
  - Crowborough and District Voluntary Bureau
  - CSA School Improvement Service
  - East Sussex Disability Association
• East Sussex Hearing Resources Centre
  • Eastbourne Association of Voluntary Services
  • Hastings Voluntary Action and HRRA
  • House Project
  • Newhaven Community Development Association
  • Rotherhaven Homes
  • Summerhayes
  • South Downs CVS
  • Battle Voluntary Action
  • Wealden Lifeline
  • Sussex Deaf Association
  • Parkinson’s Society
  • Alzheimer’s Society

• Carers Agencies
  • Pevensey and District Information and Caring Centre
  • William Daly Carer Support Services

• Local and regional patient networks

• Staff (clinical and non-clinical) and health care providers

• Staff side / Unions

• Independent / private health providers
  • Sussex Oakleaf
  • Together
  • NCDA
  • Southdown Housing
  • Turning Point
  • South East Advocacy

• Other
  • Leagues of Friends (Brighton & Hove Hospitals, including Newhaven, Conquest Hospital, Eastbourne DGH, Bexhill Hospital, Crowborough Hospital, Uckfield Community Hospital, Lewes Victoria Hospital, Meadow Lodge (Lewes), Hurstwood Park
  • Headway Hurstwood Park
  • St James’ Trust Seaford
  • Action for change
  • Churches Together (Hastings)
  • East Sussex Learning Partnership

West Sussex:

• West Sussex HOSC (via Annalee Clayton & Helen Kenny)
• West Sussex LINk (via Help and Care)
• County, District & Borough Councils
  • West Sussex County Council
  • Adur District Council
  • Arun District Council
  • Chichester District Council
  • Crawley Borough Council
  • Horsham District Council
  • Mid Sussex District Council
• Worthing Borough Council

• Parish Councils
  o West Sussex 140
  o Hampshire border 10
  o Surrey border 4

• Town Councils
  o Arundel
  o Bognor Regis
  o Burgess Hill
  o East Grinstead
  o Haywards Heath
  o Littlehampton
  o Petworth
  o Selsey

• Local Strategic Partnership Groups
  o Adur, Arun, Chichester, Crawley, Horsham, Mid Sussex, Worthing

• West Sussex MPs
  o Andrew Tyrie (Chichester)
  o Francis Maude (Horsham)
  o Laura Moffat (Crawley)
  o Nicholas Soames (Mid Sussex)
  o Nick Gibb (Bognor Regis & Littlehampton)
  o Nick Herbert (Arundel & South Downs)
  o Peter Bottomley (Worthing West)
  o Tim Loughton (East Worthing & Shoreham)

• LMC
  o Surrey & Sussex LMCs Chair
  o West Sussex LMC

• Older People
  o Age Concern local branches (7)
  o Adur Older People’s Network
  o Arun Neighbourhood Network
  o Chichester Older People’s Partnership
  o Crawley Neighbourhood Network
  o Horsham Partnerships for Older People
  o Mid Sussex Networks for Older People
  o Worthing Neighbourhood Care Alliance

• Carers Support Groups
  o North & Mid Sussex
  o Regis, Chichester & Rural
  o Worthing

• Leagues of Friends
  o Arundel & District Community Hospital
  o Bognor Regis War Memorial Hospital
  o Crawley Hospital
  o Horsham Hospital
  o Midhurst Community Hospital
  o Salvington Lodge
  o Zachary Merton

• CVSs
• Mental Health / Learning Disabilities Support Groups
  o Advocacy Services
    ▪ Mid Downs Advocacy (Crawley & Horsham)
    ▪ Mid Downs Advocacy (Mid Sussex)
    ▪ Pressure Point Advocacy (Adur, Arun & Worthing)
    ▪ Speaking Out Advocacy (Bognor, Chichester, Midhurst)
    ▪ West Sussex Advocacy Services
  o Aldingbourne Trust (PLD)
  o Alzheimer’s Society - Central Sussex
  o Alzheimer’s Society - Worthing & District
  o Capital Project
  o Cherchefelle Housing Association
  o Crawley Association for Mental Health
  o Impact Workability West Sussex
  o Mencap
    ▪ Bognor Regis, Chichester & District Mencap
    ▪ East Grinstead Gateway Club
    ▪ Horsham & Crawley Mencap
    ▪ Lancing Gateway Club
    ▪ Mid Sussex Mencap
    ▪ Springboard Project
    ▪ Sussex Seals Sports & Leisure
    ▪ Worthing Mencap Society
  o MIND
    ▪ Crawley & Horsham
    ▪ Worthing & Littlehampton
  o Parent Partnership Service
  o Rethink – Adur, Arun & Worthing
  o Richmond Fellowship
  o Shoreham & District Mental Health Association Ltd
  o Springboard Project
  o Stepping Stones Day Service
  o Sussex Oakleaf Housing Association
  o Sussex Seal Sports and Leisure
  o United Response
  o West Sussex BME CDW Service

• Patient Participation Groups (PPGs) (x 48)
• All Practice Managers