1. **Background**

On 1 April 2006, following the dissolution of NHS Argyll and Clyde, NHS Greater Glasgow and Clyde took responsibility for providing healthcare in West Dunbartonshire, Inverclyde and Renfrewshire. This included operational responsibility for the Vale of Leven Hospital in Alexandria.

The previous NHS Board had undertaken a review of acute services in 2004 and concluded that out-of-hours anaesthetics provision, and consequently unscheduled medical care, could not be sustained at the Vale of Leven Hospital. This gave rise to a trial programme called the ‘Lomond Integrated Care Pilot’, which was designed to enable retention of onsite unscheduled emergency care through cover provided by GPs and nurse practitioners.

NHS Argyll and Clyde had also conducted a review of maternity Services, which in turn led to the withdrawal of consultant-led care to the Royal Alexandra Hospital (RAH) in Paisley, with remaining birthing, ante and post-natal services provided locally by midwife-led Community Midwifery Units (CMUs) at Inverclyde Royal Hospital, the RAH and the Vale of Leven Hospital. However, the number of births at CMUs proved to be far lower than anticipated.

While there are many examples of good quality mental health services in Clyde, historically there has been a lack of investment in community-based services and an over-reliance on care in hospital settings, reflected in a high number of inpatient beds. This means that local people across Clyde who experience mental illness are more likely to be admitted to hospital for treatment compared to other parts of the country. It also means that people living in Clyde are not currently able to access the same range and type of community based mental health services available to people living in Greater Glasgow. In addition, many local hospital services are currently based in older accommodation that no longer meets the needs of service users and staff.


- **Specifically in relation to Lomond Integrated Care Pilot** – clinical concern about the safety and sustainability of the pilot led to the conclusion that it could not proceed to its next stage and that Unscheduled Medical Care could not, after all, be retained. This was reported to community and patient representatives at a meeting on 21st September 2006 and in turn NHSGGC agreed to carry out more detailed work on possible options if anaesthetic cover could not be kept in place. Subsequently, the then Minister for Health and Community Care asked for the central conclusion reached by NHS Argyll and Clyde - that anaesthetics was unsustainable - to be tested once more. A process based on ‘workstreams’, observed by community representatives, was underway in earnest by November 2006. Conclusions (not accepted by community representatives) were reported on 18th and 21st May 2007. NHS Greater Glasgow and Clyde’s view was that the further work had confirmed the unsustainable nature of out-of-hours anaesthetic cover and in turn this meant that Unscheduled Medical Care could not remain at the Vale of Leven Hospital either.

- **A review of Maternity services** across the whole of Clyde commenced with initial engagement between December 2006 and May 2007. It was originally intended
that full public consultation should be underway from the late summer of 2007, but this was delayed to allow for the report of the Independent Scrutiny Panel (see below). Consultation commenced on 27th March 2008 and the outcomes were reported to the NHS Board on 19th August.

- Engagement on Mental Health services across Clyde began in October 2006 and continued through until May 2007, culminating in the presentation to the NHS Board in June 2007 of the Modernising Mental Health Strategy for Clyde. The service proposals within the Strategy were then subject to a period of review by an Independent Scrutiny Panel. The Board then undertook action to address a number of the recommendations made by the panel, including the completion of a formal option appraisal to assist the process for determining consultation proposals. The public consultation period then ran from 9th April to 2nd July 2008, with the outcomes reported to the NHS Board on 19th August.

In addition to the above processes, the Cabinet Secretary sought an independent viewpoint about the potential future of services at the Vale of Leven Hospital. She initiated an Independent Scrutiny Panel, chaired by Professor Angus MacKay, with a remit to review NHS Greater Glasgow and Clyde’s findings on the main service strands and to confirm proposed options for the future or suggest alternatives. The panel reported its findings in December 2007.


A further review of services at the Vale of Leven Hospital was commissioned by the Cabinet Secretary for Health and Wellbeing. This concentrated directly on the issue of the sustainability of anaesthetic cover at the hospital and was chaired by Professor Chris Dodds. The review was commissioned on 12th June 2008 and findings reported on 15th August.

The review confirmed the previous conclusions of NHS Argyll and Clyde and NHS Greater Glasgow and Clyde that out-of-hours anaesthetic cover could not be sustained at the Vale of Leven Hospital.

However, the review also put forward the suggestion that it might be possible to develop local admission protocols that would allow a significant proportion of patients, following assessment by local medical practitioners (specifically GPs), to go on being admitted to the Vale of Leven directly when safe to do so. The model was described as a ‘Supported GP Acute Unit’ by the review team and they envisaged it as relying on a team of doctors trained to provide GP services and skilled to provide the appropriate level of hospital care.

3. NHS Board Meeting, 19th August 2008

The NHS Board considered the cumulative outcomes of the Mental Health and Maternity Consultations in addition to the findings of the Independent Scrutiny Panel and Independent External Clinical Review at its August 2008 meeting.

In relation to Maternity Services, the Board recommended that the birthing suites at the Community Maternity Units be retained for three years during which time a marketing and communications plan aimed at encouraging more mothers to give birth in the Units would be enacted.

The Board also agreed to submit proposals to the Cabinet Secretary for Health Wellbeing to modernise Mental Health Services in Clyde but to exclude services in the Vale of Leven for the time being.
The Board agreed that further, specific actions would be needed to determine the future of services at the Vale of Leven Hospital:

- The hospital’s CMU would continue operationally as noted above
- A decision on Mental Health services at the Vale would be deferred in order and to take the issues under consideration into a new consultation process that articulated a vision for all services at Vale of Leven Hospital
- There would be an overall objective of developing a long-term, sustainable plan for the future of the Vale of Leven Hospital

In the course of discussion, Board Members were of the view that a sustainable Vale of Leven Campus could comprise the retained CMU and the model of unscheduled medical care proposed by the Independent External Clinical Review. It was felt that the latter could allow the majority of existing patients (those not dependent on emergency care underpinned by anaesthetic services) to continue receiving their care at the hospital.

Additionally, it was felt that it might be possible to bring new services to the hospital, such oral and dental health, additional renal service capacity and outpatient, diagnostic and day care provision for urology, rheumatology and gastroenterology. The opportunity also remains to invest £17 million in a new Primary Care centre to be built on the campus.

The Board instructed officers to begin engagement with stakeholders in order to work up proposals to be brought together into a single, comprehensive vision for the future of the Vale of Leven site. Once this was achieved, the proposals would be taken out to full public consultation.

4. Lessons from Previous Consultation

Consultation undertaken around Mental Health and Maternity Services reinforced a number of lessons:

- The importance of flexible ‘drop-in’ sessions to service-users in particular, as ‘traditional’ public meetings only suit a minority of people
- The need to proactively target local community and patient groups and meet them in their own terms – e.g. go to their meetings rather than bring them to NHS-organised sessions
- Recognising the diversity of the community and accessing community opinion through groups not necessarily directly linked to healthcare
- The importance of effective, properly maintained databases
- The need for early and widespread promotion of meetings and events
- Clear points of contact for further information, event registration and submissions
- The central importance of summarised, Plain English consultation materials, with availability in alternative formats

5. Engagement Process

From this point until the end of October 2008, staff will undertake a series of focus group sessions with representative stakeholders. These stakeholders will include clinical, staff and community interests. The engagement process will be underpinned by ‘vision document’ which describes the potential service options for the campus - this document will be used as the basis of presentations and discussion.
- Vale of Leven staff focus groups will be organised by each division
- GPs, other clinical representatives and the Scottish Ambulance Service will be asked to provide detailed input to fleshing out the proposed ‘Supported GP Acute’ model
- Hospitalwatch will be asked to organise a special meeting at which NHSGGC staff can present the issues and options and seek feedback (this has been set provisionally for 24th September)
- West Dunbartonshire Community Health Partnership, with support from the Acute Services Community Engagement Team, will identify stakeholder groups on the basis of geography and constituency of interest. Groups will be approached with a request that a team from NHSGGC, which will also include a GP involved in discussions about the Supported GP Unit, be able to run a focus group session as part the groups’ programmed meetings during the engagement period. At this early point, the following organisations have been indentified and/or agreed to take part in engagement sessions:
  o West Dunbartonshire CHP Committee
  o Lomond Patients Group (1st October)
  o Helensburgh and Lomond Planning Group
  o Helensburgh Community Care Forum (6th October)
  o West Dunbartonshire Mental Health Forum (3rd October)
  o West Dunbartonshire Community Care Forum (6th October)
  o West Dunbartonshire Community Participation Committee (8th October)
  o West Dunbartonshire Access Panel
- A request will also be made for a meeting with West Dunbartonshire Council
- Material giving groups or individuals outwith programmed engagement meetings an opportunity to make comment will be placed on NHSGGC’s website

The purpose of these sessions will be to work with these groups to get feedback on the following areas:

1. What feedback do you have on the emerging model of unscheduled medical care?

2. We are going to be working on a range of issues associated with this model over the coming weeks. These are:
   - what types of patients could continue to be treated at the Vale;
   - what are the protocols for admission and transfer of patients;
   - how will we staff the service;
   - how many patients do we estimate would be treated at the Vale?

As we are developing our thinking on each of these important aspects we will be testing it during the focus group meetings that are being scheduled.

Are there any other specific issues with this model of care which you think need further exploration?

3. What feedback do you have on our proposals for increasing the range of planned care services that are delivered from the Vale site? Is any further information required on these?

4. What feedback do you have on our proposals for rehabilitation and older people’s services? What further information do you think is required?

5. What feedback do you have on our revised proposals for mental health services?

6. Are there any other issues that you think our consultation material should cover? Are there any areas that need to be addressed in more detail?
6. Public Consultation

Public consultation will be launched on 31st October 2008 and will continue for 13 weeks until 31st January 2009.

The final arrangements for public consultation will be agreed following evaluation of feedback received during the engagement process. We will ask stakeholders to comment on the following possible mix of consultation elements:

- **Consultation newsletter** – we propose producing an easy to read newsletter-style consultation document that will be dropped to every household in the Vale of Leven catchment by the Royal Mail. This will make use of graphics and straightforward text to set out the main elements of the Vale ‘vision’. It will also provide contact points and dates for the main public meetings. There are approximately 40,000 households in the catchment (both Clyde and Highland areas) and Royal Mail have confirmed that the mail drop could be completed within the space of a week, although the newsletter would have to be printed and delivered to them two weeks in advance. We would also propose lodging additional copies of the newsletters at the Vale of Leven Hospital and in health centres, GP practices and libraries.

- **Consultation poster** – we propose printing an A3 colour poster providing information about the consultation at a range of sites across the catchment. This would include the Vale of Leven hospital itself, GP practices and, if permission is given, local authority operated venues and facilities like post offices and shops.

- **Main consultation document** - we propose that a longer document, which by necessity will contain more of the ‘technical’ detail, will be shared with all contacts the Involving People Database who have demonstrated prior interest in the subject matter, including those who made submissions to earlier consultation. The document would be made available to anyone else following a request by phone, in writing or by downloading it from our website.

- **West Dunbartonshire Council newspaper** – the Council have generously offered to include information about the proposals in an edition of the newspaper distributed during the consultation period.

- **Public meetings** – although these sessions do have limitations, we propose that two public meetings be held sufficiently advance of preparations for the Christmas holidays. Two dates have been provisionally agreed: Thursday, 27th November (Commodore Hotel, Helensburgh) and Monday, 1st December (Dumbarton Burgh Hall). Each meeting will be split into afternoon and evening sessions. More meetings would be organised if there was oversubscription or sufficient demand and, tentatively, we would suggest that two more meetings could take place in late January 2009 in order to remain clear of the festivities. These meetings will be facilitated by a Non-Executive Board Member.

- **Drop-in sessions and displays** – we propose setting up a number of daytime sessions at accessible locations supported by portable displays. Locations might be the Vale of Leven Hospital, health centres, shopping and leisure venues. These would enable service users and the public generally to obtain information or submit points of view at convenient times and places. A programme of dates and locations would be developed and promoted via media releases and advertising.

- **Representative groups** – we propose targeting local community groups with a mailing that invites them, if they so choose, to request NHSGGC staff to come out to a forthcoming group meeting to deliver a presentation. We propose also making a similar offer to key stakeholders, such as MSPs, to do the same on a one-to-one basis.
• **Patients, relatives and carers** – staff and service leads will be asked to ensure that service users are aware of the consultation and to organise specific meetings to suit their needs. This will be particularly important in terms of Mental Health services.

• **Vale of Leven Staff** – Local managers and HR teams will be asked to set up briefing and drop-in sessions for hospital staff.

• **Solus Screens** - West Dunbartonshire CHP has commissioned a number of LCD screens located in health centre waiting areas and the Vale of Leven Hospital. A presentation of the consultation proposals will be developed and placed on a loop in those sites. This will include contact and feedback details.

• **Web pages** - we propose creating dedicated webpages on the NHSGGC website, which can be linked from the homepage or directly via the web address. This would provide downloadable versions of consultation materials, submission forms and filmed presentations in which staff explain the proposals. There may be flexibility to create dedicated web material here such as (very basic) animated patients’ journeys, using examples of the kind of patients who would use the Vale of Leven in future

• **Phoneline** – 0800 027 7246 would be used as a contact point at which individuals could request consultation material or register for events.

• **Media releases and briefings** - releases would be issued to provide consultation details but we would also endeavour to engage local newspaper editors and journalists in briefings and interview opportunities

• **Advertising** – contact arrangements and dates of upcoming public meetings and drop-in sessions would be carried in local press advertisements

• **Alternative formats** – materials will be made available in alternative formats and languages on request, with multi-language instructions on arranging this placed on English-language materials

7. **Liaison with NHS Highland**

Regular meetings have been set up with NHS Highland to discuss co-operation in organising the proposed Helensburgh public meeting, targeting groups in the NHS Board’s area and in distributing consultation material. In addition to this, we are proposing a meeting with NHS Highland in the week commencing 2nd February 2009 in order to carry out a ‘stock take’ of the consultation responses received.

8. **Liaison with the Scottish Health Council**

A meeting was held with representatives of the Scottish Health Council on 4th September 2008 for early discussion on the approach to engagement and consultation. This draft plan will be submitted to the Council for comment and the Council will have its representatives attend engagement and consultation meetings thereafter. There will be regular meetings to discuss progress.

9. **After Consultation**

The intention is that the consultation outcomes would be reported to the NHS Board on 24th February 2009. If the Board agrees on recommendations to be put to the Cabinet Secretary, this will be directly communicated by mail and e-mail to all people and organisations taking part in the consultation.

Draft 5
18th September 2008