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DRAFT



**Public Consultation
Document**
Period of Consultation
25 September
to
22 December 2006

This document:

1. Describes how Herefordshire Primary Care Trust (HPCT) would like to develop Specialist Children's Services within the county in partnership with education and social care service – especially the idea of a new centre.
2. Asks for your ideas and suggestions on a number of points to help us make sure we get it right. These points are indicated  and the questions relating to them are included on the feedback sheet.

The specialist services referred to in this document refer to services that are currently provided in the community, not those at the County Hospital or outside Herefordshire.

SECTION 1

Specialist Services for Children in Herefordshire – as they are now

What do we mean by specialist services?

Herefordshire PCT provides health services to all children and young people living in the county. Some services are available to all children, such as immunisations. Other services are provided only when the child or young person is identified as having additional needs. The services that are provided when a child or young person has additional needs are referred to as specialist services.

Specialist services can be provided in the community or in a hospital environment. There are times when children and young people need to be admitted to hospital, in Hereford and outside the county, or attend out patient appointments at a hospital.

This document is about specialist services provided in the community.

Where are specialist services provided now?

Specialist services are currently provided in a number of different settings throughout the county. These include Community Hospitals, the Child Development Centre in Ross Road in Hereford, community clinics including Gaol Street Clinic in Hereford, schools, childrens' centres and in the home environment. The site may change according to the facilities required for the purpose and therefore a child or young person may often have to attend more than one of these settings.

The staff

The staff involved in providing specialist services include consultants, paediatricians, physiotherapists, occupational therapists, speech and language therapists, community childrens' nurses, psychologists, portage workers, teachers, special educational needs co-ordinators, the social care team, support staff and administrative staff. The staff are currently based at different sites including the Child Development Centre (Ross Road, Hereford), the Kite Centre (Ledbury Road, Hereford), Hereford County Hospital, PCT HQ at Belmont, community clinics and the Education Directorate at Blackfriars.

There are multidisciplinary teams at some of these sites and multi-agency teams at the Kite Centre and Child Development Centre.

(Sue Doheny to check) Over 60 staff are involved in providing these services, including health staff and social care staff.

How many children use the services? (Sue Doheny to complete)

Because the services are so varied and are provided in so many places, it is difficult to sum up how many children use them.

To give an indication, each year:

- x children attend the Child Development Centre

- x children attend the Child and Adolescent Mental Health Service
- x children attend the Audiology Centre

plus, plus

- ideally add how much contact children have per year with each service on average.
- add how many children typically have to attend more than one site.

SECTION 2

Why do we need to change

There are a number of reasons why we think that developing new facilities would help us improve specialist childrens' services in the community.

National Guidelines

There have been some important recent publications from the Department of Health and Department for Education and Skills to guide the future development of services for children. These papers include "Valuing People", The Special Educational Needs Code of Practice, "Together from the Start" and the Early Support Programme.

The publication of Every Child Matters, the Children and Young People's National Service Framework, and the Common Assessment Framework provide clear guidelines on the provision of services to improve the outcomes for children and young people. These publications were published in a direct response to Lord Laming's report in 2003. The tragic death of Victoria Climbié in 2000, led to a lengthy investigation led by Lord Laming. The report from the investigation was published in 2003. There were very clear recommendations in the report that showed the inadequacies of services for children. As a consequence, there has been clear direction from central Government on how childrens' services should be provided.

All the documents referred to can be found at the following websites www.dfes.gov.uk/publications, www.dh.gov.uk/policyandguidance .

There are three common themes throughout these publications, on what makes an effective service. We need to consider if the facilities we have now help or hinder us in being effective:

- Effective co-ordination of services

At any time there may be several agencies involved with a child and their family. These may include Education, Social Services, Health and voluntary organisations. Without effective co-ordination of how these services best meet the needs of the child, there is potential for misunderstandings and duplication and unfortunately a situation where the child's needs may not be met as a consequence. There needs to be effective care planning by the agencies together to ensure co-ordination.

- Effective Communication

This is key to ensure the needs of a child are met in the most effective way - communication between professionals as well as communication with parents/carers and the child. Parents are often surprised that professionals do not 'talk' more to each other and often feel that as parents they are expected to pass on information from one professional to another.

Evidence suggests that basing professionals in the same facility (co-location) is the most effective way of improving communication between them. There are obvious advantages to co-location :

- professionals working from the same base can gain a greater understanding of roles and responsibilities.
- Formal meetings are easier to organise
- Informal contacts will enable clarity to be gained on a case or spark an idea of a more appropriate way to manage a complex situation.

Co-location enables more effective communication on a formal and informal basis and helps innovative ideas for service provision to develop.

- Service provision should be as close to the child's home/school as possible.

In particular, the NSF describes the 'diagnosis and assessment facility' for children with a disability, being as close to the child's home as possible with multi-professional co-location.

Government policies and guidelines are almost always based on a much more urban situation than applies in Herefordshire. Herefordshire has challenges in implementing such models. Because of the relatively small population and large geographic area, we would not be able to afford more than one assessment centre – unlike one of the major cities with a far bigger population and therefore a larger budget, and with a smaller area to cover.

Local Service Provision

The three key themes above form the basis for the Herefordshire's Children and Young People's Plan. This is a multi-agency plan that sets out how the needs of young people are going to be met over the next 5-10 years. The plan is based on the five outcomes from "Every Child Matters". This plan will enable the development of services to be co-ordinated across all agencies.

One of the main challenges in Herefordshire of providing services is the rurality of the county. A significant amount of time can be spent by professionals travelling between sites. This time can then not be spent with children and their families. An example of the impact of this recently may help explain. It is welcomed that many children with additional needs are now attending mainstream schools but this has meant that professionals have potentially to travel to all the schools in the county and not just the special schools. This has an impact on reducing the time and resources available to spend with children.

The provision of specialist services in Herefordshire currently is from a wide variety of sites. Professionals, in the main, are not located together, but are scattered across many sites. The development of Children's Centres will enable some

aspects of specialist services to be provided closer to home for many pre-school children, as has been shown with the centres that are already in use.

However, even with the welcome development of Childrens' Centres, there will still need to be appropriate facilities available to provide specialist diagnosis and assessments when needed and provide accommodation for co-location of staff. The current facilities were generally not designed for this purpose and do not lend themselves to further development. The PCT's two main sites for children are of particular concern.

The Child Development Centre, Ross Road

Of all the PCT's properties, The Child Development Centre (CDC), at the Ross Road clinic, is the highest priority for replacement within the PCT's Estates strategy, given its substantial problems of lack of space and limited facilities. Adjoining land from the Council has been acquired in the past to extend the building, but it is now at the limit of what the site will allow. The site itself is not well placed for children's services, being a few metres away from the edge of the main A49 into Hereford, with very limited parking or drop off facilities. In view of these problems, the decision has been made not to substantially refurbish the current building but to look, as a priority, for a replacement – which could potentially be as part of a larger children's building.

The CDC currently has assessment and therapeutic groups running there, mainly for the pre-school age group. The expansion of services is not possible due to the lack of space and poor suitability of the property. For the same reasons, it is not possible to base more staff there so that all the relevant professionals join together in one place.

The facility currently does not provide adequate space to allow for assessment and treatment of children of any age. Although it is currently being used for pre-school children assessment, it is inadequate for this purpose.

There are no suitable rooms for holding care planning meetings where upwards of 15 people may be involved.

The Ross Road site also has the Child Hearing Centre which has been specifically adapted to enable specialised hearing tests to be undertaken. The facility is not ideally suited for this service and access for families is not ideal given the parking and drop off problems already described.

The Kite Centre, Ledbury Road

The Kite Centre provides limited office space for the community therapy teams, community nurses, learning disability nurses, psychologists, administration and social services disability team. The offices are on the upper floor of an old building where the lower floor is used for respite care for children with behavioural problems. There are no lifts so the only access is by stairs. There are no meeting room facilities and no therapeutic space for treatment.

The teams work hard to provide a multidisciplinary approach to the service they provide but the cramped building, and space which was originally designed for entirely different purposes, does not support them.

The buildings we have currently are not suitable, and hinder us in providing the type of modern, effective service we wish to provide, and which good practice guidance points us towards. In putting this right, we have to face the challenge of being a rural area. This means we have a relatively small population and therefore budget, but need to provide services across a large geographical area. We need to think how to develop the service and what facilities we need to support that.

SECTION 3

What could a new service look like?

The specialist childrens' community service is for children from birth to 19 years old, with additional needs. The service needs to be well co-ordinated, facilitate effective communication and be as close to home/school as possible. It needs to meet national guidelines and local needs. Most of the current childrens' community health facilities within Herefordshire were not designed specifically for childrens' services and there is little room for expansion. There needs therefore to be a change in the way we currently provide services to children with additional needs.

The national guidelines recommend that facilities are as close to childrens' home/school as possible. In our plans, specialist childrens' community services would continue to be provided out to the market towns and wider Herefordshire. Services would still be provided by team members to schools, in homes and at the childrens' centres now being developed. However, we could improve services by developing a specialist assessment centre, providing specialist equipment and a base for a full multi-disciplinary team. **A major benefit would be that this would help the different agencies, and different professionals, to co-ordinate effectively their assessments and care for individual children.**

The costs of such a centre, in relation to the relatively small population of Herefordshire, mean it would not be affordable to provide and run specialist assessment centres in each of the market towns. We would either have to duplicate equipment and facilities – which is very unlikely to be affordable – or transport equipment, which is not practical. It would be very difficult to provide a multi-disciplinary team for each such centre.

We are therefore proposing a service which still visits children at home and in settings nearer home, but also has a central facility.

Any new service would need to ensure that it provides:

- An easy-to-understand “one stop shop” for families and professionals needing developmental and disability services for children.
This would be for professionals and parents/carers - access to information, assessment and provision of treatment/intervention. All appointments during assessment would be in one place. Any on-going intervention/therapy/treatment would be co-ordinated from the facility.
- Cost effective specialist service
Having all specialists in one place makes them more available as a resource. A team approach to providing input to children and families is more readily available.

- Centre of excellence
A new modern purpose built facility will attract professionals to work in Herefordshire. The facility could include enabling professionals to hold seminars and training. This would all facilitate 'best practice' provision of services.
- Co-ordinated high quality family centred services
The co-location of staff would enable them to share professional notes that facilitate better co-ordination and communication.
- Co-location of multi-agency multi-professional workforce
Many of the benefits of co-location have been discussed in this paper:
 - Easy access to other professionals
 - More effective informal and formal communication
 - Innovative and creative solutions to care planning
 - Understanding of roles and responsibilities

What are the core services?

The core specialist community services required for children and young people with developmental problems/disabilities are:

- Consultation
- Single and multi professional assessment for the child or young person
- Multi agency assessments
- Interventions (individual and group therapeutic work)
- Co-ordination of care both planning and provision
- Family support
- Teams / services for specific conditions eg
 - Multi-agency child development team
 - Multi-agency assessment and management service for children with autistic spectrum disorders
 - Multi-disciplinary feeding service
 - Team for children with emotional and behavioural disorders
 - Visual impairment team

Aspects of these services could be based in a new central facility – including a base for the staff, and facilities for specialist assessment and treatments/care.

Q: Do you think there would be benefits from including some or all of these services in a new central facility? Please explain.

Q: What other core services do you think should or could be provided, based at a central facility?

Additional Services

There are additional childrens' services that may be included in specialist services and could also be based at a new central facility such as

- CAMHS (Children & Adolescent Mental Health Services) – currently at Gaol Street Clinic in Hereford
- Audiology – currently at the Child Development Centre, Ross Road in Hereford
- Nursery provision

Q: Do you think there would be benefit from including some or all of these additional services in a new central childrens' facility? Please explain.

Q: What other additional services do you think should or could be provided at a central facility.

There are other childrens' services that may be appropriate to be included dependant upon location:

- Acute Outpatient Clinics
- Diagnostics eg X-ray

These services could be provided if the site was close enough to Hereford County Hospital, so that staff from there could provide the services, and if necessary supporting facilities could be provided.

Q: Do you think there would be benefits from including acute hospital (eg County Hospital) outpatient services and diagnostics, like x-ray with the other services described above?

Q: What other additional services do you think should or could be provided if the new facility was very close to Hereford County Hospital – for example, any other childrens' services at the County Hospital now?

How could these services be provided?

It is not economically feasible to provide a facility in each of the Herefordshire market towns, or for each part of the county, that could provide the base for all the professionals, and adequate space to provide a high quality service in line with national guidelines.

The most appropriate option may be to provide a central site where all staff are based and some aspects of services are provided.

Where appropriate teams or individuals would provide a service nearer to the home in schools, community hospitals, children centres etc. This is obviously dependent on the intervention required and on the practicalities involved eg equipment needed. The economies of scale suggest that for some services, it will be possible for more children to be seen, and to have access to better resources, if they travel to a centre.

Q: Which services do you think it would be reasonable to travel to a central site for?

Q: Which services would be reasonable to provide in childrens' homes or nearby?

SECTION 4

Options for providing the service

The previous sections have explained why we believe that a new specialist facility would improve services, and that we could not afford to provide and run more than one such specialist facility in the county. Duplicating such facilities across market towns, for example, would not be economically viable.

At this early stage we estimate that we would need very approximately 1400 sq m of building for the core services. This increases to 1700 sq m if the additional services are included. The total cost of building the facility we estimate at very approximately in the range of £4 to £5 million.

Based on this, we think there are four options.

Option 1

Do nothing.

This leaves us with a service which is not able to meet national guidance fully, and with buildings which are outdated and not ideal for modern services. In this option we would simply refurbish buildings as far as possible with their current layouts.

Option 2

Continue with current buildings with refurbishment. Either adapt one of them to provide a limited assessment/diagnosis centre, or develop a new site for a limited assessment/diagnosis centre. Services continue to be provided nearer to homes and schools; some more specialist assessment/diagnosis provided in the new limited centre.

- This would improve facilities for some assessment/diagnosis.
- However, it would not achieve any of the benefits of having services and the professionals who provide them on one site. The current fragmentation of service would continue.
- Refurbishment of our current buildings in Hereford would improve them, but could not tackle problems such as closeness to main roads or fundamentally unsuitable buildings.
- Our current buildings in Hereford are full and sites are constrained, making it difficult to add a new assessment/diagnosis centre, even if its contents were limited.

Option 3

Develop a new central specialist childrens' services building. This would be a single combined facility. It could be at a new, different site, or could reuse one of our existing sites, with a completely remodelled building. Services would continue to be provided nearer homes and schools; some services would be provided in the new facility.

This is our preferred option.

At this stage we do not have a preferred location. That will be resolved later. But further on in this document we ask you what you think would make a good site.

Q: Which option do you think is best and why?

Q: Do you think there are other options we have missed?

SECTION 5

Can we afford a New Building for Children's' Services?

If this consultation supports the proposal for a new specialist facility, then obviously we have to know whether it is affordable.

The answer at this stage is that we believe we can afford it, but in order to test this, we need to decide exactly which services to include. The consultation process and the feedback you give us will help shape that decision. Then we can develop a Business Case to test out in detail whether the building costs and ongoing running costs are affordable.

The amount of money we can spend on this project will inevitably be limited. We have explained below some of the possible sources of funding.

It may be that we find we can afford a building with most but not all of the services which we originally had in mind. We therefore need your views on what would be the most important services to include in this sort of new children's' services building.

Paying for a New Building

We estimate that a new building of this sort will cost in the order of £4 to £5 million to build, plus land costs if applicable.

Working with Herefordshire Council

If this option is supported, then we shall work in partnership with Herefordshire Council, whose social care and education staff will be an integral part of the centre, to explore our options for putting the funding together for the construction costs.

New NHS Money

The Department of Health via Strategic Health Authorities, allocates new capital funds to pay for new buildings and equipment. The PCT receives a block allocation of capital each year, but this is less than £1 million and also has to pay for a long list of other projects and equipment replacements across the PCT. The PCT can also bid for extra capital money from the Strategic Health Authority. However, such a bid would then have to compete with others from NHS Trusts throughout the West Midlands. Also, we would then have to pay significant ongoing charges (called capital charges) each year, because we had received a large block of capital money. This source of money is therefore still an option, but not the most likely one.

Working with a Partner

Another approach would be for us to work with a partner organisation who could construct the building for us and then provide related services like maintenance and security. This approach is being taken in many NHS schemes now. The partner could be from the independent sector. In this option, the partner might be able to identify new and alternative sites for the building, which meet our requirements.

If current PCT buildings become surplus as a result of a new facility (eg Child Development Centre) it may be possible for them to be sold and the proceeds go towards the new buildings costs.

Running Costs

We would be able to spend the money that we already invest each year in the services we might put into the new building. This totals about £1.3 million per year.

If the building also provides space to be used by other organisations, for example accessible training or conference facilities that are at a premium in Hereford, there should be income from that to help offset building running costs.

Affordability

Building and running a new children's' services building has to be affordable within what we have to spend now and in the future.

This consultation will help to decide what we want in the building if the proposal is supported, and its size and scope. From that we will complete a Business Case early in 2007, to test what we can afford.

SECTION 6

What would make a good site?

If it is accepted that a single site would act as a base and provide some aspects of core and additional services, where would the best site be? The site would need to be easily accessible and provide a 'one stop' service.

It is usually assumed that Hereford City is the most accessible place for the most people because of roads and public transport, but we would like your views.

A number of activities will go on in the building including:

- One to one consultations – an appointment you have with one professional.
- One to many consultations – an appointment you have with several professionals.
- Single professional assessments – assessment of a child by one professional.
- Multi-professional assessments – assessment of a child by several professionals.
- One to one interventions/treatment – treatments or care by one professional of one child.
- Group interventions/treatment – treatments or care to a group of children.

- Professional meetings – meetings of professionals.
- Care planning meetings – meetings of professionals.
- Counselling
- Teaching, training, seminars
- Co-location of staff

The building would therefore need:

- Car parking
- Clinical and non-clinical rooms
- Various sizes of meeting rooms
- Large area for assessment
- Indoor and outdoor nursery
- Office space
- Staff rooms
- Conference/training facilities
- Storage
- File Storage
- Staff toilets

Facilities need to enhance the experience for the children visiting and their parent/carers.

This would include adequate and appropriate

- toileting facilities
- waiting areas
- play areas
- toileting and changing facilities
- Quiet room – beverage making facilities

Q: What else should be included on the site? And how many of each of the above do we need?

Q: Where would the best location be to allow for easy accessibility to all the children of Herefordshire?

Q: If the site was in Hereford City, would it matter if it was close to the middle of town?

Q: Is there any site that you think would be inappropriate?

Q: What specifically should we take into account when selecting a site?

Q: Which of the following are the most important? (put 1 next to the most important, 2 to next important etc).

- easy access to public transport
- car parks nearby
- safe drop off and pick up space
- room for external play space

SECTION 7

What is the vision?

A one-stop shop where parents of children with additional needs (those with serious developmental problems and disabilities) can:

- meet with all the professionals involved in their child's care
- obtain advice and support from specialists
- meet with other parents for mutual support

A one-stop shop where children can:

- have their assessments and treatments tailored around their needs, in a child-friendly building purpose-built to cater for them

 Do you see a different vision? Or is there something to be added to this vision?

SECTION 8

The Consultation Process

Why consult?

Herefordshire PCT intends to engage actively with the people who use Specialist Children's Services, our staff, the Health Overview & Scrutiny Committee (OSC), PCT Patient & Public Involvement Forum (PPIF), partner organisations and other interested parties in developing the proposals for children's services.

We want to hear peoples' views about the ideas set out in this document, so that we can develop services that children and parents really want. We hope to be able to provide an opportunity for people to give their views, either by telling us at a meeting, or in writing via the feedback sheet provided in the back of this document.

How will we consult?

We have included questions throughout the document, based on what we think are the key issues. We hope that people will at least give their views on these; however we will be happy to receive feedback about any part of the proposals.

For many the easiest way will be to complete the response form at the back of the document, answering the questions, and adding any other issues they wish to, then to post the form back to us using the FREEPOST address on the form.

However previous consultations have shown that is best to go to where people meet already; as a result we hope to attend existing school councils, parent and carer groups and other existing meetings to discuss the proposals.

If you do not attend any meetings, but would still like to discuss the developments rather than respond in writing, or you have an existing meeting you would like to

invite a PCT representative to, please contact the Patient Advice & Liaison Service (PALS) on 01432 262016 and we will arrange a convenient time for you.

We will develop consultation displays for each main existing site where specialist childrens' service are, which will include an outline of the key issues, confirmation of the consultation start and finish dates, a stock of consultation documents, a mechanism for returning completed feedback sheets and contact details for people wish to discuss the proposals with us.

We will meet with the Chairmen of the OSC and PPIF as early as possible to discuss the proposals and regularly update them as to the feedback we receive. We will make the relevant staff available to discuss the proposals and the consultation at their formal committee meetings as required.

We will discuss the developments with our staff, through existing team meetings and briefings and where necessary arrange specific forums to discuss the potential impacts of any changes.

When will the consultation happen?

The Consultation will be formally launched on 25th September 2006 and run for 13 weeks until the 22nd December 2006. All responses received before 5pm on the 22nd December will be taken into account. The consultation will be formally launched through the local media and through the displays in existing sites.

How will I know what has happened?

The responses will be collated before Christmas and the final report will be completed by late January 2007. This report will be based on the feedback you give and will include the final recommendation to the PCT board. We will send a copy of the report to each of the participating groups, partner organisations, staff teams and any individual who requests a copy.

The Board will make a decision on the proposals in the report at their meeting in the spring – we will publicize the relevant date. Board meetings are held in public at the Primary Care Trust Headquarters, Vaughan Building, Ruckhall Lane, Belmont, Hereford, HR2 9RP.

Children's Specialist Services Consultation – feedback questionnaire

QUESTION	RESPONSE
<p>Q: (see page 6) Do you think there would be benefits from including some or all of these “core” services in a new central facility? Please explain.</p>	<div style="text-align: right;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div>
<p>Q: (see page 6) What other core services do you think should or could be provided, based at a central facility?</p>	
<p>Q: (see page 7) Do you think there would be benefit from including some or all of these “additional services” in a new central childrens’ facility? Please explain.</p>	
<p>Q: (see page 7) What other additional services do you think should or could be provided at a central facility?</p>	
<p>Q: (see page 7) Do you think there would be benefits from including acute hospital (eg County Hospital) outpatient services and diagnostics, like x-ray with the other services described above?</p>	
<p>Q (see page 7) What other additional services do you think should or could be provided if the new facility was very close to Hereford County Hospital – for example, any other childrens’ services at the County Hospital?</p>	
<p>Q: (see page 7) Which services do</p>	

Please put this form in the box provided at any of our existing Children's Service Sites or post it back free of charge to:

Consultation, FREEPOST NATW599, PO Box 64, Hereford, HR4 0BR