A Public Consultation on the future delivery of functional inpatient mental health services in Lancaster and Morecambe.

June to September 2009

An independent analysis report on the results of the consultation by:

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Background to the Consultation

The majority of existing inpatient mental health units across Lancashire are not fit for purpose. A lot of them are very old and do not provide a therapeutic environment or the modern facilities that people deserve. In response to this, Lancashire Care is investing a significant amount of money to develop inpatient services that will be of an extremely high standard.

£9 million has been invested to develop a new low secure unit at Guild Lodge in Preston. Construction work is currently underway and is due to be completed by spring 2010. On completion, the 18 low secure beds currently provided at Ridge Lea will move to Preston. This will leave one ward and psychiatric intensive care beds operating in isolation at Ridge Lea. This could pose safety issues and is not sustainable in the medium to long term.

Lancashire Care is also undertaking a major programme of work involving investment of £150 million to replace its existing inpatient wards for adults and older people with four new purpose built units. Following a process of extensive engagement the following sites were selected for the development of the new units:

- Burnley Bridge (East Lancashire)
- Ribbleton Hospital (Central Lancashire)
- Whyndyke Farm (Fylde Coast)
- Royal Albert Fields (Lancaster & Morecambe)

This is a major programme of work that will take place over the next ten years. Under these plans Lancashire Care’s existing inpatient services for adults and older people in the Lancaster and Morecambe area would move into a new unit on Royal Albert Fields.

Because of the timescale involved, Lancashire Care and NHS North Lancashire need to ensure that the standard of inpatient care is the best possible in the meantime, and this consultation is designed to inform that provision.
The authors of this report

Professor Alan Gillies

Alan has been Professor of Information Management at the University of Central Lancashire since 1994. He graduated from The Queen's College, Oxford in 1984 in Chemistry. His PhD was in problem solving methodology using knowledge based systems.

He started working with the NHS in 1988 following a move to the IT Institute at the University of Salford, he returned to Preston, and in 1998 joined the newly formed Lancashire School of Health and Postgraduate Medicine. In 2008, the School was amalgamated and expanded to form the School of Public Health and Clinical Sciences. He was appointed as School Research Coordinator in late 2008.

He has also held part time positions at the University of Oxford PGMET, RMIT in Australia, and in 2002 was awarded Doctor Honoris Causa by the University of Medicine and Pharmacy in Cluj Napoca. In 2009, he enjoyed a Visiting Fellowship at Harris Manchester College, Oxford University.

Alan has over 100 publications including over 30 peer reviewed articles and 18 books. He has worked on consultancy projects around service re-alignments and innovations at local and national level within the NHS, and recently returned from a project, working with John Howard, for the Czech Government, and from Canada advising local primary and community care groups.

John Howard

John Howard has been Senior Lecturer in Health Informatics at the University of Central Lancashire since 1998, and before that he was a nurse and then nurse educator. Since September 2009 John has been the course leader for the MSc Health Informatics programme at UCLAN. He developed the BOOKWORM content analysis tool used on this project to assist with the analysis of text. The tool has been used a range of projects most recently on a study of how the media report key health issues including the Climbie inquiry and the National Programme for IT.

The role of the authors

The authors were commissioned to provide an independent analysis of the data from the public consultation. They were not involved in the consultation process itself or the collection of the data. This ensures their independence but also means that all conclusions are based solely on the data supplied to them.

What the authors did

The authors considered the data from the consultation process which consisted of the text of public responses and the options selected.

They considered the numerical data using descriptive statistics to provide the findings in the next section. In order to provide a deeper insight into these findings they then carried out a textual analysis on the views expressed in the consultation using the in-house analysis tool BOOKWORM. This enabled the authors to analyse the major themes emerging from the consultation presented in the subsequent section.

Finally, the authors present their conclusions.
Quantitative results from the data

Public preferences regarding the main choices

67 responses were received that expressed a clear preference. Of these 2 recorded a multiple preference. After consideration, these were treated as distinct responses, giving 69 in all. This decision has no significant impact on the results presented below:

![Breakdown of options selected in public consultation](image)

There was practically no support (3%) for option 2, more support for the refurbishment of Ridge Lea (39%) and most support (58%). The reasons cited are considered in the next section.

Public views on other options

27 respondents expressed a definite view on whether there were other options not considered by the consultation of which 15 expressed the view that there were alternatives. This represents (56% of those expressing a definite preference).

Of the 15 who felt that there were alternatives, 13 did express a preference for one of the predefined options, but there was no strong preference for any of the options:

- 7 for option 1
- 1 for option 2
- 5 for option 3
The consultation process
A total of 7 public meetings and 2 local meetings were held as part of the consultation and attended by a total of 63 people:

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<tr>
<th>Date</th>
<th>Venue</th>
<th>Attendees</th>
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<tbody>
<tr>
<td>2pm 4pm Wed 15 July</td>
<td>Lancaster Town Hall (banqueting room)</td>
<td>10</td>
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<tr>
<td>6pm 8pm Wed 22 July</td>
<td>Heysham Youth and Community Centre</td>
<td>12</td>
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<tr>
<td>2pm 4pm Mon 27 July</td>
<td>Galgate Methodist Church Hall</td>
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<td>6pm 8pm Tues 4 August</td>
<td>Borwick Hall Carnforth</td>
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<td>6pm 8pm Tues 18 August</td>
<td>The Platform Central Prom Morecambe</td>
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<td>6pm 8pm Mon 24 August</td>
<td>Beaumont College Lancaster</td>
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<tr>
<td>2pm 4pm Mon 7 September</td>
<td>NHS North Lancashire Trust HQ Lancaster</td>
<td>9</td>
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<td>Local residents meetings</td>
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<td>Sat 18th July</td>
<td>St Paul's Church Hall, Scotforth</td>
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<td>Mon 10th Aug</td>
<td>Lancaster Town Hall</td>
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Qualitative analysis of the public responses

The textual responses to the survey were considered, under the heading of reasons given for supporting each of the options, alternatives offered by the public, queries and questions and other opinions expressed which were not aligned with a specific response.

Although these categories align with the questions asked in the consultation, some re-ordering was necessary as in reality some responses were not linked to their appropriate questions. For example, some listed as alternatives were in fact comments. Minimal editing has been used, only to correct spelling, grammar and sense.

The responses were analysed separately by AG using a purely qualitative approach and JH using Bookworm to quantitatively assess frequency of key words and phrases followed by a contextual analysis of how those words and phrases occurred in the text. The findings were then combined to triangulate the data.

From this analysis, seven areas of concern emerged in the responses:

1. Conflict between the needs of different age groups:
2. Best use of existing investment:
3. Sustainability and environmental issues:
4. Therapeutic benefits of the environment
5. Access and parking
6. The consultation process itself
7. Staffing issues

The responses were analysed under these seven headings

Reasons of those supporting option 1

The following views were given by people who preferred option 1.

Conflict between the needs of different age groups:

- Older Adult services need separate inpatient unit from adults, therefore option 3 not acceptable;
- Option 3 is taking away the service for elderly mental health and I believe that this building was purpose built for them and not adult;
- Adults won't mix with the elderly;
- The adults should not mix with the young;
- Age related needs are essential in a care environment;
- There is a recognised intolerance of young to old and vice versa (Including staff!);
- Vulnerability of elderly with younger people in same mental health care setting;
- The Oaklands is currently a unit for older age adults by combining that unit with younger adult facilities the services for the elderly will be significantly reduced;
- This is a time when the number of elderly people is increasing and we need to provide more facilities and not less;
- It is unclear how the Trust would ensure the highest quality of care for older patients with conditions such as dementia, if they were to share a ward with younger patients with severe psychiatric illnesses;
- The idea of returning to mixed wards including elderly clients is ill thought out and would cause much risk and distress to the older population: and
• Indeed, have you spoken to the patients in elderly service or their families and carers? I'm sure they would prefer their relative to be cared for in a dedicated older adult environment which will effectively cater for their needs.

Best use of existing investment:
• A lot of finance has already been invested in Ridge Lea and it is a more appropriate location than either of the other two options;
• If the Derby Home is capable of refurbishment, so also is Ridge Lea;
• There is no reason given why Ridge Lea couldn't be refurbished to a high standard with single sex accommodation the norm, with en suite facilities;
• With high level refurbishment of upgraded rooms, "40% of the space under utilised" wouldn't be the case;
• Your non medical reason for closing Ridge Lea is not mentioned it is of course your desire to sell off the land;
• To keep the Ridge Lea hospital it would be beneficial instead of moving patients from pillar to post and moving staff to Moss view which is not beneficial which staff who as not got any transport;
• Minimum disruption to both services and patients;
• Ridge Lea has existing infrastructure, a fantastic location with a great outlook, plentiful gardens providing a therapeutic environment, and plenty of space for potential future development should there be a requirement for more beds or other specialist services;
• I also believe the cost of a refurbishment will be comparable if not cheaper over the long term then the proposals to develop the Oaklands and possibly develop on the existing undeveloped green field behind the royal Albert cottages;
• I believe the case for the PFI is not an excuse for providing services in an inappropriate location;
• Ridge Lea is an existing developed site with no planning issues;
• (I favour) the continued use of Ridge Lea with new units to accommodate working adults, psychiatric care beds and any other services required in the future;
• I am strongly opposed to any development on the Royal Albert Fields;
• The Oaklands currently provides a very good and well used service and we believe that this option would be detrimental to the care for elderly people: and
• This could perhaps involve demolition and rebuild, or refurbishment combined with new uses for the under-utilised parts of the building.

Sustainability and environmental issues:
• I am opposed to developing Oaklands because of the possibility of building on Royal Albert fields at any future time this should not happen on anything but Brownfield sites;
• I believe it inappropriate to develop Green Field site;
• Ridge Lea is a brown field site;
• I believe this will provide a sustainable service in an appropriate location. ;
• There are already serious issue around traffic congestions in the area surrounding the royal Albert fields/Oakland unit which any further developed will exacerbate;
• Parking is limited and will be a cause of immense problems;
• I believe that we have to protect the existing green spaces around Lancaster for the benefit of future generations;
• We believe that redeveloping Ridge Lea would be the best option; it is the most environmentally sound option;
• The section of Ashton road running along the front of Royal Albert Cottages is already very congested;
• By increasing the traffic passing along this section of road the access to the south of the town (including Royal Lancaster Infirmary) would be affected;
• Option 3 is clearly the favourite of Lancashire Care for financial reasons as they will be able to sell off the land that Ridge Lea currently occupies. However, they should be looking further ahead to the future and plan responsibly for future generations by protecting green field land;
• The grounds at Ridge Lea provide the most therapeutic environment of all the acute wards in the Trust;
• When patients are admitted out of area they often do not want to return to their local services because of the excellent service and environment provided at Ridge Lea;
• Our staff are regularly complimented on their care and accessibility to patients being enhanced by the availability of beautiful, calming grounds in which to ease their mental strain;
• You cannot, if you truly are committed to the improvement of the patient experience, ignore this important part of care and recovery: and
• Far from being a disadvantage to care, the geography of the building affords privacy and peace away from the busy, stressful aspects of daily life which are often a reason for mental deterioration in the first place.

Therapeutic benefits of the environment;
• I feel that the environment at Ridge Lea (i.e. the grounds, the airiness of the building which means patients and staff aren’t on top of each other) is conclusive to clients’ recovery;
• Although Ridge Lea is an old building, many patients like being there as it is such a tranquil site;
• The large grounds and the nearby park are ideal treatments in relieving stresses;
• The Royal Albert is a green field site undeveloped and would not provide the plentiful scenery that the ridge lea already provide;
• We are concerned that it would inevitably result in pressure for development of the Royal Albert fields, which will lead to conflict with national and local planning policies and local residents;
• Again, therapeutically, we are on the doorstep of Williamson Park, another benefit to recovery and local shops are within 20 minutes walk away. Walking, as with most exercise is proved to improve mental wellbeing;
• On site is a recently improved cafe/recreation area which provides many activities and a place to socialise in a comfortable and accepting environment;
• Although we may not have up to the minute facilities, the wards have functioned to a high standard for over 100 years, why mend what is not broken? With imagination and commitment to patient care, Ridge Lea could provide many of the services that have been decimated over recent years i.e. occupational therapy, a day hospital, specialist services, a gym, gardening facilities to enhance our already much appreciated butterfly garden, and so on; and

• Do you want to be the proud owners of a flagship therapeutic service with patients reaping the benefits, utilising the 40% of unused space, or will you be satisfied with a bog standard, mundane, unexceptional service that Oaklands would provide.

Access and parking:

• Access is easy and it can be reached from all directions without going into a traffic jammed Lancaster;

• Parking is ample for patients, visitors and staff;

• Blackpool is too far away to serve Lancaster + Morecambe area patients and Oaklands has very restrictive parking;

• Ample parking at Ridge Lea;

• The is also a serious lack of amenities in the immediate area;

• I would like to see investment in the long term delivery of high-quality inpatient mental health services at Ridge Lea, rather than the short term stop-gap measure which seems to be on offer;

• The public transport links to the Oaklands/Royal Albert Fields site is very limited, in contrast to Ridge Lea which has well established public transport links;

• If the Ridge Lea site was used to its full potential, there would be less need for Lancaster adult patients receiving treatment in Blackpool, with all the problems for relatives that this would involve;

• We believe that redeveloping Ridge Lea would be the best option; it has the road and public transport structure already in place to support it;

• We think Option 2 is totally unacceptable because it will be very inconvenient for staff, patients and visitors to have to travel to Blackpool;

• I’m not denying that improved public transport would be a bonus but the hospital is hardly 'inaccessible';

• 'Inaccessible' would be services in Blackpool;

• Oaklands is barely any closer to the town centre and would provide far less in terms of environment, being surrounded by housing and many residents who are unhappy to have our services there;

• The other two sites are unacceptable to me. Option 2 is too far outside the district and amounts to a serious loss of services to the area. Option 3 is in an unacceptable location – there is poor access by public transport and the road system in South Lancaster is reaching capacity so additional traffic generated by moving services there would lead to increased congestion. I raised the issue of public transport at when I visited the Moor Lane Mills event, but was unsatisfied by the response I received, which amounted to 'we can provide taxis for people wishing to visit family members who are resident at our facilities'. Whilst I can see that the facilities at Ridge Lea are not appropriate by today's standards, I do feel that upgrading at that
site would be a much better solution for patients and their families than removing the entire service to a less well-located site; and

- We do have access to regular hospital transport into town and make use of a hospital car at the weekends in order to provide a variety of options for our patients.

About the consultation:

- I feel that it is inadequate to ‘do the minimum’ at Ridge Lea; I feel that the deployment of this phrase seems to be designed to put people off that option;

- In the same way, I was very disappointed by the inadequate advertising of the event at Moor Lane Mills: there was no sign outside to say the event was happening, and to gain entry to it I needed to get through a locked exterior door and then up to the fourth floor of the building, all with no relevant signage;

- I was far from surprised to see that very few local residents attended the event in the half-hour or so that I was there: this is particularly disappointing in view of the fact that Ridge Lea is actually in the same electoral division as this consultation event;

- This factor, taken together with the language used about the options and the lack of meaningful information about anything other than Option 3, does tend to indicate that your consultation process has been somewhat flawed; and

- This option is presented negatively in the consultation document (i.e. “do minimum”) and we feel that the Trust could and should work up an option which makes more cost-effective use of the Ridge Lea site as a centre for mental healthcare.

Staff-related issues:

- Not only do patients benefit from the exceptional grounds on which Ridge Lea is situated, so do the staff and visitors;

- Staff do not have a problem travelling to Ridge Lea, apart from again, the bus service;

- As you are fully aware, staff at Ridge Lea have already undergone a barrage of changes since we were engulfed by Lancashire Care and face another raft of uncomfortable impositions in the shape of; having 2 of our managers fight for control of 'the new unit', namely losing the PICU and joining the wards;

- This has already caused much unrest and dissatisfaction;

- Not only are we undergoing a move to the old Lonsdale unit but you have recently tried to impose the old Whittingham shifts on us without any consultation (that I know is another matter but sadly only further proves your lack of concern for the workforce);

- Do you not think that our staff have had enough to deal with over the last 2 years without also taking away our fantastic working environment and our ability to nurse to the best of our abilities;

- The more Lancashire care disregards the wishes and opinion of all at Ridge Lea, the unhappier we become; and

- An unhappy workforce cannot be therapeutic and sustainable, providing those much loved audit outcomes that celebrate efficiency and value for money.

Reasons of those supporting option 2

The following views were given by people who preferred option 2:

Conflict between the needs of different age groups:
• Oaklands should be developed further for ESMI patients. The 4 elderly demographics will require this.

• Oaklands is as you say is new, modern, high quality and built purposely for the elderly. It is a modern unit offering excellent care for this age group. Why have one facility changed with a lot of upset and upheaval to accommodate another! The location is ideal for visitors and elderly alike it is unfair to put the service users out to other areas to accommodate another service user group. I strongly object to this option and intend to inform as many as possible on this proposal. The site is wrong near to a hospital, school and residential area. Think again!! Leave Oaklands to do its job, the one it was built for to provide care for different levels of illness of the elderly and provide a better quality of life.

Best use of existing investment:
• This option makes sense to use and refurbish an already existing facility without disruption to other services.

Sustainability and environmental issues:
• Option 3 would create further problems with traffic on a road that is already severely restricted.

Therapeutic benefits of the environment:
• This would be up and running in 2012 and be purpose built to accommodate mental health service users

Reasons of those supporting option 3
Those supporting option 3 made the following points:

Conflict between the needs of different age groups:
• Royal Albert Fields site should be fully developed to accommodate adults, it seems that once again MH services have given into pressure from local residents not wanting a MH unit in their area;
• I am not in favour of combining the age groups together;
• In addition, the reduction in the number of place available may result in an imbalance between patients, older adults and adults;
• Older adults were moved to Oaklands from Ridge Lea because it was known that combining older and working adults was detrimental to care, so reversing this policy does not seem like the best option;
• Concern over privacy particularly for the elderly patients in the new facilities;
• It is unclear how the pathways of care for older patients with functional illness will work; and
• A frail elderly lady with a depressive illness requires quite a different approach to a young male patient with a psychotic illness and multiple diagnoses.

Best use of existing investment:
• It seems the most economical and common sense solution;
• This seems to be the most sensible and cost effective option;
• Option 3 saves money and transfer staff to Oaklands and then selling off Ridge Lea and put cash to good use;
• Ridge Lea is not fit for purpose as there would be far too many risks with only one ward being on site;
• It is better value for money and could be in place before 2012;
• So I think it would be a good thing to move to Oaklands Unit and close Ridge Lea;
• Appears to represent the best value for money;
• Makes use of a current derelict building;
• With the expensive upkeep of Ridge Lea and that it will be 40% empty implies that Oaklands is the best option;
• The CRHT + AOR being on the same site will help to provide a more joined up service;
• The need for replacement of or extensive major change at Ridge Lea;
• As the work required per option 3 would no doubt be very costly I feel that option 1 makes most sense as there is a readily available unit in a superb setting and accessible to everyone;
• My preferred option of the 3 proposed would be to “do the minimum,” at Ridge Lea;
• However, with a view to the longer term, I would prefer to see Ridge Lea redeveloped to a modern standard, with a new unit constructed;
• Ridge Lea has existing infrastructure, well developed grounds for patient recuperation, plenty of space for future expansion and is better served by public transport;
• A development here would have less impact on existing residents;
• Oaklands’ landscape does not lend itself to development the steepness of the land would raise construction costs and setting large buildings into the slope would spoil the semi rural nature of the area;
• This could result in isolated services being developed elsewhere – which is something the Trust has stated that it wishes to avoid;
• Concern at the long term plans for the Ridge Lea site including the disposal of the site and the possibility that the closure of Ridge Lea site would lead to further empty buildings;
• The proposals as presented made good sense, subject to a number of caveats: -That a condition survey of Derby Home presented no problems for the proposed refurbishment, in terms of loads to existing floors;
• There was also considerable concern about how the quite extensive educational facilities could be provided on the Pathfinders Drive site;
• The New Build should proceed at the existing Ridge Lea site, with its greater links to public transport, and the Oaklands unit and Derby Home should remain as they are; Once the New Build was complete, services could then move to the new building and the existing, high-maintenance building at Ridge Lea could be closed;
• Due to the scale of this programme of work, this will take an estimated ten years to deliver;
• The gradient of the Royal Albert Field site would also make such a development prohibitively expensive, even if other considerations were equal (which they are not);
• If no New Build facilities were required proceed with the redevelopment of Oaklands and refurbishment of Derby Home (Option 3) If New Build facilities are still required, beyond the provision made by Oaklands and Derby Home, then that New Build
should take place at the existing Ridge Lea site, since that land is currently owned by
the NHS Trust, whereas the land on Royal Albert Field is not (I spoke to the current
owner after the meeting);
• It was accepted that there were a number of disadvantages to option 1: These are
outlined in the document and include converting a nineteenth century building,
excessive amounts of space and difficulty with low staff numbers and health and
safety; and
• If this is the case, and the redevelopment of Oaklands and refurbishment of Derby
Home are only going ahead in order to close Ridge Lea, and ensure that the only
possibility for further development is Royal Albert Fields, then none of the Proposed
Options would be preferred.
Sustainability and environmental issues:
• I believe Oaklands is a poor option since the local road network is already under
strain and could not sustain an increased traffic load (constrictions in front of Royal
Albert Cottages and A6 junction at Booths);
• Should a new unit be required in the future it would be difficult for the Trust to get
planning permission to develop a green field site as LCT would have to show why
existing brown field sites could not be used;
• Conditional on no further expansion of the facilities was planned by New Build on
Royal Albert Fields;
• Once the Ridge Lea site was sold, it would leave the Royal Albert Fields as the only
logical area to develop a new facility; and
• On page 7 of the consultation document, the statement is made that "Under these
plans Lancashire Care's existing inpatient services for adults and older people in the
Lancaster and Morecambe area would move into a new unit on Royal Albert Fields.
Therapeutic benefits of the environment;
• After reading the article about Oaklands it sounds as though it would provide a safe,
modern and comfortable place;
• Ridge Lea is not fit for purpose the building is antiquated and not fit for modern day,
mental healthcare;
• Service users need to feel valued and deserve more modern up to date facilities;
• Overall best for patients fairly new premises and no prior reputation;
• The lack of level land for the development of gardens would hinder patient
recuperation;
• Ridge Lea is not fit for purpose;
• It is a calm, pleasant rural location for unwell patients to recover in;
Access and parking:
• Needs to be local not Blackpool which is too far for families (which is one reason you
say Ridge Lea is not an option)
• Option 2too far away for inpatients to receive regular visitors
• Because it will keep an inpatient facility in Lancaster and provide updated, safer,
more accessible amenities;
• It is too far for patients, families and staff to travel to Whyndyke Farm;
• Lancaster/ Morecambe should have their own locally accessible patient unit;
I felt as if I was being punished when at Ridge Lea because of its location and the general environment and atmosphere;

It keeps a service in Lancaster which is not age discriminatory;

We need to retain inpatient facilities in Lancaster

Provides a local facility under section 136;

All the advantages listed though I find the lack if a PICU in Lancaster worrying;

You cannot anticipate how "many and when" a way should be sought to include this facility in Lancaster or Morecambe;

Secure service in Lancaster is not appropriate as a visitor to this building it was depressing and distressing;

Most patients and staff are from Lancaster area so it would need to be a Lancaster option;

A local service will remain in Lancaster

The worst option is Whyndyke Farm travel to Blackpool distress for families and carers;

This is the only sensible option to ensure acute inpatient services are retained in the locality;

The site is very accessible and has other high quality buildings on it;

Whyndyke Farm is too far away;

Need services more local for adults and elderly;

Living in the Lancaster area visiting an inpatient at a psychiatric patient would be more convenient;

Lancaster would still have a unit for inpatients if needed and if only for a small number;

I am in favour of keeping facilities as local as possible;

Whilst ideally it would be preference to keep everything local, if this is not possible, the plans for option 3 would benefit the majority;

Local, relatively new, accessible for private and public transport, financial and economic services;

It is a quite part of town yet still 'inclusive' of the town;

The need to ensure that there is a local inpatient service for North Lancashire; 3;

The only viable alternative being on the Fylde Coast, some 25-30 miles from North Lancashire and even further from parts of South Cumbria from where a number of potential clients may be seeking treatment;

Public transport to this site is virtually nonexistent, meaning that many visitors will need to travel by car or taxi;

Whilst it feels that this is the best option there are some concerns about the siting of the proposed services at Oaklands;

Having transport my wife was able to visit me daily but should Ridge Lea be closed as per option 2 of the article, it would obviously be almost impossible for some families to visit their relatives and friends in Blackpool without great difficulty;

Students on placement would access both the new facilities in Lancaster/Blackpool, but also the Psychiatric Intensive Care Units elsewhere in Lancashire;
I was disappointed that none of the proposals offer a particularly good solution for patients in this district;

The site is poorly served by public transport requiring staff, patients and families to access the site by car, which would have implications for gaining planning permission;

Inadequate provision of consultation drop-in sessions in the rural areas;

Reservations with regard to the intensive care proposals and the transportation issues for relatives visiting patients if intensive care facilities were no longer in the district 4;

I think it is unfair to expect patients and their families/relatives to travel to Blackpool from Lancaster and further a field;

Sufficient Car Parking could be made available for the increase in the number of staff employed at the site (currently 83 spaces are available) as stated at the meeting,

The provision of Public Transport for this area of Lancaster is virtually non-existent, and the foot paths in the vicinity of Pathfinders Drive are either in a very poor state (on the Ripley St Thomas School side) or non-existent (on the cottages side);

Option 2 there was absolutely unanimous agreement among all parties that for there to be no inpatient facilities within Lancaster and the surrounding area would be disastrous on several levels; and

It would be highly inconvenient for patients and their families to have to travel to Whyndyke Farm.

About the consultation:

I will await with interest the final decision unless this has already been made;

I have read with interest the article in the Lancaster Guardian dated Friday 28th August 2009; and

I hope these points will be taken into consideration when a decision is made.

Staff-related issues:

Staff in our Community Mental Health Services would waste inordinate amounts of time transferring patients to and fro;

It would have a serious impact on training and teaching in the locality with implications for the employment and retention of local workers in the Mental Health Services;

Staff morale is also crucial so local, better working conditions close to the other Trust services must be of benefit to them too;

After working over 8 years I found that it was very depressing place not only for staff but for the patients as well;

Staff are also settled in the area with their families and do not want to travel out of area to work;

Other options suggested by the public

In spite of 15 positive responses to the question "Are there any alternatives not considered by the consultation?", there were very few positive concrete suggestions. Many of the answers provided were in the form of comments which have been included elsewhere

The specific proposals identified were

Better outreach mental health services for dual diagnosis
• Use the Royal Albert Fields
• After building work, keep the current Oaklands unit at Moss View rather than coming back after. I do not think the age groups should be merged.
• Separate units for older adults and older people remaining locally.
• If the Trust believes that a new purpose-built unit will be needed in Lancaster & Morecambe in the next 10 years (as stated on page 7 of the consultation document) why not look at providing this at Ridge Lea, rather than assuming that it will be possible to develop Royal Albert Fields, and giving the underuse of Ridge Lea as a reason to close it?

Questions and queries raised by the public within the consultation

During the consultation, the public raised the following questions:

1. What is the impact of the consultation for those on the autistic spectrum with mental health problems?
2. Why can't refurbish Ridge Lea?
3. What are the time scales for a decision after 12 week consultation?
4. What access is provided to fresh air?
5. How will we manage with loss of beds?
6. How will the Service deal with difficulties in admitting people to beds out of Lancaster?
7. Is courtyard only access to fresh air?
8. Why can't adults go elsewhere such as Moss View?
9. Will Ashton Road be widened?
10. Will patients need to move out from Oaklands to enable the development?
11. Why can't the development be done at Moss View if there are beds available there?
12. Will people needing intensive care be looked after at Oaklands in future?
13. What are the plans for the Royal Albert Field?
14. Is it possible to walk to patient group at Ridge Lea, and is it accessible by public transport?
15. Please could serious consideration be given to the idea of a café for Oaklands site? (Possibly run by volunteers but serving light lunches, coffee etc for patients, visitors and staff.)
16. Why has Oaklands site Royal Albert Fields been reduced in bed capacity leaving North Lancs. and Cumbria patients further away from their homes?
17. Where and who staff the frail elderly people with a functional illness: is this to a third separate unit?
Other views expressed within the consultation

The consultation process captured a range of views which were not associated with a specific option choice. A number of those comments expanded the issues raised thus far, and they are presented below in the same categories as before:

Conflict between the needs of different age groups:

"The merging of the functional O.A service with the adult poses a risk to patients."

"Mixing 18 to 80 plus age group is not clinically shown to be beneficial: could it be cost led?"

"It was purpose built for the elderly"

"Yet again NO consideration given to elderly service users. Yet again ""shipped out"" and disrupted to accommodate younger clients. Has any consideration been given to the dignity and respect older people, who have subsidised the NHS for years deserve?"

"The risk to frail elderly patients that would result from a mixed ward. The Trust does not seem to have considered this aspect of their duty of care."

"How the clinical model will address the diversity/spectrum of people's presentations when ill/admitted to the one unit."

Best use of existing investment:

"The unsuitability of Ridge Lea buildings (p8) and the difficulty of raising standards should be considered in the light of the propensity of Edwardian/Victorian institutional buildings to be developed as luxury executive flats (especially with large grounds). Proper costings (or a summary) would have been helpful."

Sustainability and environmental issues:

"As previously stated, rural areas should not be built on."

"Situated too close to the electrified main line railway."

"I would like to know if there will be an excellent café and restaurant in whatever is decided."

"No need to build on green fields when there is a brown field site available."

"I am opposed to any development on the Royal Albert Fields in the future. I believe that future generations will need the existing green spaces around Lancaster to maintain a quality of life."

Therapeutic benefits of the environment:

"Royal Albert Oaklands Unit does not offer adequate therapeutic outside space."

"I don't know but I have visited Ridge Lea and the outpatients+ café left an impression of an enduringly pleasant alternative to mental illness."

Access and parking:

"As a local resident (to option 3) I acknowledge its advantages for mental health care. However the scheme needs to take very seriously its car parking, something which has not been the case with R.L.I and Ripley School. Ideally we would like the redevelopment of the Oaklands Unit and the Derby Home to be the end. No further incursion on the Royal Albert Cottages or De Vitre Terrace. No other access to the site other than Pathfinders Road."

"Car parking is insufficient. People will park on street, and in housing estates."

(They quoted experience of St Martins pay and display.)

"Hard to get to if no car so visiting would be affected."

"Not sure that Oaklands is that accessible except on foot unless buses have improved, its still a distance from the town and railway."
"You make no mention of the effect of your open ended approach to the Royal Albert Fields on local residents, particularly the Terraces. Already the over development of the R.L.I site means that by 8.30am traffic is parked along the Ashton Road and surrounding areas as far as the entrance to Haverbreaks, come and have a look!"

"Traffic from Oaklands going to North Lancs / Morecambe/ Carnforth etc has to go onto the already congested Royal Lancaster roundabout and blocked city centre."

"Traffic increase on Ashton Road would be unacceptable."

"Not enough parking. Elderly should be considered and feel safe."

"Blackpool in no way serves the needs of a local mental health service."

"As a non car user, I find the statements 'Ridge Lea is not accessible for service users' family and friends' page 9 and 'people would have to travel to Blackpool' page 10, with 'community staff from Lancaster' re-admissions to be quite serious indicators of quality of service and possibly risk."

About the consultation:

"I'm just very grateful and optimistic that this is getting the attention it deserves and needs."

"Not enough advertising of this consultation: what have such a long address, what about people with writing or reading issues? How can they put their views across if the consultation is 1) not open to the public or advertised openly, and 2) not accessible for those who find reading, writing, replying difficult not even an envelope! And the longest address I have ever seen. Come on!"

"The views of local people should be taken into account as well as views of service users and staff."

"The previous consultation was a sham/ waste of money"

"Two important decisions have pre-empted much of the consultation. The historic decision not to develop the RLI on the Moor Site with the subsequent dismantling of the Moor, and the low secure unit development at Preston (page 7)"

Staff-related issues:

"The Mental Health outpatients' service is badly understaffed and there is a three month waiting list for help"

"Staffing a smaller unit at Ridge Lea should not be a problem and should be feasible financially."

Reservations expressed with Option 3

In view of the fact that Option 3 was the most popular option, the authors considered the reservations of those who voted for other options, and the caveats of those supported Option 3.

The explicit reservations about option 3 from those who voted for the alternatives were:

"Older Adult services need separate inpatient unit from adults, therefore option 3 not acceptable"

"Option 3 is taking away the service for elderly mental health and I believe that this building was purpose built for them and not adult!"

"Option 3 would create further problems with traffic on a road that is already severely restricted."

We find Option 3 unacceptable for several reasons. Firstly it is unclear how the Trust would ensure the highest quality of care for older patients with conditions such as dementia, if they..."
were to share a ward with younger patients with severe psychiatric illnesses. Secondly we are concerned that it would inevitably result in pressure for development of the Royal Albert fields, which will lead to conflict with national and local planning policies and local residents."

"The Oaklands is currently a unit for older age adults by combining that unit with younger adult facilities the services for the elderly will be significantly reduced.

This is a time when the number of elderly people is increasing and we need to provide more facilities and not less. The Oaklands currently provides a very good and well used service and we believe that this option would be detrimental to the care for elderly people. Surely quality of care is more important than anything else!

The section of Ashton road running along the front of Royal Albert Cottages is already very congested. By increasing the traffic passing along this section of road the access to the south of the town (including Royal Lancaster Infirmary) would be affected.

The public transport links to the Oaklands/Royal Albert Fields site is very limited, in contrast to Ridge Lea which has well established public transport links.

Option 3 is clearly the favourite of Lancashire Care for financial reasons as they will be able to sell off the land that Ridge Lea currently occupies. However, they should be looking further ahead to the future and plan responsibly for future generations by protecting green field land."

"This factor, taken together with the language used about the options and the lack of meaningful information about anything other than Option 3, does tend to indicate that your consultation process has been somewhat flawed."

The caveats raised by those supporting Option 3 were:

This Council (...) has looked at the proposals and would support option 3 to develop the existing Oaklands unit. Whilst it feels that this is the best option there are some concerns about the siting of the proposed services at Oaklands. Public transport to this site is virtually nonexistent, meaning that many visitors will need to travel by car or taxi. In addition, the reduction in the number of place available may result in an imbalance between patients, older adults and adults.

"I was disappointed that none of the proposals offer a particularly good solution for patients in this district.

My preferred option of the 3 proposed would be to “do the minimum,” at Ridge Lea. However, with a view to the longer term, I would prefer to see Ridge Lea redeveloped to a modern standard, with a new unit constructed. Ridge Lea has existing infrastructure, well developed grounds for patient recuperation, plenty of space for future expansion and is better served by public transport. A development here would have less impact on existing residents."

"Option 3 is my preferred option provided

That a condition survey of Derby Home presented no problems for the proposed refurbishment, in terms of loads to existing floors.

That sufficient Car Parking could be made available for the increase in the number of staff employed at the site (currently 83 spaces are available) as stated at the meeting, the provision of Public Transport for this area of Lancaster is virtually non-existent, and the foot paths in the vicinity of Pathfinders Drive are either in a very poor state (on the Ripley St Thomas School side) or non-existent (on the cottages side)."
That no further expansion of the facilities was planned by New Build on Royal Albert Fields. The statement was made at the meeting that this would not be necessary, however, once the Ridge Lea site was sold, it would leave the Royal Albert Fields as the only logical area to develop a new facility. On page 7 of the consultation document, the statement is made that "Under these plans Lancashire Care's existing inpatient services for adults and older people in the Lancaster and Morecambe area would move into a new unit on Royal Albert Fields. Due to the scale of this programme of work, this will take an estimated ten years to deliver."

If this is the case, and the redevelopment of Oaklands and refurbishment of Derby Home are only going ahead in order to close Ridge Lea, and ensure that the only possibility for further development is Royal Albert Fields, then none of the Proposed Options would be preferred (Though this would be closer to Option 1 refurbish Ridge Lea, but for the shorter rather than longer term). Instead the New Build should proceed at the existing Ridge Lea site, with its greater links to public transport, and the Oaklands unit and Derby Home should remain as they are. Once the New Build was complete, services could then move to the new building and the existing, high-maintenance building at Ridge Lea could be closed.

"My conclusion would be therefore dependent on Future Plans:

If no New Build facilities were required proceed with the redevelopment of Oaklands and refurbishment of Derby Home (Option 3).

If New Build facilities are still required, beyond the provision made by Oaklands and Derby Home, then that New Build should take place at the existing Ridge Lea site, since that land is currently owned by the NHS Trust, whereas the land on Royal Albert Field is not (I spoke to the current owner after the meeting).

The gradient of the Royal Albert Field site would also make such a development prohibitively expensive, even if other considerations were equal (which they are not)."

The BOOKWORM analysis

The BOOKWORM analysis looked at the frequency of key words and phrases, and enables us to look at the context where the most commonly occurring terms took place. It confirmed the importance of the need to take proper account of the needs of the elderly under the theme of conflict between the needs of different age groups.

It also confirmed people's concern about access, public transport and parking issues. The theme of environment emerged in a number of distinct ways, the need to provide a high quality environment for service users because of the therapeutic benefits but also the need to develop an environmentally sound and sustainable solution, making use of brown field sites rather than green field sites. There was also concern expressed over the impact of increased traffic in the surrounding areas of the facilities.

The analysis reveals concern over a common set of issues. These issues appear to lead the public to reject Option 2. However, they do not provide a clear and unequivocal choice between Options 1 and 3. Thus although there is equanimity in the public textual responses over the key issues, we cannot say either that the text responses show a clear preference for either option in respect of any specific issue.

Examining the Trust's own assessment of the advantages and disadvantages of options 1 and option 3, we have considered whether the text responses suggest that the public accept the Trust's case as both correct and significant. Obviously, if the public agrees with the Trust's view of a disadvantage, then they are expressing their negativity for that option.
## Public acceptance of Trust's analysis of Option 1

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Accepted by the public?</th>
<th>Significant to the public?</th>
</tr>
</thead>
<tbody>
<tr>
<td>A local service will remain in Lancaster.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Less disruption for staff and service users currently based at Ridge Lea.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Ridge Lea has large grounds that are of benefit to service users.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>No disruption to other services.</td>
<td>Yes</td>
<td>Not demonstrated</td>
</tr>
<tr>
<td><strong>Disadvantages</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The service provided from Ridge Lea would continue to be based on age rather than a person’s individual needs.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Ridge Lea is not very accessible for service users and their families and friends. It is also quite isolated from the rest of the community which restricts social inclusion.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Ridge Lea provides mixed sex accommodation. Each service user has their own private bedroom but en suite facilities are not provided. Single gender bathroom and toilet facilities are provided.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>40% of the space in Ridge Lea would be under utilised. This does not provide good value for money.</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>Clinical risk, due to the wards running in isolation from other services.</td>
<td>Not demonstrated</td>
<td>Not demonstrated</td>
</tr>
<tr>
<td>Advantages</td>
<td>Accepted by the public?</td>
<td>Significant to the public?</td>
</tr>
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<tr>
<td>A local service will remain in Lancaster. The Oaklands Unit is a relatively new, high quality building and is suitable for refurbishment with no need for further expansion.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Service users would have a private bedroom with en suite facilities and a choice of recreational and quiet areas for use by single and mixed sex groups.</td>
<td>Yes</td>
<td>Yes</td>
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<tr>
<td>Modern buildings can provide a more therapeutic environment for people using mental health services and a better working environment for staff.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>The location of the Oaklands Unit is accessible to people travelling by car and public transport.</td>
<td>Mixed response</td>
<td>Yes</td>
</tr>
<tr>
<td>The Oaklands Unit is co located on the same site as other Trust services, for example the Crisis Resolution and Home Treatment Team. This means that services are able to support each other more effectively, sharing staff resources and expertise.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>The provision of a dedicated resource centre for older people supports the dementia strategy.</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>This option delivers the best value for money.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Significant investment was made by Morecambe Bay PCT to develop the Oaklands Unit in 1999 using a Private Finance Initiative (PFI.) Lancashire Care is tied into this contract for another 15 years. It makes financial sense to ensure that this building is used to its full potential to achieve value for money.</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

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<tr>
<th>Disadvantages</th>
<th>Yes</th>
<th>Yes</th>
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<tbody>
<tr>
<td>There would be some disruption to services delivered from the Oaklands Unit whilst the building work took place. Existing services would have to be relocated to other Trust facilities within Lancaster and Morecambe during this time.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>The Oaklands Unit would not provide a Psychiatric Intensive Care Unit. The small amount of people estimated to need this service would have to travel out of the area.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Arrangements would have to be made to cater for very frail elderly people with a functional illness.</td>
<td>Yes</td>
<td>Yes</td>
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Conclusions from the analysis

From the data presented, the authors conclude that:

1. Option 2 has no support, Option 3 is the preferred option, but Option 1 has significant support as well.
2. There were a number of concerns which were widespread and were not unique to either option 1 or 3.
3. The most significant health concern was that elderly patients would be disadvantaged.
4. There was significant concern about retaining a local service in Lancaster.
5. There was a significant concern about access, focusing on public transport links and parking, and distance to travel for visitors and carers.
6. There was a strong belief in the therapeutic benefits from a pleasant environment, both within buildings and externally.
7. There was a desire to achieve a sustainable solution using brown field land not green fields.
8. Although there was some scepticism about the consultation, and a view expressed that the options were not the best, the invitation to provide alternatives produced a very limited response in terms of concrete proposals.
9. The authors recommend that, if option 3 is adopted as the most popular option, then the Trust should pay close attention to the reservations expressed, and the queries raised, in order to re-assure the public that their views were taken into consideration.