











MENTAL HEALTH INPATINET RECONFIGURATION DRAFT COMMUNICATIONS AND ENGAGEMENT PLAN

This document provides a summary of the planned communications and engagement process to support the reconfiguration of mental health and dementia services.

1. Communications and engagement objectives include:

- To ensure service users, carers and clinicians are able to meaningfully contribute and shape the proposals
- To gather insight to support any future consultation process
- To ensure service users and carers affected by the changes are appropriately supported
- To ensure compliance with the PCTs' statutory duties to consult and involve

2. Key audiences

There are numerous audiences including:

- Internal
 - PCT / cluster board(s)
 - LCFT board
 - LCFT staff, in particular those affected
 - Staff side and regional unions
 - LCFT council of governors
- Service users and carers
 - Service users and carers directly affected by the changes
 - Service users and carers more generally
 - LCFT foundation trust members
 - General public

Partners

- o GP consortia leads
- o GPs and the LMC
- Other health care professionals
- Councils
- Voluntary, community and faith sector groups and Lancashire Third Sector Consortium
- Acute trusts
- Scrutiny / opinion formers
 - o MPs

- The OSCs
- o LINk
- o Councillors
- Advocacy / campaign groups
- NHS North West
- o The media
- Monitor

3. Core principles

- Clinicians and service users/carers should be involved in the development of any future consultation plan
- Engagement must be meaningful. A feedback loop is crucial
- All queries must be acknowledged on the same day and responded to within five working days, wherever possible
- All activity must take into account and build on previous communications/engagement
- All communications must be timely, accessible and in plain English and/or the appropriate format
- Communications must be coordinated and consistent across Lancashire

4. Overarching approach

There are four phases to this programme:

- Engagement around the outcome of the TAG process began June 2011
- Engagement around the sites in central and east Lancs to begin imminently
- Engagement around the decommissioning of specific sites during the transition process – timetable TBC
- Any formal public consultation TBC

5. Communications and engagement mechanisms

- Press releases
- Letters to stakeholders
- Website (standard content on all trust websites linking thorough to the mental health partnership/LCFT)
- Service user, carer and staff case studies
- Attendance at meetings, including OSCs
- Presentations
- Use of internal communications tools to reach staff
- Online polls and surveys
- Use of health centre survey podiums rotate across Lancashire

- Engagement with current services users and their carers face to face, focus groups and via surveys
- Public meetings/focus groups
- Use of members/affiliate schemes
- Use of social media, as appropriate
- Use of insight gathered from: social media, the mainstream media, complaints and queries

6. Performance monitoring

The programme communications leads will ensure delivery of the plan; the programme director will monitor progress.