



**Resources Department  
Town Hall, Upper Street, London, N1 2UD**

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## **AGENDA FOR THE JOINT HEALTH AND CARE SCRUTINY COMMITTEE LB.ISLINGTON AND L.B.CAMDEN**

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Members of the Health and Care Scrutiny Committee are summoned to a meeting, which will be held in Islington Town Hall on **29 November 2018 at 6.30 pm in Committee Room 1**

**Lesley Seary  
Chief Executive**

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Despatched : 21 November 2018

### Membership

#### **Councillors: L.B.ISLINGTON**

Councillor Osh Gantly  
Councillor Nurullah Turan  
Councillor Martin Klute  
Councillor Jilani Chowdhury  
Councillor Tricia Clarke  
Councillor Anjna Khurana  
Councillor Kadeema Woodbyrne  
Councillor Sara Hyde

#### **Councillors: L.B.CAMDEN**

Councillor Sian Berry  
Councillor Alison Kelly  
Councillor Simon Pearson  
Councillor Nazma Rahman  
Councillor Julian Fulbrook  
Councillor Paul Tomlinson  
Councillor Lorraine Revah  
Councillor Maria Higson

#### **Co-opted Member:**

Jana Witt

**Quorum: is 3 Councillors from each Borough**

**A. Formal Matters** **Page**

1. Introductions
2. Election of Chair
3. Apologies for Absence
4. Declaration of Substitute Members
5. Declarations of Interest

If you have a **Disclosable Pecuniary Interest\*** in an item of business:

- if it is not yet on the council's register, you **must** declare both the existence and details of it at the start of the meeting or when it becomes apparent;
- you may **choose** to declare a Disclosable Pecuniary Interest that is already in the register in the interests of openness and transparency.

In both the above cases, you **must** leave the room without participating in discussion of the item.

If you have a **personal** interest in an item of business **and** you intend to speak or vote on the item you **must** declare both the existence and details of it at the start of the meeting or when it becomes apparent but you **may** participate in the discussion and vote on the item.

**\*(a)Employment, etc** - Any employment, office, trade, profession or vocation carried on for profit or gain.

**(b)Sponsorship** - Any payment or other financial benefit in respect of your expenses in carrying out duties as a member, or of your election; including from a trade union.

**(c)Contracts** - Any current contract for goods, services or works, between you or your partner (or a body in which one of you has a beneficial interest) and the council.

**(d)Land** - Any beneficial interest in land which is within the council's area.

**(e)Licences**- Any licence to occupy land in the council's area for a month or longer.

**(f)Corporate tenancies** - Any tenancy between the council and a body in which you or your partner have a beneficial interest.

**(g)Securities** - Any beneficial interest in securities of a body which has a place of business or land in the council's area, if the total nominal value of the securities exceeds £25,000 or one hundredth of the total issued share capital of that body or of any one class of its issued share capital.

This applies to **all** members present at the meeting.

6. Order of business
7. Confirmation of minutes of the previous meeting

8. Deputations - if any
9. Notification of any items of urgency by the Chair
10. Response to the Proposal to Transform Mental Health Services in Camden and Islington 7 - 94
11. Any other Business

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## **THE LONDON BOROUGH OF CAMDEN**

At a meeting of the **CAMDEN & ISLINGTON JOINT HEALTH SCRUTINY COMMITTEE** held on **TUESDAY, 9TH OCTOBER, 2018** at 6.30 pm in Council Chamber - Crowndale Centre, 218 Eversholt Street, London, NW1 1BD

### **MEMBERS OF THE COMMITTEE PRESENT**

Councillors Tricia Clarke, Osh Gantly, Sara Hyde, Alison Kelly, Simon Pearson, Nazma Rahman, Paul Tomlinson and Kadeema Woodbyrne

### **MEMBERS OF THE COMMITTEE ABSENT**

Councillors Siân Berry, Jilani Chowdhury, Julian Fulbrook, Maria Higson, Anjna Khurana, Martin Klute, Lorraine Revah, Nurullah Turan and Co-opted Member Janna Witt

**The minutes should be read in conjunction with the agenda for the meeting. They are subject to approval and signature at the next meeting of the Camden & Islington Joint Health Scrutiny Committee and any corrections approved at that meeting will be recorded in those minutes.**

### **MINUTES**

#### **1. APOLOGIES**

The Principal Committee Officer opened the meeting.

Apologies for absence were received from Councillors Anjna Khurana, Maria Higson, Jilani Chowdhury and Martin Klute. Councillor Sara Hyde gave apologies for lateness.

Councillor Pat Callaghan, Camden Council's Cabinet Member for Tackling Health Inequality and Promoting Independence also gave apologies for the meeting.

#### **2. ELECTION OF CHAIR FOR THE MEETING**

#### **RESOLVED –**

THAT Councillor Alison Kelly be elected as Chair for the meeting and Councillor Osh Gantly be elected as Vice-Chair for the meeting.

#### **3. DECLARATIONS BY MEMBERS OF PECUNIARY AND NON-PECUNIARY INTERESTS IN RESPECT OF ITEMS ON THIS AGENDA**

There were no declarations of interest.

**4. TERMS OF REFERENCE**

The Chair queried the need to elect the Chair at the start of each meeting.

**RESOLVED –**

THAT the terms of reference be noted.

**5. ANNOUNCEMENTS**

There were no announcements.

**6. DEPUTATIONS (IF ANY)**

Consideration was given to the deputations by Peter Lyons and Christopher Mason. The Chair commented that officers would respond to the issues raised during their presentation for **Item 8: Response to the proposal to transform mental health services in Camden and Islington** and that Members could then ask questions of the deputees.

**7. NOTIFICATION OF ANY ITEMS OF BUSINESS THAT THE CHAIR CONSIDERS URGENT**

There was no urgent business.

**8. RESPONSE TO THE PROPOSAL TO TRANSFORM MENTAL HEALTH SERVICES IN CAMDEN AND ISLINGTON**

Consideration was given to the report of the Islington and Camden Clinical Commissioning Group and Camden and Islington NHS Foundation Trust. The consultation document was presented by Tony Hoolaghan, Chief Operating Officer Islington and Haringey CCGs, and by Dr Vincent Kirchner, Medical Director at Camden and Islington NHS Foundation Trust.

**Clinical Services**

Concern was expressed that the vision for mental health care in Camden and Islington excluded young people. It was suggested that Islington had one of the highest suicide rates in the country for young men. The Medical Director agreed that integrated services were desirable but that the Trust was commissioned to provide services for adults of 18 years and over. He also noted that suicide rates in Islington had come down over recent years and were now average for London. The Chief Operating Officer Islington and Haringey CCGs offered to bring information about mental health services for children to the two Health Scrutiny Committees.

**ACTION FOR: Tony Hoolaghan, Chief Operating Officer Islington and Haringey CCGs**

Councillors noted that the Trust was commissioned to provide services for those who were 18 years and over but considered that 18 to 25 year olds were young people and that they had not been listened to as a specific group. It was also unclear how services such as Minding the Gap for young people integrated with the rest of mental health services. The Medical Director commented that hard to reach groups, such as the 18 to 25 year old cohort, would be engaged in co-production of what would go in the buildings.

In response to a question about how many adults and young people were sent out of the area for residential care, the Medical Director stated that Camden and Islington was in a better position than it had been 18 months previously. As of the date of the meeting, there were no acute mental health adult patients in private beds.

Councillors queried why the proposals would result in the same number of beds although there was a significant projected population growth over the next decade. The Medical Director informed the Committee that Camden and Islington had above the national average number of mental health inpatient beds but a limited community offer. There was a need to rebalance the offer and offer effective community support to people in their homes. Councillors noted the need for more community facilities but expressed concern that the Trust was not planning for future population growth by proposing an increase in inpatient beds.

There was concern about the low number of survey responses and it was suggested that the consultation be extended again. Officers noted that there had also been a series of engagement meetings, including with young people. Details of who had been engaged and the feedback from meetings would be brought to the Committee's meeting on 29 November 2018. The survey had been extensively circulated and advertised. The Chief Operating Officer Islington and Haringey CCGs informed the Committee that The Consultation Institute had advised on best practice and also confirmed that the response rate was in line with similar consultations elsewhere.

Councillors considered that Highgate Mental Health Centre was not of a good enough quality to be the standard that the Trust was aiming for. The Medical Director agreed that standards could be better at Highgate Mental Health Centre and that he was passionate about providing a good quality offer for those with mental health illness.

The Medical Director agreed with a suggestion that the new hospital should have a welcoming environment and an area such as a coffee shop for people to gather outside of bedrooms. He stated that these details would be developed through the co-production process with service users.

## **Hubs**

The Chair expressed concern about the location of the proposed hub in Greenland Road. It was considered that this was the wrong place for a community hub, being in the middle of Camden Town, in a heritage area, with drug taking and criminality.

Due to the heritage issues, the site was more expensive. It was also considered that the site was not big enough. The Chair queried what discussions had been undertaken with key partners before the proposals were agreed for consultation. The Chief Operating Officer Islington and Haringey CCGs responded that there had been discussions and that these were ongoing through the consultation. The results of the consultation so far showed support for the Greenland Road site. It was noted that there were no concerns amongst Committee members about the proposed community hub on Lowther Road.

The Healthwatch Camden representative informed the Committee of a recent consultation session with people with learning disabilities. They had expressed concerns about the site including that it was difficult to access and that there were drug users around the area. The CCGs and the Trust were encouraged to talk further with people with learning disabilities.

The Medical Director assured the Committee that it was realistic to state that service users would be able to choose which of the three hubs they would attend. The hubs would be big enough, with enough consulting rooms so that capacity would not be an issue.

The Chair commented that the whole community should be involved in the co-design of new services. The Chief Operating Officer Islington and Haringey CCGs responded that the Trust had experience of co-designing services and was going to great lengths to involve the community.

The Committee Chair highlighted Camden Council's community hubs and suggested that patients would like to be treated on a site that was not focussed solely on mental health services. The Trust welcomed the opportunity to integrate more with local authority hubs and agreed that many people would like to be treated at a multi-service site. However, some patients would not be comfortable with that approach.

The Medical Director recognised the different opinions amongst the Committee over whether transport was an issue for the Greenland Road site. Transport mapping had indicated that the site was accessible, with 95% of people in Camden able to reach it within 25 minutes during the worst times for traffic.

## **Estates**

Committee members noted that they did not want to lose the St Pancras site as a public asset.

Concern was expressed that the Estate Strategy was addressed in a single page within the consultation document. It was queried what the vision, values and core principles were for the St Pancras site. It was also questioned what success would look like and if this included retaining the site as a public asset. It was further queried whether the recent announcement that restrictions on borrowing for council housing would be reduced had been considered in relation to the proposals for the St Pancras site. The Chief Operating Officer Islington and Haringey CCGs

responded that the Estates Strategy sought to ensure that mental health illness was treated in safe spaces and ensured dignity for patients. There had been a long term question regarding what to do with the St Pancras Hospital site. It was suggested that the Estates Strategy be considered by the Camden and Islington Health Scrutiny Committees.

**ACTION FOR: Tony Hoolaghan, Chief Operating Officer Islington and Haringey CCGs**

The Medical Director informed the Committee that the Trust owned 5.4 acres on the St Pancras Hospital site. It was proposed to retain one acre for services and to agree a long lease with other NHS services for two acres. A further 2.4 acres would be redeveloped for housing. Some of this would be prioritised for NHS staff. It was anticipated that planners would request some mixed use on site. The redevelopment would enable the provision of a new hospital. It was also noted that retaining the St Pancras Hospital site was not a cost neutral option.

The Chair noted that the Trust had a Certificate of Immunity for the St Pancras Hospital site that would expire in 2020. This prevented local people from seeking a preservation order for the site. Concern was expressed that the Trust was under pressure to proceed with the proposals before the Certificate expired. The Medical Director agreed that the expiration of the Certificate of Immunity would add risk to the development but noted that the site was within a conservation area. This meant that planners retained powers over the future of the building. The Trust was working with planners and the community to retain what was of value on site.

There were no proposals to upgrade the south wing of the St Pancras Hospital as part of this consultation. Concern was expressed about parts of the site continuing to be unsuitable for patients.

The Chair commented that Camden Council had experience of development through its work on the Community Investment Programme and could support the Trust with its proposals. The Medical Director commented that the Trust had been working with developers which had the expertise to deliver the proposed redevelopment.

The Committee supported the provision of social housing with affordable rents within the development. It was noted that both Camden and Islington Councils had a track record of delivering large number of social housing. It was also pointed out that housing was important for mental health.

Councillors encouraged the Trust to establish a construction working group with local residents and service users to ensure co-design of the development.

**RESOLVED –**

THAT the Committee would make the following recommendations as its response to the consultation:

- (i) The number of beds should meet current and future needs, with sufficient provision that patients would never be sent outside the area for residential services;
- (ii) Further consideration should be given to the use of the St Pancras Hospital site in the event that Moorefield Eye Hospital does not relocate to the site, with appropriate consultation;
- (iii) The current approach to the Greenland hub should be halted until further work was undertaken with the local councils, CCG, voluntary organisations and residents;
- (iv) There should be a greater commitment, rather than just an aspiration, to 50% social housing on the redeveloped St Pancras Hospital site;
- (v) Further clarification was needed on the vision, values and core principles of the Estate Strategy for the St Pancras site, including an assessment of what success would look like and if this included retaining the site as a public asset; and
- (vi) Further separate consultation needs to be undertaken on the Estates Strategy.

**ACTION FOR: Ally Round, Senior Policy and Projects Officer**

**9. ANY OTHER BUSINESS THAT THE CHAIR CONSIDERS URGENT**

There was no urgent business.

The meeting ended at 9.40 pm.

**CHAIR**

**Contact Officer: Cheryl Hardman**

**Telephone No: 020 7974 1619**

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**MINUTES END**



Item:

<b>MEETING:</b>	Camden and Islington joint meeting of Health and Care Overview and Scrutiny Committees
<b>DATE:</b>	29th November 2018
<b>TITLE:</b>	Outcome of the Public Consultation on the Redevelopment of St Pancras Hospital and the Transformation of mental health services in Camden and Islington.
<b>LEAD GOVERNING BODY MEMBER:</b>	Jonathon Levy – NHS Camden CCG Rathini Ratnavel – NHS Islington CCG
<b>AUTHOR:</b>	Elizabeth Stimson and Yasmin Khan
<b>CONTACT DETAILS:</b>	<a href="mailto:estimson@nhs.net">estimson@nhs.net</a> <a href="mailto:yasmin.khan2@candi.nhs.uk">yasmin.khan2@candi.nhs.uk</a>

**SUMMARY:**

Between July and October 2018, Camden and Islington Clinical Commissioning Groups' undertook a consultation on proposals for the transformation of mental health services in Camden and Islington, including the redevelopment of the St Pancras Hospital site which is owned by Camden and Islington NHS Foundation Trust (C&IFT). The redevelopment of St Pancras Hospital is considered to be a key enabler for transforming the way in which mental health services are provided in Camden and Islington.

**The consultation focused on two specific areas:**

- The proposed move of 84 mental health inpatient beds currently on the St Pancras Hospital site and their proposed relocation to a new site by the Whittington Hospital
- The development and location for two community hubs and the mix of services at each hub including services remaining at a third third hub at St Pancras Hospital

The proposals affect the inpatient facility and community mental health services currently delivered on the St Pancras site and on additional Trust sites. The other NHS services that are delivered on the St Pancras Hospital site by other NHS Providers including the Royal Free Hospital and a Camden GP practice will remain on the site. In some cases, these services will be delivered in newly refurbished buildings, as part of the redevelopment process.

In line with our statutory duties, the CCGs consulted on the redevelopment proposals, ensuring local people were given the opportunity to share their views on the services affected by the redevelopment of the St Pancras Hospital site and proposals for the delivery of community services.

To ensure we followed best practice for a public consultation, The CCGs commissioned the Consultation Institute (the national organisation that quality assures consultations) to support and assure our consultation process. The Consultation Institute passed the CCGs at each stage of the process, assessing the process followed and providing assurance that it met best practice for public consultations.

Overall there was strong support for both proposals. There was a strong overall support for the move of inpatient beds from St Pancras Hospital to a new purpose-built facility next to the Whittington Hospital. With regard to development of community hubs whilst this was supported feedback

showed a degree of uncertainty around the detail of the community hubs element, particularly the mix of services.

There were 260 survey responses were received, which were reflective of the borough's local populations. In addition we received comments from a range of stakeholders in over 70 face to face meetings held during the consultation period.

The purpose of this report is to:

- Summarise the proposals for 'Transforming Mental Health Services in Camden and Islington'
- Set out the process used to consult on the proposals
- Highlight key areas of feedback from the consultation and the Joint Health Scrutiny Committee on 9 October 2018 and the actions we have taken to address each area

**SUPPORTING PAPERS:**

Transforming Mental Health Services in Camden and Islington Consultation Report by Participate

**RECOMMENDED ACTION:**

The Joint Camden and Islington Health Overview and Scrutiny Committee members are asked to:

- Comment on the consultation process
- Receive the results of the consultation set out in the consultation report
- Provide comments on the proposals in the light of the response from the public

Between 6 July and 12 October 2018, Islington Clinical Commissioning Group and Camden Clinical Commissioning Group (CCGs) consulted with their local communities on proposals that would change the way in which Camden and Islington NHS Foundation Trust provide some mental health inpatient and community services in future. A findings report was published on 12 November which presents the outcome of the feedback received during that consultation period. This is attached at appendix 1.

### **What we consulted on**

The changes proposed affect all inpatient services at St Pancras Hospital and also some community services delivered from other Trust sites. It is proposed that inpatient wards from the ageing buildings at St Pancras move to a new purpose-built hospital near the Whittington Hospital, close to the Highgate Mental Health Centre which is the Trust's other inpatient building. In addition, three new community mental health hubs would be developed that will offer a range of outpatient and other services from under-one-roof, in central locations. The proposed locations for the community hubs are currently, Lowther Road, in Islington and Greenland Road, in Camden – both of which are existing Trust sites. A third hub will exist at the St Pancras Hospital site. The Trust's future plans include developing more hub locations across both boroughs, subject to public consultation.

Investment in the new inpatient facility and the community hubs will be funded by money released from the value of the land at the St Pancras Hospital site. The Trust will maintain a significant presence on the St Pancras site – in the form of a third mental health hub – with the majority of community services offered at St Pancras remaining in the new building. The new Trust building at St Pancras will also house a new Institute for Mental Health, enabling research staff to collaborate more effectively, ensuring the best treatment and care for local people.

Service users and local people were asked to give their views on the proposed move of inpatient wards from St Pancras Hospital to a new site on land at the Whittington Hospital and to feed back any comments or concerns they may have. They were also asked for their views on the community hubs model, including the proposed locations, proposed mix of services and suggestions on alternative locations.

The CCGs were keen to ensure that all the feedback received during the consultation period was carefully analysed and considered. An independent organisation called Participate was commissioned to analyse all the feedback received during the consultation period at meetings, external and internal events, through written responses and completed surveys. The findings of Participate's analysis are given in the consultation findings report attached (appendix 1).

## **Approach and methodologies**

During the consultation the CCGs and the Trust aimed to consult with service users, staff and residents across Camden and Islington in a way that was as accessible as possible and offered a range of avenues through which people could give their views. A number of channels were put in place to support this.

Our engagement approach identified key community groups to speak with:

- Camden and Islington Foundation Trust service users (both inpatient and community)
- Groups who traditionally face barriers to accessing services or having their voices heard
- Groups identified as having higher use of mental health services
- Local residents

A consultation document and survey was developed, with a large print version, a full-length easy read version and a summary easy read version. The survey and documents were available online and as hard copies. Hard copies of the consultation document and survey were made available at all public events and service user and community group meetings. Details were made available for people to contact the CCG directly to request a hard copy of the consultation document and survey, but the majority were completed online or through outreach.

Additionally, a phone line and email address was arranged to enable people to request a hard copy of any of the documents, provide feedback and ask any questions or queries they had on the consultation.

Seven direct requests for hard copies of the consultation document were received. Most survey responses were completed online, with a further 12 filled out at events. Notes were taken at all face to face meetings which have been incorporated into the analysis of the themes arising from the consultation.

The Consultation Institute was commissioned to provide quality assurance for the consultation process.

### **The consultation document and survey were promoted via:**

- CCG and Trust websites
- Newspaper adverts
- Newsletter items with voluntary sector and Healthwatches
- Newsletter items in staff newsletters
- Direct emails to service user groups
- A mail out to all Foundation Trust members
- Information leaflet summarising the proposals
- Weekly tweets
- A regular agenda item at the Camden and Islington GP forum

### **Events:**

- Public events on 11, 19 July and 26 September
- Drop-in sessions with the Trust medical director on 26 July and 26 September
- Staff briefings at Highgate and St Pancras
- Attendance at all of the Trust service user groups and local carer groups in both boroughs, attending 44 group meetings with including service users, carers, staff, inpatients and local people, to present the proposals.
- Attendance at interested local community groups such as Somers Town neighbourhood forum
- Meeting with Keep Our NHS Public

- Presented at the GP Forums and at staff briefings (CCGs and Trust)
- In response to the specific feedback from the JOSOC in the pre-consultation meeting June, the consultation also contacted local residents groups near the Whittington and ST Pancras Hospitals

### **Events were publicised through:**

- CCG and Trust websites
- Newspaper adverts
- Newsletter items with voluntary sector and Healthwatches
- Newsletter items in staff newsletters
- Direct emails to service user groups
- A mail out to all Foundation Trust members
- Information leaflet summarising the proposals
- Posters at different sites
- Tweets

### **Addition outreach**

In addition to the activity detailed above the Trust and CCGs commissioned additional resource to outreach into seldom heard groups to ensure that all voices were considered.

Healthwatch Camden and Participate undertook this outreach work with the local Camden and Islington communities – focusing on Black, Asian, Minority Ethnic and Refugee (BAMER) and Lesbian Gay Bisexual Transgender (LGBT) groups, people living with disabilities and the homeless. Through this work the consultation was able to get the views of 105 people across both boroughs.

The CCGs and the Trust recognise that children and young people using CAMHS services currently will likely be some of the future adult service users of the new mental health services. As such we ensured that the consultation reached CAMHS services and young people's voices were included. This will be continued in the on-going engagement events as the proposals, if agreed, move forward into the next phases. This is important as some young people who are currently using children's mental health services will have transitioned into adult services by the time the proposed changes are in place in 2023.

Alongside this, the Trust's medical director visited 15 of the Trust's 16 inpatient wards to speak to staff and service users about the proposals and to gather their feedback. A meeting on Garnet Ward did not take place as it was felt that it would be too overwhelming for service users with severe dementia to participate but those who were well enough, and ward staff, were invited to join the neighbouring Pearl Ward (also for elderly patients with mental health needs and/or dementia) meeting to hear about the plans and give their views.

### **Next steps and timescales**

Although all the feedback received during the public consultation has now been evaluated, local people can still submit their views which the CCGs will take into consideration during their decision making. In addition, between 12 November and 12 December, before the CCGs make their final decision, local people can provide their views on the evaluation report.

This evaluation report will be discussed at the following committees:

- Camden and Islington joint meeting of Health and Care Overview and Scrutiny Committees. The committee's response will highlight any outstanding issues the CCGs need to address.
- Camden and Islington CCGs will hold a Governing Body Meeting in Common in December to make a decision based on the evidence given in the evaluation report and any further feedback received between 12 November and 12 December 2018.

- The final decision, with the CCGs' response on how they will address local people's views on the proposals, will be published at the beginning of January 2019.

The Trust and CCGs are committed to engaging with all of its stakeholders beyond the formal public consultation. Engagement activities will continue throughout the life of the programme to help shape plans and encourage participation in co-production.

### **Key themes from public consultation**

Overall there was strong support for both proposals. There was a strong overall support for the move of inpatient beds from St Pancras Hospital to a new purpose-built facility next to the Whittington Hospital. With regard to development of community hubs whilst this was supported feedback showed a degree of uncertainty around the detail of the community hubs element, particularly the mix of services.

The following represents a summary of the key themes in the consultation feedback.

#### **Adequate bed numbers to meet current and future demand - feedback from the consultation:**

A theme throughout the consultant responses is the need to ensure the new facility includes adequate bed numbers – particularly considering the projected population increase in London.

#### **Actions we are taking:**

The CCGs and the Trust will continue to refine the work already undertaken in its Pre-consultation Business Case and with the London Clinical Senate to ensure the proposed bed numbers are still valid. As part of the business case approval process, there is further requirement from the Trust's regulator NHS Improvement, and the Department of Health and Social Care, to refresh bed modelling at each stage. This work will be carried out with specialist clinical planners once the consultation phase is completed.

#### **Travel and access - feedback from the consultation:**

Half of the respondents to the consultation survey were not concerned about travel to the new inpatient site, broken down by borough this increases to 71% for Islington but falling to 44% for Camden. The main concerns raised were about a more complex journey for some residents, higher cost of travel and a further distance for some friends and family to travel to visit relatives in hospital. Overall for community hubs travel was not raised as an issue.

#### **Actions we are taking:**

The Trust is in communication with Transport for London to discuss the issues raised, for example the hill leading up to the new hospital site, to explore mitigations. A number of travel scenarios have been modelled for the community hubs (including peak/off peak, public/ private transport) and these have been mapped for stakeholder engagement purposes.

#### **Clarity around the community hubs model - feedback from consultation:**

Whilst there is overall agreement with the use of community hubs to deliver some community mental health services outlined in the proposals, feedback shows a degree of uncertainty around the detail of the community hubs element, particularly the mix of services.

#### **Actions we are taking:**

Work is on-going with service users and staff to design the elements required for the delivery of secondary mental health services. Likewise the design of the model of care reflecting the Trust's clinical strategy is also being developed with staff and service users. In addition, the Trust is carrying out further work with its commissioners, partners, councils and voluntary sector organisations to see how best to utilise mixed space to support the provision of holistic care for our service users, and provide the best benefit to local people. We will continue to consult with partners to develop and maximise opportunities for mixed spaces.

### **Greenland Road community hub - feedback from consultation:**

From the 260 public consultation surveys completed, 48% of respondents said they either 'strongly agreed' or 'agreed' with Greenland Road being a community hub location, whereas 9% said they 'disagreed' or 'strongly disagreed'. However, some concerns were raised that older service users or those with learning disabilities may find the location daunting.

#### **Actions we are taking:**

Recognising the concerns that Greenland Road may not be the best location for some service user groups, the intention is to locate these specific services at alternative locations, subject to further engagement. We are continuing to speak to staff and service users about the merits and challenges of this site.

### **The need for an additional community hub in the north/west of Camden - feedback from the consultation:**

Feedback supports the need for at least one additional community hub in the north / west of Camden to bring services closer to service users in that area.

#### **Actions we are taking:**

Several discussions have taken place with Camden Council development officers about potential opportunities for this additional community hub site. A number of options have been proposed and the Trust is working closely with these officers to assess the opportunities in terms of timescales, location and suitability with the needs of local people in mind. The additional hub will be subject to a further separate business case and engagement.

### **Alignment of strategies with local authorities and CCGs - feedback from consultation:**

Another key theme from consultation responses was the need to align plans with other partner organisations. The Trust understands how crucial it is to align its work with existing plans and strategies in the two boroughs to enhance local services and avoid duplication.

#### **Actions we are taking:**

The Trust has already met with officers from the council, CCG and public health in each borough as a group to discuss the alignment of plans to maximise opportunities for the use of mixed spaces at the community hubs. These have included discussions on:

- Primary care strategies
- Estates strategies overviews
- Strategies relating to community development and the voluntary sector

These discussions will continue to identify opportunities for closer alignment and drive improved outcomes for local people. As an example, the Trust has continued to align its objectives in Camden to those of the Camden 2025 Vision, led by the Council, and aims to support delivery of a number of the agreed outcomes.

In addition, the Trust has initiated a series of sessions to bring together voluntary sector organisations from both boroughs to discuss better collaboration and jointly improve outcomes for people with mental health needs.

### **Continuing engagement with service users, carers and local people - feedback from consultation:**

There was a consistent view that local people should be engaged in the transformation programme beyond the consultation period and that new facilities should be co-designed with stakeholders.

#### **Actions we are taking:**

The Trust and CCGs recognise that to meet the needs of local people, new facilities and services must be designed in collaboration with service users; their input and feedback has influenced plans to date and will continue to be encouraged beyond the consultation period.

Design workshops have been held to better understand the views of people, particularly service users and staff, in relation to the development of community services. The Trust has discussed the

plans at an early stage with a range of service user groups and will continue to engage widely to ensure that hard-to-reach groups in particular, for instance young black males, are engaged. Further engagement activities will seek to ensure that community buildings and the new inpatient facilities benefit from the close involvement of staff, service users, carers, members, governors, local voluntary organisations and other local partners. The Trust has compiled a live database of people that have registered an interest in staying involved with the design process and will draw on this group for the detailed work ahead.

Future engagement will involve a range of methods that include:

- Bespoke design workshops
- Attendance at existing service user group, community and staff meetings
- Visits to innovative service delivery sites to gather ideas and opinions
- Listening events

Where appropriate, engagement will be site specific to enable a focus on the needs of the local people who will use those particular services the most.

## **Estates matters**

### **North Central London STP estates strategy**

The chair of the STP Estates Board is keen to engage with JHSCs in further discussion.

NCL Partners published an Estates Strategy in July 2018. This document is designed to be iterative to reflect the continued development of place based models of care, subsequent funding requirements and priorities of an ever evolving estate which shifts care closer to where it is needed and most suitably delivered. The development of the St Pancras Hospital site, the proposed move of the in-patients ward to the Whittington Hospital site and the expansion of mental health services in the community is very much part of the NCL Partners Estate Strategy. NCL Partners will continue to work closely together to deliver and further refine the estate strategy going forward.

### **Clarity around the estates strategy for the St Pancras Hospital site**

It is apparent that people want to understand the vision for the St Pancras Hospital site. The Trust is in the process of appointing a development partner. The Trust Board has the following vision for the site to inform that process, which is in line with Camden Borough Council development policy:

The St Pancras site objectives are:

- Modern health facilities and services to meet Camden, Islington and London's future needs.
- Comprehensive redevelopment and refurbishment to achieve the most effective and efficient use of land and buildings.
- Exploit the site's location near to King's Cross and St Pancras.
- New research and medical facilities which complement the Knowledge Quarter.
- An outward looking mixed-use development with diverse activities and new housing, including affordable housing.
- An attractive place to use services, work and live, with new streets and public spaces, (to support the creation of a new urban environment that contributes positively to community well-being and mental health recovery).
- Architectural excellence including retention and creative use of significant heritage assets.

- Development that complements change and other development strategies happening in the area.
- Improved pedestrian and cycle connectivity and movement in the wider area.

# TRANSFORMING MENTAL HEALTH SERVICES IN CAMDEN AND ISLINGTON

Consultation Findings Report  
October 2018



**Document Control Sheet**

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**Contents**

<b>Introduction</b>	<b>4</b>
<b>Consultation Methodology</b>	<b>6</b>
<b>Approach to Analysis</b>	<b>8</b>
<b>Summary of Findings</b>	<b>9</b>
<b>Potential Equality Impacts</b>	<b>22</b>
<b>Survey Data Feedback</b>	<b>33</b>
<b>Meeting Notes Data</b>	<b>58</b>
<b>Other Responses</b>	<b>76</b>

## Introduction

Participate Ltd has been commissioned by NHS Camden and Islington Clinical Commissioning Groups (CCGs) to independently analyse and report upon the data from the **Transforming Mental Health Services in Camden and Islington Consultation**. The following summary report sets out the analysed and thematic data from the consultation that concluded in October 2018.

## Context

Camden Clinical Commissioning Group (CCG) and Islington Clinical Commissioning Group (CCG) are the local organisations that buy mental health services from Camden and Islington NHS Foundation Trust (the Trust) on behalf of local people. Between 6 July and 12 October 2018, the CCGs consulted with their local communities on proposals that would change the way in which Camden and Islington NHS Foundation Trust provide some mental health inpatient and community services in future.

## The Consultation

The changes proposed would affect all inpatient services at St Pancras Hospital and also some community services delivered from other Trust sites. Inpatient wards from the ageing buildings at St Pancras Hospital would move to a new purpose-built hospital near the Whittington Hospital, close to the Highgate Mental Health Centre which is the Trust's other inpatient building. In addition, two new community mental health hubs would be developed that would offer a range of outpatient and other services from under-one-roof, in central locations. The proposed locations for the community hubs are, currently, Lowther Road, in Islington and Greenland Road, in Camden – both of which are existing Trust sites.

Investment in the new inpatient facility and the community hubs would be funded by money released from the value of the land at the St Pancras Hospital site. The Trust would maintain a significant presence on the St Pancras Hospital site – in the form of a third mental health hub – with the majority of community services offered at St Pancras Hospital remaining in the new building. The new Trust building at St Pancras Hospital would also house a new Institute for Mental Health, enabling research staff to collaborate more effectively, ensuring the best treatment and care for local people.

Service users and local people were asked to give their views on the proposed move of inpatient wards from St Pancras Hospital to a new site on land at the Whittington Hospital and to feed back any comments or concerns they may have. They were also asked for their views on the community hubs model, including the proposed mix of services and whether they felt there should be an alternative location or locations for the hubs.

## Next Steps and Timescales

The CCGs are committed to ensuring that all the feedback received during the consultation period is carefully analysed and considered. Participate was commissioned to analyse all the feedback received during the consultation period at meetings, external and internal events, through written responses and completed surveys. The findings of Participate's analysis are given in this evaluation report.

Although all the feedback received during the public consultation has now been evaluated, you can still submit your views which the CCGs will take into consideration during their decision making. In addition, between 12

November to 12 December, before the CCGs make their final decision, you can provide your views on this evaluation report. You can email your feedback to [islington.ccg@nhs.net](mailto:islington.ccg@nhs.net). Or call 020 3688 2900.

This evaluation report will be discussed at the following committees:

- Camden and Islington Health Overview and Scrutiny Committees. Both committees will come together as a committee in common to discuss the findings on 29 November 2018. They will then make recommendations to the CCGs. The committee's response will highlight any outstanding issues the CCGs need to address.
- Camden and Islington CCGs will hold a Governing Body Meeting in Common in December to make a final decision based on the evidence given in this report and any further feedback received between 12 November and 12 December 2018. At this meeting the CCGs will present their own report on how they will address local people's views on the proposals.

The final decision, with the CCGs' response on how they will address local people's views on the proposals, will be published at the beginning of January 2019.

## Consultation Methodology

The CCGs and the Trust aimed to consult with local service users, staff and respondents across Camden and Islington in a way that was as accessible as possible, and offered a range of avenues through which people could give their views. A number of channels were put in place to support this.

A consultation document and survey was developed, with a large print version, a full-length easy read version and a summary easy read version. The survey and documents were available online and as hard copies. Hard copies of the consultation document and survey were made available at all public events and service user and community group meetings.

Details were made available for people to contact the CCG directly to request a hard copy of the consultation document and survey, but the majority were completed online or through outreach.

### The consultation document and survey were promoted via:

- CCG and Trust websites
- Newspaper adverts
- Newsletter items with voluntary sector and Healthwatches
- Newsletter items in staff newsletters
- Direct emails to service user groups
- Information leaflet
- Weekly tweets
- A regular agenda item at the Camden and Islington GP forum

### Events:

- Public events on 11, 19 July and 26 September
- Drop-in sessions with Trust Medical Director 26 July and 26 September
- Staff briefings at Highgate and St Pancras

### Events were publicised through:

- CCG and Trust websites
- Newspaper adverts
- Newsletter items with voluntary sector and Healthwatches
- Newsletter items in staff newsletters
- Direct emails to service user groups
- Information leaflet
- Posters at different sites
- Tweets

### Outreach

The Trust and CCGs attended over 42 group meetings including service users, carers, staff, inpatients and local people, to present the proposals.

Healthwatch Camden and Participate were also commissioned to undertake outreach work with the local Camden and Islington communities – focusing on Black, Asian, Minority Ethnic and Refugee (BAMER) and Lesbian Gay Bisexual Transgender (LGBT) groups, people living with disabilities and the homeless.

The CCG worked with the children's participation officer in Islington to talk to CAMHS service users who could be affected by the changes. Some young people who are currently using children's mental health services will have transitioned into adult services by the time the proposed changes are in place in 2023.

Alongside this, the Trust's medical director visited all the Trust's inpatient wards to speak to staff and inpatients about the proposals and to gather their feedback.

### *Approach to Analysis*

The body of this report contains the detailed analysis and feedback from all responses received. The raw coded data and the full set of responses have been passed to Camden and Islington CCGs for consideration within the decision-making process.

**PLEASE NOTE:** Some respondents may have answered the formal consultation survey and emailed a document or sent in letters or fed back in meetings, giving responses which mirror their survey response in some aspects. Therefore, we have analysed the emailed documents/letters and meeting notes using the same process, but have separated the data findings within this report to ensure that responses are not double counted.

Individual comments from letters/emails and to the open ended questions within the survey have been coded into key themes, which have been broken down in terms of frequency with which a comment is made in the analysis. This enables the most frequent themes to emerge. Please note that comments can be multi-coded for themes, which is why the frequencies add up to more than the number of responses i.e. one response may be coded more than once due to the number of themes it contains. It should also be noted that:

- Through cross tabulation of the data by postcode we have aimed to extract the findings by area
- Themes have also been extracted by specific stakeholder groups and these are outlined within the body of this report.

## Summary of Findings

The data sections within this report set out the analysis and feedback from each dialogue method including the: survey data; meeting notes; and the letters/emails received.

- The analysis from 260 surveys
- Coding of 16 emails, telephone, social media and formal responses
- Themes to have emerged from 42 sets of consultation meetings notes

## Overview of consultation response

- Respondents are generally in favour of improving mental health services
- There is generally a more positive response to the proposals from Islington respondents than from Camden respondents
- Camden respondents are less positive as there are concerns about the location or suitability (Greenland Road) of services (hubs and inpatient) within the local geography
- There appears to be a general lack of knowledge around the NHS estates and facilities and consequently little suggestion of alternative locations. Those suggested were:
  - There is a 'huge need' to have better facilities south of Euston / Pentonville Road.
  - Somewhere near the Tavi might also be considered if there is a suitable building
  - If there are going to be two Camden sites then these should be at very different ends of Camden, one in South Camden the other in North Camden
  - Somewhere centrally in Camden would be beneficial
  - Should be located at a site more central to the community it will be serving and closer to good public transport links
  - There should be some service provision in or near Fitzrovia, where there are limited services
  - Why not 250 Euston Road, the transport system is much larger, or the old HQ of CNWL?
  - A good place would be on the site of Holloway Prison
  - What about a "Hub" near Swiss Cottage Library / Health Centre?
  - The old Pentonville Prison Site
  - It might be possible to use local libraries space
  - Somewhere more private - not the centre of Camden Town
  - Any space at Welcome? In the universities? Euston Rd? Euston one-stop-shop on Hampstead Road?
  - Peckwater was suggested as a good site for some mental health services.

The overall themes which have emerged throughout these dialogue methods are outlined within the summary of findings section below. The themes have been placed under the relevant headings of the consultation questions/proposals by dialogue method.

## SURVEY FINDINGS

**Q1a. Having read our proposals, to what extent do you agree or disagree that we need to make changes to the way in which mental health services are delivered across Camden and Islington?**

- 73% of *all* respondents agree (strongly agree or agree) that changes are needed to the way in which services are delivered across Camden and Islington

- Camden respondents demonstrate a lower level of agreement (68% of which strongly agree or agree), compared to Islington respondents (84% of which strongly agree or agree)
- 8% of *all* respondents *disagree* that changes are needed
- 13% of Camden respondents *disagree* compared with just 2% of Islington respondents
- These findings infer lower levels of agreement with the need to change overall from those respondents that can be identified as being from the Camden area.

**Q1b. Please explain your reasons for the answer given to Q1a above.**

A number of themes emerged in relation to this question, but the most frequently mentioned themes are listed below in order of frequency and by positive and negative comments.

Positive comments:

- Inpatients and hubs will provide a wider service and where services are needed
- Current buildings are old and out-dated
- Agree with your proposal
- Will provide a better / more joined up service to comply with Health & Safety Act and be more innovative as required
- Will provide upgraded buildings
- Changes and improvements are important for mental health services
- Better (more modern) equipment will be available
- Would provide proper, early access for those that need it

Negative comments:

- St Pancras site not fit for purpose
- Needs to be close so that friends and family can visit
- Travel issues need to be addressed.

**Q2a. To what extent do you agree or disagree with the move of inpatient beds from the St Pancras Hospital site to a new and purpose-built facility next to the Whittington Hospital and opposite the Highgate Mental Health Centre?**

- 65% of *all* respondents agree (strongly agree or agree) with the move to the new site
- Overall respondents from the Islington area are more positive about the move (80% of which strongly agree or agree), compared to those from the Camden area (57% of which strongly agree or agree)
- 12% of *all* respondents disagree with the move to the new site (strongly disagree or disagree)
- 16% of Camden respondents disagree compared with just 4% of Islington respondents
- Again these findings infer a higher level of disagreement with the proposed move of inpatient beds from those respondents that can be identified as being from the Camden area.

**Q2b. Please add any further comments you have or alternative options we should consider for the relocation of inpatient beds from the St Pancras Hospital Site.**

A wide range of themes emerged in relation to this question (some further comments and some suggested alternatives), but the most frequently mentioned themes are listed below in order of frequency and by positive comments, negative comments and alternative options suggested.

Positive comments:

- Agree a new facility to replace St Pancras would be good
- Aim to provide as good or better service after relocation
- New build gives patients more dignity and improves quality of care
- As long as there are good transport links
- Having all wards in one location next to Whittington makes sense.

Negative comments:

- Bed numbers - need to provide additional beds for future need / there should be no loss of beds
- Just don't agree with moving it to Whittington / Highgate.

Alternative options:

- Why not refurbish existing wards / sites instead?
- Keep it close to the original St Pancras site / Camden users access (easier)
- Do not have all the beds in one place
- Have you considered moving them to St Ann's hospital in South Tottenham?
- Why not demolish and rebuild on the former Waterlow unit site?

**Q3a. From the list below, please select the main reasons you feel that travel to the new site could be an issue for you or your family?**

- 50% of *all* respondents were not concerned about travel to the new site (which accounted for 71% of Islington respondents and 44% of Camden respondents)
- The top two travel issues chosen the most from the list provided were additional travel time and a more complex journey
- Cost of travel was the third highest reason.

**Q3b. Please use this box to explain the travel issues in more detail.**

A wide range of themes emerged in relation to this question, but the most frequently-mentioned themes are listed below in order of frequency.

- Need more time to travel / too far away
- Not a serious concern
- Patients having to find a new site could be left anxious / confused
- Live close to Whittington Hospital [so not adversely affected]
- No direct bus service available
- Cost of travel could be an issue for some / me
- Difficulty walking or [getting a] wheelchair up the hill
- Difficult for disabled and elderly patients
- Good bus / tube service [exists]
- Will make it harder for friends and family to support the patient.

**Q4. To what extent do you agree or disagree with the use of community hubs to deliver some community mental health services outlined within our proposals?**

- Overall 65% of *all* respondents were in *agreement* (strongly agree or agree) with the use of community hubs to deliver some community mental health services as outlined
- 86% of Islington respondents agreed compared to 60% of Camden respondents
- Overall 6% of *all* respondents disagreed (strongly disagree or disagree) with this use of community hubs
- 15% of Camden respondents disagreed compared with just 5% of Islington respondents.

**Q5a. LOWTHER ROAD**

**To what extent do you agree or disagree with the proposed location of Lowther Road as a community hub?**

- Overall, 44% of *all* respondents agreed with Lowther Road as a community hub
- There were high levels of uncertainty with 54% of respondents feeling they didn't know, preferred not to say or couldn't agree/disagree
- 61% of Camden respondents and 26% of Islington respondents were uncertain
- 26% of Camden respondents agreed with Lowther Road as a community hub compared with 73% of Islington respondents
- These findings infer a much higher level of agreement with the proposed location of Lowther Road from respondents that can be identified as residing in Islington compared to those from Camden.

**Q5b. To what extent do you agree or disagree with the proposed mix of services at Lowther Road?**

- Overall 43% of *all* respondents agreed with the proposed mix of services at Lowther Road
- There were high levels of uncertainty with 52% of respondents feeling they didn't know, preferred not to say or couldn't agree/disagree
- 33% of Camden respondents agreed with to the proposed mix of services at Lowther Road compared with 67% of Islington respondents
- Over a quarter of Camden respondents neither agreed nor disagreed (27% did not know).

**Q6a. GREENLAND ROAD**

**To what extent do you agree or disagree with the proposed location of Greenland Road as a community hub?**

- 48% of *all* respondents agreed with the proposed location of Greenland Road as a community hub
- 39% of Camden respondents and 60% of Islington respondents agreed (strongly agree or agree) with Greenland Road as a hub location
- 16% of Camden respondents and 24% of Islington respondents did not know
- Again there were high levels of uncertainty with many feeling they didn't know, preferred not to say or couldn't agree/disagree (44% of *all* responses)
- These findings again infer that there are higher levels of agreement with Greenland Road as a hub from those respondents that can be identified as residing in Islington compared to those from Camden.

**Q6b. To what extent do you agree or disagree with the proposed mix of services at Greenland Road?**

- Overall 43% of *all* responses agreed (strongly agree or agree) with the proposed mix of services
- 34% of Camden respondents and 58% of Islington respondents agreed
- 27% of Camden respondents and 25% of Islington respondents did not know.

**Q7. To what extent do you agree or disagree with the proposed mix of services at St Pancras Hospital site?**

- Overall 52% of *all* responses agreed (strongly agree or agree) with the proposed mix of services at St Pancras Hospital site
- 50% of Camden respondents and 64% of Islington respondents agreed
- Again there were high levels of uncertainty, with 40% feeling they didn't know, preferred not to say or couldn't agree/disagree.

**Q8. Please use the box below to give any other suggestions for additional locations for the community hubs or any other comments that you feel we should take into account in relation to our proposals on community services.**

A wide range of themes emerged in relation to this question, but the most frequently-mentioned themes are listed below in order of frequency.

- I don't think there are any issues / happy with suggestions
- Need to know what is proposed for each site before we can say it's suitable
- More smaller hubs so that everyone who needs them can get support
- I don't know where these locations are
- Hubs should be person-centred
- Comprehensive service required, covering a mix of needs
- Staff are key to delivery especially for crisis care
- Greenland Road not suitable for vulnerable people - drug dealing in the area cited as an issue
- Staff must be considered and be able to move around the sites to deliver services
- Open up the hubs for other organisations to deliver services
- A further community hub on the Camden North or North Western boundary
- Both St Pancras and Greenland Road are in South Camden / close together
- Supporting service users to find the new location [required]
- Needs to be welcoming and make them feel safe
- St Pancras site should only be for mental health
- Keep beds as they are at St Pancras
- Service users don't like being singled out attending clinical services

**Q11. Please use the box below to state any other comments or concerns you would like us to consider as part of the proposals.**

A wide range of themes emerged in relation to this question, but the most frequently-mentioned themes are listed below in order of frequency.

- Support plans / think it will work
- Do whatever it takes to support people with mental health issues
- Not convinced changes will work / don't change things
- A lot of upheaval
- Community hubs good for early intervention and better outcomes
- Reduce the impact on service users where possible
- Please provide more details about future capacity including staffing levels and where icope will be based
- Need more information about the facilities in the hubs
- Consultation is flawed / unfair
- Better information and sign posting about the proposals
- Concerned that there won't be enough patient beds
- Waiting lists for mental health are still too long

### **DIFFERENCES BY LOCALITY**

The following highlights the key differences in feedback by locality across the survey findings.

- Camden respondents are generally less in favour of these proposals, supported by comments relating to accessibility of the new facilities and a general view that another site more accessible to Camden respondents would be preferable (but few suggestions as to where this should be)
- Both Camden and Islington respondents agree that changes are needed to the way mental health services are delivered
- The majority of Camden and Islington respondents agree with the move of inpatient beds to the Highgate site, but more Camden respondents stated that they disagree (16% compared to only 4% of Islington respondents stating that they disagree)
- 71% of Islington respondents are not concerned about travel to the new site compared with 44% for Camden
- Islington respondents are more positive overall about the use of community hubs to deliver some mental health services (86% agree or strongly agree compared with 60% for Camden)
- Camden respondents have a much lower level of agreement for using Lowther Road as a hub (26% agree or strongly agree compared with 73% for Islington respondents)
- Camden respondents are also unsure about the mix of services at Lowther Road (33% strongly agree or agree compared with 67% for Islington)
- Although a higher proportion of Camden respondents (22% versus 14% for Islington) *strongly agree* with Greenland Road as a site for a community hub, a much higher proportion of Islington respondents *agree* (46% versus 17% for Camden). 16% of Camden respondents disagree or strongly disagree, compared to only 2% from Islington
- More Islington respondents agree with the proposed mix of services at Greenland Road (58% compared to 34% of Camden respondents)
- Overall, Islington respondents are more in agreement with the proposed mix of services at St Pancras Hospital (64% compared to 49% of Camden respondents)
- A higher proportion of Islington respondents (53% combined strongly agree or agree compared with 31% for Camden) believe that the CCG has identified all the equalities issues and impacts of the proposed changes

- More current or former service users responded from Camden than from Islington (24% versus 12% of all responses respectively). 80% of respondents for Islington state they are members of the public (compared to 56% for Camden). This is an interesting finding as although there are higher levels of agreement throughout from the Islington respondents, with fewer respondents who have direct experience (service users, carers etc.) of these services they may be less informed about what these changes may mean.

## **KEY THEMES FROM MEETINGS / OTHER DOCUMENTS**

Many themes emerged in relation to this question, but the most frequently-mentioned themes are listed below.

- Will there be a garden / outside areas / quiet space for elderly and autistic service users?
- Share design details for community hubs / [need] service user input
- Will there be sufficient capacity to cope with increased demand?
- Plans are very positive / good
- What's the cost / how will it be funded?
- Will the hubs be appropriate / how to access?
- More clarity around which services are staying at St Pancras and which are moving
- What provision will there be for growth in population and MH services?
- Needs to be appropriately staffed
- Need more information about what is included in the Community Model
- Transport more difficult - further away
- Need to ensure capacity to cope with increased and unpredictable bed demand
- Will all community services move to community hubs?
- How long will it take to complete?
- Need more than two hubs / more in each location
- Are you looking at best practice / research from elsewhere on inpatient and hub design?
- Need fewer opinions and more facts and figures
- Concern about selling off NHS estate
- Should not be financed through sale of buildings / being done for financial reasons
- What about private housing? What will they cost / more detail needed on social housing
- Can you outline the plans with milestones / implementation?
- We were promised a gym at HMHC [and that never happened] / would like a gym in new building
- Which community wellbeing services will be included?
- How much will you listen to the views in this consultation?
- Hubs can offer easy access for early intervention
- Will there be other facilities (cafes and shops) at the hubs?
- Need single rooms with en-suite
- Why not renovate the wards at St Pancras instead / rebuild?
- Health and social care providers and commissioners need joined-up thinking on community services
- Need consistency of staff support - too many changes
- Will there be same sex wards?
- Good to have new purpose-built inpatient unit – replaces Victorian buildings
- Will transport costs be paid / shuttle bus?

## **RESPONSES FROM STAKEHOLDERS**

Specific responses were received from Healthwatch Camden, Healthwatch Islington and community partners and London Borough of Camden Council

- Broadly in support of the proposals - positive that no services will be cut - some uncertainty of the benefits to service users
- Current service users don't want to stay at St Pancras Hospital
- Concern about inpatient bed numbers – Acute beds? Configuration of beds (flexibility to adapt layout), reducing length of stay, maintaining or increasing given population increase – but may need less if early intervention is successful
- Concern about health inequalities – ineffective health inequalities assessment – needs to consider BAME and disability users
- Concern about accessibility of sites for wheelchair, disability and pushchair access – especially up the hills – can the bus stop be moved?
- Access for all patients needs to be monitored, analysed and influenced
- Need hubs close to populations that need support – a needs led assessment should be undertaken to determine the best location for the hub
- Concerns about access to the new site – particularly local amenities (café, shop)
- Should include staff, local respondents and patients in design Community organisations and the voluntary sector need to be included in plans at an early stage – including a regular forum to meet with the Trust as the development progresses
- Trust need to deliver safe therapeutic services which respect individual privacy – individual rooms with en-suite, shared work and open spaces
- Environment at Greenland Road may be difficult for those with learning disabilities (busy, noisy, drug use and drug selling) – no other locations as yet identified
- Greenland Road provides an important heritage site which may mean it cannot be converted to the most effective type of facility
- Greenland Road is central and easy to get to – but don't know what's there? Greenland Road is close to St Pancras meaning that [there will be a lot of facilities concentrated in that area] but large parts of the borough will not have easy access to facilities
- Concern about selling off NHS assets – lack of government funding
- Support building new facilities as long as social housing is built – not private housing – needs further planning consultation – affordable housing for staff
- Redevelopment of the St Pancras site should be consistent and the heritage asset should be considered
- Don't fully understand the hub proposal – needs clarification – what services delivered where – are step down service included – particularly holistic services
- Hubs provide an opportunity to deliver preventative and early intervention – less medical but more accessible – Increased preventative community services while budget cuts reduce council day-care services
- Welcome proposals to develop services around GPs bringing health services closer to communities
- Hubs should be integrated with broader arrangements including council, CCG, local partners and the voluntary sector – otherwise risk that it won't meet respondents' future needs

- While services consolidated across fewer sites is against the principle of care closer to home, bringing a range of services together seems logical (saves time, less stress and more time for patients)
- Concerned that the South Wing has not been included fully in the plan – needs to be addressed – provide new facilities either at St Pancras or the new site
- Concerns about planning for 2025 when building won't start until 2020
- There are issues around the stigma of attending the hubs – obvious that they are [for] mental health patients (not so with community services)
- Change of location from central St Pancras to Highgate will be inconvenient for some patients, carers and staff – longer journey times (but nearer for others) – but good public transport in London makes it easier
- Why has Camden got two locations and Islington only one with limited provision in South Islington?
- Physical health and mental health are closely-related and services should be more joined-up.

## Potential Equality Impacts

The following section sets out the findings in terms of the demographic reach and potential equality impacts from the consultation as outlined below:

- A summary of key themes by protected characteristic group (where differences have been identified)
- A profiling table detailing the mix of respondents to the consultation survey
- The survey findings in relation to the 'Equalities and Impact' questions.

### Summary of Findings by Protected Characteristic

The following summarises the areas that the respondents to the consultation felt should be considered within the proposals in terms of potential equality impacts.

#### Age

- It was felt that children have been excluded from the proposals
- Adolescents were also seen as being excluded in relation to the issues around the transition to adult services
- Elderly people were also seen as being overlooked
- It was felt there was not enough thought about patient transport
- Getting up the hill was asked to be taken into consideration – for wheelchair users or the infirm
- Older people should have an outside area (garden) for peace and quiet / wellbeing
- There are transport difficulties for older people – knowing where services are and how to get to them
- Consider supported housing for older people for earlier hospital discharge
- No consistency of care for young people who see multiple people for treatment.

#### Gender and Gender Reassignment

- Gender equality was seen as important across all services
- Residential facilities should have same sex support for personal help especially for vulnerable people
- It was felt that there are no accessible beds for women in the acute sector
- Need single rooms with en-suite facilities for inpatients
- Same sex wards are important for dignity

#### Ethnicity and Religion

- Ethnic groups were seen as not receiving the support they should due to a lack of knowledge or awareness of services
- It was asked that all services should abide by Employment, Equality, Religion or Belief Regulations
- Language barriers were seen as an issue that need to be addressed
- Proposals and decision-making should have ethical orientation
- New immigrants were seen to be excluded
- It was felt that mainly the BAME community are employed as support workers
- Art, food, religious and cultural beliefs should be taken into account - therapy supporting
- It was asked what specific facilities would be available for BAME

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### Sexual Orientation

- It was felt that services should consider the needs of the gay community.

### Disability including Learning Disabilities

- Ensure transport access for those with mobility issues
- Current buildings for Camden and Islington hubs would not meet accessibility needs for disabled
- Make sure disability support is included in design (e.g. ramps)
- Provide proper support for complex multiple conditions that overlap services
- Need to provide individual care plans for vulnerable people – not generic
- More staff training into specific conditions needed
- It was felt there is not enough thought about patient transport in terms of disability
- Specialist locations for dementia and Alzheimer's disease
- Need to meet the needs of those less able to express themselves
- Getting up the hill – wheelchairs or physical impairment
- Autistic patients need an outside area (garden) for peace and quiet / wellbeing
- Transport difficulty – disabled (including mentally disabled) having to change buses / tube
- Mentally disabled may find a huge building intimidating
- Consider supported housing for earlier hospital discharge
- Poor use of visuals or pictures in the consultation
- Patients who are too depressed or disabled to travel may miss appointments.

### Maternity/Parents

- Need to provide enough beds for adults, adolescents and children
- It was seen that many children are treated out of London away from their families, which is against the vision and ethos of the transformation plan
- Consider support for children and young people of parents with a mental illness
- Getting up the hill – pushchairs
- Family support is important for recovery – ease of access
- What about patients with psychosis and prevalence in community – could be harmful to families

### Deprivation

- Make access equal for both Camden and Islington respondents
- Ensuring that families can afford to stay close to the patient
- Think about poverty and financial issues
- Social inequality needs to be considered
- Community hubs reduce inequality, but it was felt that more than two are needed
- Those living alone are often ignored (social isolation)
- Homeless and unemployed seem to be excluded
- Provide signposted routes and timetables for public transport access
- Don't assume that everybody in supported accommodation is homeless / has addiction issues
- Will transport costs be paid?
- Can a shuttle bus / minibus to the new site be provided?

- Consider building a hostel at St Pancras for homeless people

#### Other

- Some comments that the health inequalities analysis is insufficient
- It was felt by some that maps with postcodes do not equate to an analysis
- Abide by Human Rights Commission
- Make the law easier to understand and strengthen protection
- Patient confidentiality is paramount
- Need more staff to deliver the service
- Think about those that don't cope well with change
- Outreach bases in community centres and other decentralised hubs don't carry mental health stigma and provide broader geographic spread
- Tackling workplace discrimination
- Improve collaboration between services
- Stop austerity and fund a proper service
- Provide support at home
- Many people in the community need support
- Large buildings are scary and confusing
- NHS staff should consult more with patients and carers
- Need to undertake further research / focus groups
- Never see Camden or Islington advertising equality for people with mental illness
- All groups will have difficulty with the consultation / too complex
- Stated that the Trust had a Legal case pending on equality
- Many patients do not have equality characteristics recorded
- Need more mapping of who is not accessing the services. Healthwatch keen to support this
- Need to consider day centre care too
- This should not be at the expense of the Whittington Hospital staff and patients

**Profiling Table**

Profiling Information	Total	Camden	Islington	Both Areas	Not Stated	Other
<u>Age</u>						
16 – 18	9	0	5	4	0	0
19 – 34	38	10	23	4	1	0
35 – 49	72	20	25	18	5	4
50 – 64	63	30	14	17	0	2
65 – 79	31	9	6	15	0	1
80+	6	4	0	1	1	0
Prefer not to say	41	9	3	7	21	1
<u>Gender</u>						
Female (including trans woman)	121	34	43	36	3	5
Male (including trans man)	88	36	29	18	2	3
Non-binary	4	1	0	3	0	0
In another way	7	3	0	3	1	0
Prefer not to say	40	8	4	6	22	0
<u>Gender Reassignment</u>						
In gender given at birth	208	68	65	60	7	8
Different gender to one given at birth	9	3	6	0	0	0
Prefer not to say	43	11	5	6	21	0
<u>Ethnicity</u>						

Profiling Information	Total	Camden	Islington	Both Areas	Not Stated	Other
White: Welsh/English/Scottish/Northern Irish/British	82	36	16	27	1	2
White: Irish	10	6	3	1	0	0
White: Gypsy or Irish Traveller	2	0	1	1	0	0
White: Any other white background	20	6	6	5	1	2
Mixed: White and Black Caribbean	9	2	5	1	0	1
Mixed: White and Black African	2	2	0	0	0	0
Mixed: White and Asian	0	0	0	0	0	0
Mixed: Any other mixed background	6	4	0	1	0	1
Asian/Asian British: Indian	9	1	8	0	0	0
Asian/Asian British: Pakistani	3	0	3	0	0	0
Asian/Asian British: Bangladeshi	16	4	3	9	0	0
Asian/Asian British: Any other Asian background	8	1	5	0	2	0
Black or Black British: Black – Caribbean	7	1	5	0	1	0
Black or Black British: Black – African	33	8	16	8	1	0
Black or Black British: Black - Any other Black background	3	0	1	2	0	0
Other ethnic background – Chinese	1	0	1	0	0	0
Other ethnic background - Any other ethnic group	2	1	0	1	0	0
Prefer not to say	47	10	3	10	22	2
<b>Religion</b>						
No religion	66	25	24	14	1	2

Profiling Information	Total	Camden	Islington	Both Areas	Not Stated	Other
Buddhist	4	0	1	1	1	1
Christian	75	33	23	15	3	1
Hindu	7	2	5	0	0	0
Jewish	6	2	1	2	0	1
Muslim	29	5	11	12	0	1
Sikh	4	0	3	1	0	0
Atheist	8	0	4	4	0	0
Any other religion	6	2	0	2	1	1
Prefer not to say	55	13	4	15	22	1
<u>Sexual Orientation</u>						
Heterosexual	162	56	53	42	5	6
Gay	17	6	7	3	0	1
Lesbian	13	1	10	2	0	0
Bisexual	9	3	3	3	0	0
Prefer not to say	59	16	3	16	23	1
<u>Disability</u>						
Yes	61	24	14	20	1	2
No	147	44	59	34	4	6
Prefer not to say	52	14	3	12	23	0
<b>Base</b>	<b>260</b>	<b>82</b>	<b>76</b>	<b>66</b>	<b>28</b>	<b>8</b>

## Equalities and Impact

The following sets out the findings from the 'Equalities and Impact' section of the consultation survey.

### Q9. To what extent do you agree or disagree that Camden and Islington Clinical Commissioning Groups have identified all the equalities issues and impacts of the proposed changes?

Q9	Camden	Islington	Both	Not stated / Other	Total
Strongly Agree	7%	11%	3%	8%	7%
Agree	24%	42%	26%	19%	29%
Neither agree nor disagree	17%	13%	27%	8%	17%
Disagree	10%	4%	6%	6%	7%
Strongly disagree	6%	1%	5%	3%	4%
Don't know	32%	26%	30%	8%	27%
Prefer not to say	4%	3%	3%	47%	9%

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

The responses to Q9 demonstrate that there are high levels of uncertainty (53% of all responses either didn't know, preferred not to say or couldn't agree/disagree) as to whether the CCGs have identified all the equalities issues and impacts of the proposed changes. Overall, 36% agree that all issues have been identified.

The summary at the start of this section highlights the key themes which have emerged throughout the consultation in regards to potential equalities impacts. The table on the next page outlines the coded themes in relation to Q10, which asks respondents to identify areas for consideration.

**Q10. Please use the box below to state any further equalities impacts that you feel we should be considering and how we can minimise the impacts identified.**

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
None	46	53	30	27	156
Don't know	11	7	10	2	30
Equal treatment for all patients	4	5	2	3	14
Everything has been considered	5	1	2	1	9
Transport access for those with mobility issues	2	0	3	3	8
Make access to hubs equal for both Camden and Islington respondents	1	2	3	1	7
Ethnic groups not receiving the support they should due to lack of knowledge and awareness	2	4	0	0	6
By ensuring that families can afford to stay close to the patient	2	1	2	0	5
Gender equality	1	0	2	1	4
Health inequalities analysis is insufficient	3	1	0	0	4
Maps with postcodes does not equate to an analysis	2	1	1	0	4
Abide by Employment Equality Religion or Belief Regulations, Equality and Human Rights Commission	1	0	1	1	3
Current buildings for Camden and Islington hubs would not meet accessibility needs for disabled	2	0	1	0	3
Consider the needs of the gay community	2	1	0	0	3
Children have been excluded from this plan	1	0	2	0	3
Patient confidentiality is paramount	0	3	0	0	3
Think about poverty and financial issues	2	1	0	0	3
Social inequality needs to be considered	1	2	0	0	3
Don't feel qualified to say	0	0	2	0	2
Elderly people are overlooked	1	0	1	0	2
Make sure disability support is included in design (e.g. Ramps)	0	0	1	1	2
Need more staff to deliver the service	0	1	1	0	2
Provide proper support for complex multiple conditions that overlap services	0	1	1	0	2
Those that don't cope well with change	0	0	2	0	2
Residential facilities should have same sex support for personal help especially for vulnerable people	0	0	1	1	2
Outreach bases in community centres and other decentralised hubs don't carry mental health stigma and provide broader geographic spread	0	1	1	0	2
Community hubs reduce inequality but we need more than 2	0	0	2	0	2
Language barriers need sorting	1	0	1	0	2

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
Need to provide individual care plans for vulnerable people - not generic	2	0	0	0	2
Tackling workplace discrimination	0	0	1	0	1
Make the law easier to understand and strengthen protection	0	0	1	0	1
Improve collaboration between services	1	0	0	0	1
Those living alone are ignored	1	0	0	0	1
By providing enough beds for adults, adolescents and children	0	1	0	0	1
Stop austerity and release the funds to provide a proper service	0	0	0	1	1
Provide support at home	0	1	0	0	1
There are many people in the community with mental health issues who need support	0	0	1	0	1
More staff training into conditions	0	1	0	0	1
Have ethical orientation	0	0	1	0	1
Large buildings are scary and confusing	1	0	0	0	1
NHS staff should consult more with general mental health patient carers	0	0	1	0	1
Need a focus group to investigate this area further	0	1	0	0	1
Never see Camden or Islington advertising equality for people with mental illness	0	0	1	0	1
I think all groups will have issues with the complexity of the consultation	0	0	0	1	1
Children are treated out of London away from their families which is against the vision and ethos of the transformation plan	0	0	1	0	1
Not enough thought about patient transport	1	0	0	0	1
New immigrants seem to be excluded	0	0	1	0	1
Homeless and unemployed seem to be excluded	0	0	1	0	1
Mainly BAME community employed as support workers	0	1	0	0	1
Legal case pending on equality for the Trust	0	0	0	1	1
NO accessible beds for women in entire acute sector	0	0	0	1	1
Provide signposted routes and timetables for public transport access	1	0	0	0	1
Specialist locations for dementia and Alzheimer's disease	0	0	1	0	1
Art, food, religious and cultural belief should be taken into account - therapy supporting	0	0	1	0	1
Many patients do not have equality characteristics recorded	1	0	0	0	1
Need more mapping of who is not accessing the services. Healthwatch keen to support this	0	1	0	0	1

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
Don't assume that everybody in supported accommodation has homeless / alcohol abuse or drug abuse / addict issues	1	0	0	0	1
Need to consider day centre care too	1	0	0	0	1
Consider support for children and young people of parents with a mental illness	0	0	1	0	1
Not meeting the needs of those less able to express themselves	1	0	0	0	1
This should not be not at the expense of the Whittington Hospital staff and patients	0	0	1	0	1
Base	82	76	66	36	260

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

### **Survey Data Feedback**

The following section sets out the analysis of the survey data collated from the Transforming Mental Health Services in Camden and Islington consultation survey.

#### **Cross Tabulation by Postcode**

In total there were 260 responses to the survey. These have been sub-split into areas (Camden = 82 responses, Islington = 76 responses, Both Areas = 66 responses and Not stated / Other = 36 responses). The full responses have been shared with the CCGs, to inform the decision-making process.

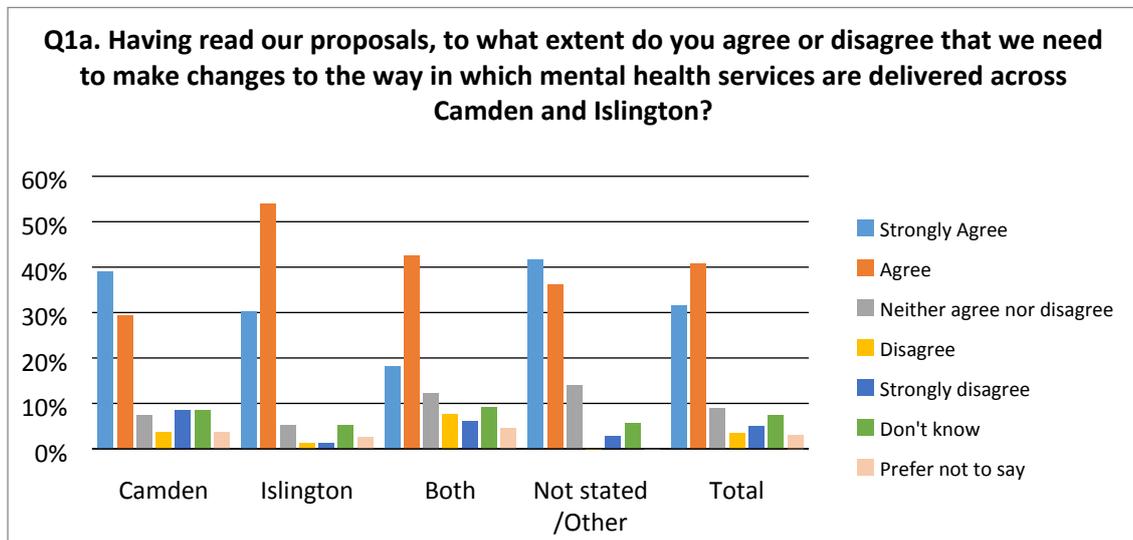
PLEASE NOTE – the areas have been identified by clustering the first half of the postcodes supplied. In some circumstances, the first half of the postcode could either represent Camden or Islington which is why in terms of analysis they have been categorised as being ‘Both Areas’.

Q12 of the survey provided the postcode data and so the summary table of these postcodes is not included within this section of the report.

#### **Frequency of Mention Tables**

It should also be noted that the frequency table of themes demonstrate how often a theme has been mentioned in a response. As a response may have multiple themes, the number of mentions may exceed the number of responses received.

**Q1a. Having read our proposals, to what extent do you agree or disagree that we need to make changes to the way in which mental health services are delivered across Camden and Islington?**



Q1a	Camden	Islington	Both Areas	Not stated /Other	Total
Strongly Agree	39%	30%	18%	42%	32%
Agree	29%	54%	42%	36%	41%
Neither agree nor disagree	7%	5%	12%	14%	9%
Disagree	4%	1%	8%	0%	3%
Strongly disagree	9%	1%	6%	3%	5%
Don't know	9%	5%	9%	6%	7%
Prefer not to say	4%	3%	5%	0%	3%

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

The findings to Q1a demonstrate that there is overall agreement (73%) that changes are needed to the way mental health services are delivered across Camden and Islington.

The table over the page highlights the common themes in terms of the responses given to Q1b, which asks why respondents have either agreed or disagreed with Q1a.

**Q1b. Please explain your reasons for the answer given to Q1a above.**

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
Inpatients and hubs will provide a wider service where services are needed	17	20	13	11	61
Current buildings are old and out-dated	22	8	15	13	58
None	14	15	14	4	47
Agree with your proposal	16	13	10	7	46
A better / more joined up service to comply with H&S Act and be more innovative required	12	16	8	7	43
St Pancras site not fit for purpose	14	0	8	7	29
Will provide upgraded buildings	11	9	3	6	29
Don't know about it	5	6	8	2	21
Needs to be close so that friends and family can visit	2	4	6	3	15
Changes and improvements are important for mental health	5	3	5	2	15
Better (more modern) equipment will be available	5	5	2	2	14
Provide proper early access for those that need it	1	7	6	0	14
Travel issues	5	1	4	3	13
People will need to know where to go for help	2	7	3	0	12
Depends where the new hub is	4	1	1	3	9
Should provide all medical services within walking distance / closer feels safer	1	2	2	3	8
Just improve the service / cut waiting times	3	3	1	1	8
Mental Health treated as lower priority than physical health	4	0	3	0	7
May need more hubs to keep patients local	4	1	0	2	7
Changes and improvements are important for all NHS services	1	5	0	1	7
Better to upgrade / increase staff	1	1	3	2	7
Current buildings costly to maintain	1	2	2	1	6
Needs to be an integrated patient centric service involving voluntary organisations	0	2	3	1	6
Why are you closing St Pancras?	1	1	3	1	6
Proposals are too vague	3	1	1	0	5
Will affect some staff (instability / worry) and service users (stress) more than others	1	0	1	2	4
Need more inpatient beds	0	0	3	1	4
Both Camden and Islington respondents have a facility	0	2	0	2	4
Public do not "see" mental health patients (not a broken leg)	2	0	0	1	3
Should not be dependent upon raising fund from new private housing development	1	0	2	0	3

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
Need better inpatient facilities (no sharing rooms)	1	1	1	0	3
Need an outdoor area for fresh air and exercise	2	1	0	0	3
As long as it doesn't lead to / concerned about full privatisation	0	1	2	0	3
As long as public transport services are not reduced	0	0	1	2	3
Quality of care, communication and clinical support has been poor	1	1	1	0	3
See a lot of mentally disabled people on the street, such as rough sleepers	0	2	0	1	3
Concerned that Camden Inpatients unit won't be near Camden	1	0	2	0	3
People from outside of Camden area would have to travel further	0	1	1	0	2
Don't lose the support and friendly staff at current site	1	1	0	0	2
There are always winners and losers from "change"	0	0	0	2	2
Every time you make changes the service gets worse	2	0	0	0	2
Should not be selling off NHS assets such as Whittington and St Pancras	1	0	1	0	2
Highgate Mental Health Centre has no disabled accessibility especially for wheelchair users	1	0	0	1	2
Whittington Hospital is preferable/ used / than one at St Ann's Tottenham	0	1	1	0	2
Consider the impact on children who have parents with mental health issues	0	1	1	0	2
Current services provide for needs of Islington and Camden especially BAME communities	1	0	1	0	2
Cost may be too much / what are the costs	1	0	1	0	2
Having fewer services available is not positive	1	0	0	1	2
Highgate Mental Health Hospital is amazing / good / Green Areas	1	0	0	1	2
Healthcare more important than buildings	0	2	0	0	2
How does fewer centres provide more choice	1	0	1	0	2
Because people need this kind of treatment	0	0	1	1	2
But there needs to be no loss of inpatient beds	0	0	1	0	1
Any housing development should be social housing (council flats)	0	0	1	0	1
Change is good	0	1	0	0	1
IAPT in Camden and Islington needs to be in different locations as it is now	1	0	0	0	1
Poor public transport access for Highgate Mental Health Centre	0	0	0	1	1

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
NO detailed equality impact assessment has EVER taken this on board.	0	0	0	1	1
I'm for changes, but do not support your changes (for some and against others)	0	0	1	0	1
Have attended different sites for different assessments and crisis	1	0	0	0	1
Personal plea for help from MH services	0	0	1	0	1
Makes me feel listened to as a service user	0	1	0	0	1
COAT building needs upgrading - community services here too	0	0	1	0	1
Inpatient wards at Huntley Centre not fit for purpose	0	0	0	1	1
Stop institutional torture	1	0	0	0	1
People need access to organic (Veganic) fruit.	1	0	0	0	1
Good for continuity of care	0	0	1	0	1
Peckwater Centre is good at present	0	0	1	0	1
Need pleasant and safe surroundings	0	0	1	0	1
Camden Healthwatch said existing inpatients value the "buzzy" site on which inpatients services are currently delivered	0	1	0	0	1
Will be better for public transport access	0	1	0	0	1
Whittington is not easy to get to from South Islington	0	0	1	0	1
Need all inpatient services on one site	1	0	0	0	1
Need more and better Mental Health services in Islington	0	0	1	0	1
DO NOT put mental health provision onto Whit site. That should be for mainstream NHS, staff accommodation and education.	0	0	1	0	1
Patient privacy and confidentiality needs to be respected by NHS	0	0	0	1	1
NHS need to listen to patients	0	0	0	1	1
Whatever we say you will do it anyway	1	0	0	0	1
Why not invite children's services to St Pancras site and keep for mental health	0	0	1	0	1
Whittington site is misleading. It's in the middle of the site and displaces WH's education centre	0	0	0	1	1
You have cut the services at Jules Thorn	0	0	1	0	1
All about cost cutting	0	1	0	0	1
Should be spent on A&E instead	0	1	0	0	1
Help needed for young people with eating disorders or self-harming	0	0	1	0	1
We all care about each other	0	1	0	0	1

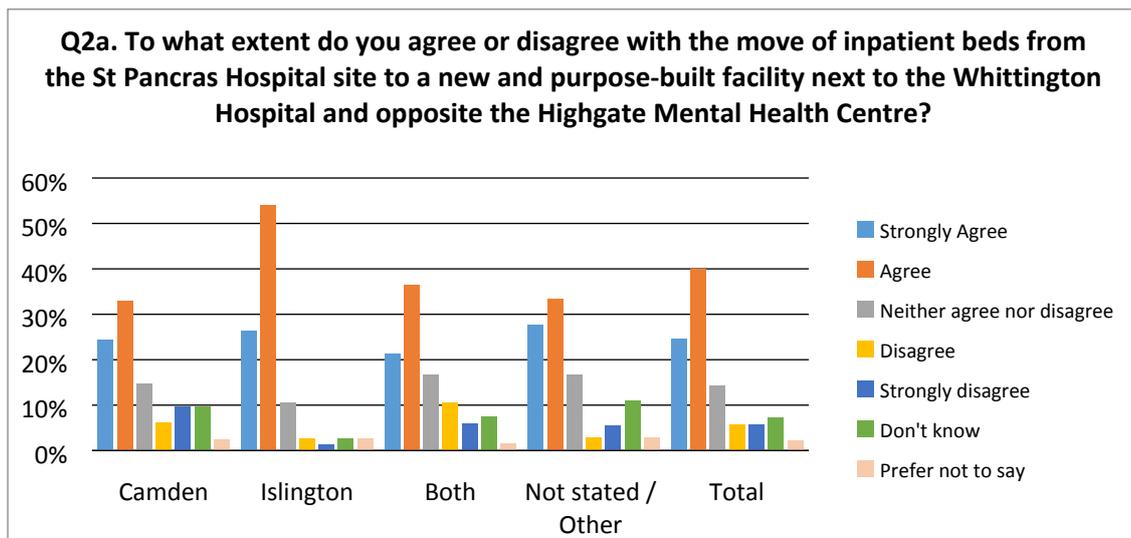
Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
Base	82	76	66	36	260

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

**Q2a. To what extent do you agree or disagree with the move of inpatient beds from the St Pancras Hospital site to a new and purpose-built facility next to the Whittington Hospital and opposite the Highgate Mental Health Centre?**

Q2a	Camden	Islington	Both Areas	Not stated / Other	Total
Strongly Agree	24%	26%	21%	28%	25%
Agree	33%	54%	36%	33%	40%
Neither agree nor disagree	15%	11%	17%	17%	14%
Disagree	6%	3%	11%	3%	6%
Strongly disagree	10%	1%	6%	6%	6%
Don't know	10%	3%	8%	11%	7%
Prefer not to say	2%	3%	2%	3%	2%

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36



The findings to Q2a demonstrate that there is overall agreement (65%) with the move of inpatient beds from the St Pancras Hospital site to a new and purpose-built facility next to the Whittington Hospital and opposite the Highgate Mental Health Centre.

The table on the next page highlights the common themes in terms of the responses given to Q2b, which asks respondents for any further comments or alternative options for the relocation of inpatient beds.

**Q2b. Please add any further comments you have or alternative options we should consider for the relocation of inpatient beds from the St Pancras Hospital Site.**

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
Agree a new facility to replace St Pancras would be good	29	23	24	17	93
None	21	28	21	9	79
Bed numbers - Need to provide additional beds for future need / no loss of beds	4	19	12	6	41
Aim to provide as good or better service after relocation	10	11	5	6	32
New build gives patients more dignity and improves quality of care	4	8	9	3	24
Keep it close to the original St Pancras site / Camden users access	9	1	9	3	22
Why not refurbish existing wards / sites instead	5	5	5	0	15
As long as there are good transport links	5	0	5	5	15
Don't agree with moving it to Whittington / Highgate	7	2	4	2	15
Having all wards in one location next to Whittington makes sense	5	1	3	4	13
As long as people know how to get there	4	0	3	5	12
Whittington is close to Highgate Wards - good for service users and efficiency of staff	7	0	1	3	11
Location should be supported by service users	5	0	4	1	10
Don't know	4	3	2	0	9
Too keen to sell off the land so made the case to do it	2	2	3	0	7
Need to have outdoor space / gardens	6	0	1	0	7
Concern it will deliver a cut in bed numbers and the service	2	3	1	1	7
Concerned about procurement / transition when moving services away from Kings Cross	1	4	1	0	6
What about additional travel costs?	3	0	1	2	6
Design and delivery of new unit should take into account the views of staff	3	0	1	1	5
Should not sell off NHS / public assets	1	2	2	0	5
Need enough staff / Staff training	3	0	1	1	5
Do not have all the beds in one place	1	1	2	0	4
No to privatisation of the service	0	2	2	0	4
Whittington site may be difficult for disabled (wheelchair) users	3	1	0	0	4
Need better equipment	1	3	0	0	4
Current St Pancras site not fit for purpose	3	0	1	0	4
Documents manipulated to make the case for moving	1	0	2	1	4
Better for patient safety	0	2	1	0	3
Need this and additional units	0	3	0	0	3
Design and delivery of new unit should take into account the views of service users	0	0	2	0	2

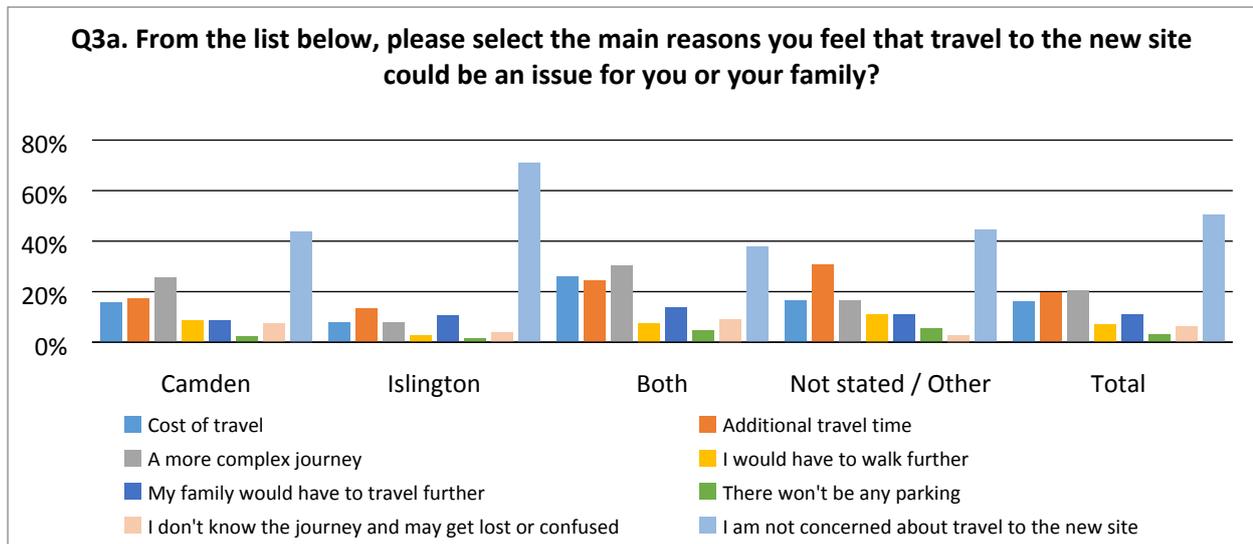
Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
Need same sex wards / different entrances / individual needs	2	0	0	0	2
Better economies of scale to have mental health together	0	0	1	1	2
Build new facility as high as possible with offices on top floors / space for staff & tribunals	0	0	0	2	2
Crisis Homes not mentioned - should be in a non-clinical environment	1	1	0	0	2
Need to include the spiritual needs of patients	1	0	0	0	1
Spent a lot of money on upgrading Ruby ward - the women's PICU which will be wasted	1	0	0	0	1
Healthwatch report biased as people were omitted	1	0	0	0	1
Have you considered moving them to St Ann's hospital in South Tottenham?	0	1	0	0	1
Need to consider the impact on children of people suffering mental illness - early intervention	0	0	1	0	1
Live next to Whittington and don't want large numbers of mentally-ill on my doorstep	0	0	1	0	1
People with mental health issues should not be placed together as they will make each other worse	0	1	0	0	1
Consider putting on staff / patient transport	0	0	0	1	1
Why not demolish and rebuild on the former Waterlow unit site?	0	0	0	1	1
Plans for the new build will need to be scrutinised before a decision can be made	1	0	0	0	1
Concern about road traffic and parking issues	0	0	1	0	1
NHS needs to improve as a whole	0	1	0	0	1
Need more therapeutic services for service users	0	0	0	1	1
Stop sell-off of Moorfields	0	0	1	0	1
Time and money wasting	1	0	0	0	1
Staff should provide building workshops for re-skilling	0	1	0	0	1
Base	82	76	66	36	260

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

**Q3a. From the list below, please select the main reasons you feel that travel to the new site could be an issue for you or your family?**

Q3a	Camden	Islington	Both Areas	Not stated / Other	Total
Cost of travel	16%	8%	26%	17%	16%
Additional travel time	17%	13%	24%	31%	20%
A more complex journey	26%	8%	30%	17%	20%
I would have to walk further	9%	3%	8%	11%	7%
My family would have to travel further	9%	11%	14%	11%	11%
There won't be any parking	2%	1%	5%	6%	3%
I don't know the journey and may get lost or confused	7%	4%	9%	3%	6%
I am not concerned about travel to the new site	44%	71%	38%	44%	50%

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36



The findings to Q3a demonstrate that 50% of respondents are not concerned about travel. Those that are, were most concerned about additional travel time, more complex journeys and the cost of travel. Note that respondents could choose more than one option.

The table on the next page highlights the common themes in terms of the responses given to Q3b, which asks respondents for any further comments in relation to travel issues.

**Q3b. Please use this box to explain the travel issues in more detail.**

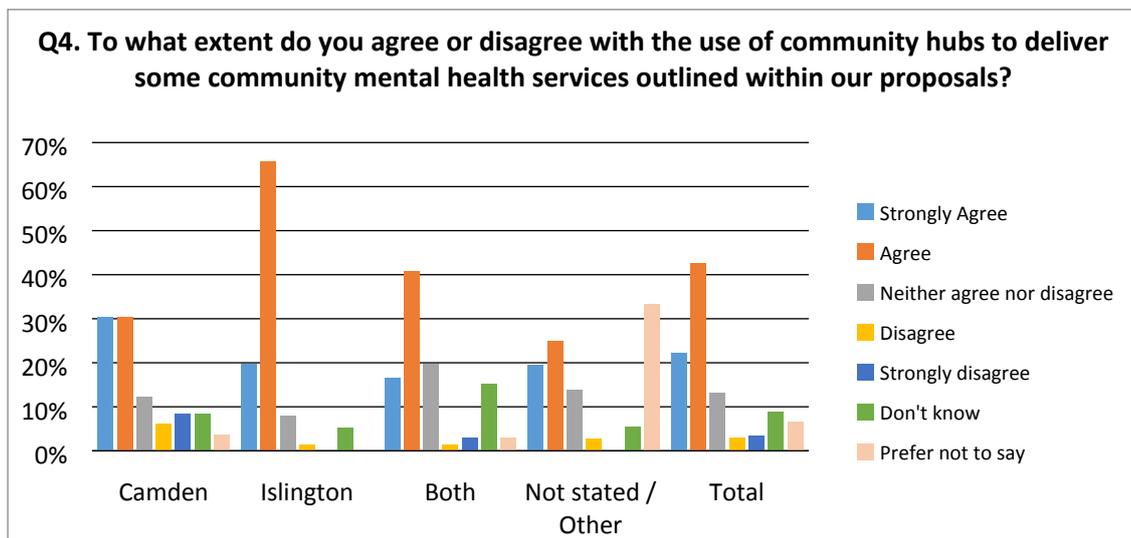
Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
None	25	40	24	19	108
Need more time to travel / far away	22	9	18	10	59
Not a serious concern	15	22	11	4	52
Patients having to find a new site / anxious / confused	7	3	5	3	18
Live close to Whittington Hospital [So no issue with travel]	1	8	7	1	17
No direct bus service available	6	3	6	2	17
Cost of travel could be an issue for some / me	7	2	4	3	16
Difficulty walking or getting a wheelchair up the hill	6	1	7	1	15
Difficult for disabled and elderly patients	6	0	7	2	15
Good bus / tube service	4	7	2	0	13
Will make it harder for friends and family to support the patient	6	0	5	2	13
I have no current need for this service	4	2	3	0	9
Insufficient parking	2	2	3	1	8
Buses / Tube are overcrowded / difficult	3	1	2	2	8
Sites are accessible	3	1	0	0	4
St Pancras heritage site / easier to get to	1	0	1	1	3
Publish bus / tube timetables / signposting	0	0	2	1	3
Difficulties would put staff off working at Whittington	1	0	1	1	3
Don't know	2	0	0	0	2
Whittington is not nice	1	0	1	0	2
Childcare / work constraint makes additional travel time difficult	0	0	1	1	2
People stop using the service as it's too far to travel	2	0	0	0	2
Operate a minibus shuttle between the sites for patients and staff	1	1	0	0	2
All of the reasons stated	0	1	0	0	1
IAPT sites not being spread across the boroughs	1	0	0	0	1
Family don't live local anyway	1	0	0	0	1
Stop kidnapping people for money	1	0	0	0	1
Would call the ambulance	0	1	0	0	1
A relative / friend would take me	0	1	0	0	1
Difficult if people don't have transport	1	0	0	0	1
Patient can move there permanently	0	0	0	1	1
May be difficult for those with further to travel	0	0	1	0	1
English is not my family's first language	1	0	0	0	1
Base	82	76	66	36	260

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

**Q4. To what extent do you agree or disagree with the use of community hubs to deliver some community mental health services outlined within our proposals?**

Q4	Camden	Islington	Both Areas	Not stated / Other	Total
Strongly Agree	30%	20%	17%	19%	22%
Agree	30%	66%	41%	25%	43%
Neither agree nor disagree	12%	8%	20%	14%	13%
Disagree	6%	1%	2%	3%	3%
Strongly disagree	9%	0%	3%	0%	3%
Don't know	9%	5%	15%	6%	9%
Prefer not to say	4%	0%	3%	33%	7%

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36



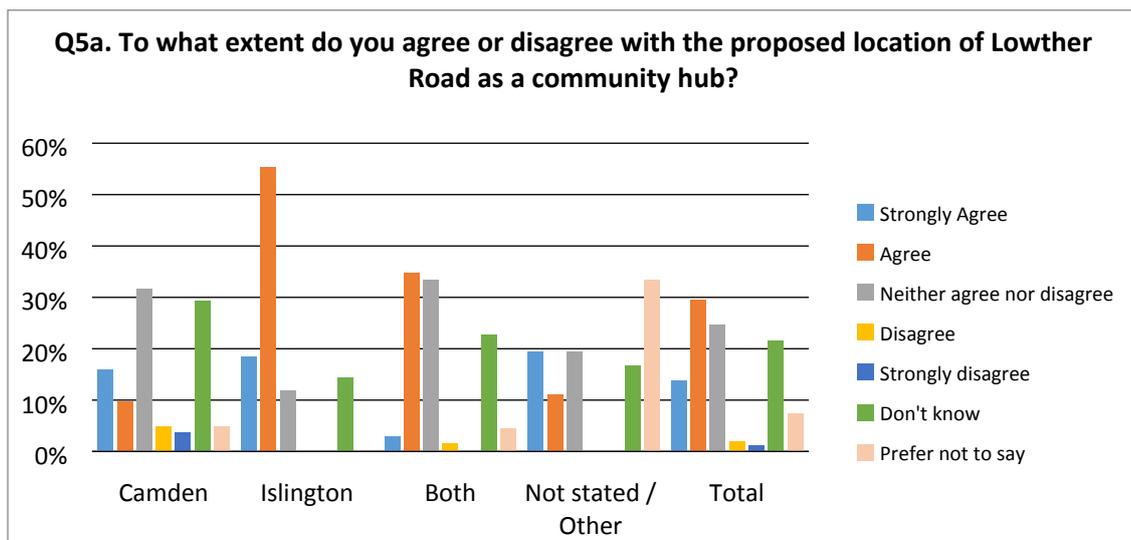
The findings to Q4 demonstrate that there is overall agreement (65%) with the use of community hubs to deliver some community mental health services outlined within the proposals. There is a higher level of agreement in the Islington area at 86% of all Islington responses.

**Q5a. LOWTHER ROAD**

**To what extent do you agree or disagree with the proposed location of Lowther Road as a community hub?**

Q5	Camden	Islington	Both Areas	Not stated / Other	Total
Strongly Agree	16%	18%	3%	19%	14%
Agree	10%	55%	35%	11%	30%
Neither agree nor disagree	32%	12%	33%	19%	25%
Disagree	5%	0%	2%	0%	2%
Strongly disagree	4%	0%	0%	0%	1%
Don't know	29%	14%	23%	17%	22%
Prefer not to say	5%	0%	5%	33%	7%

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

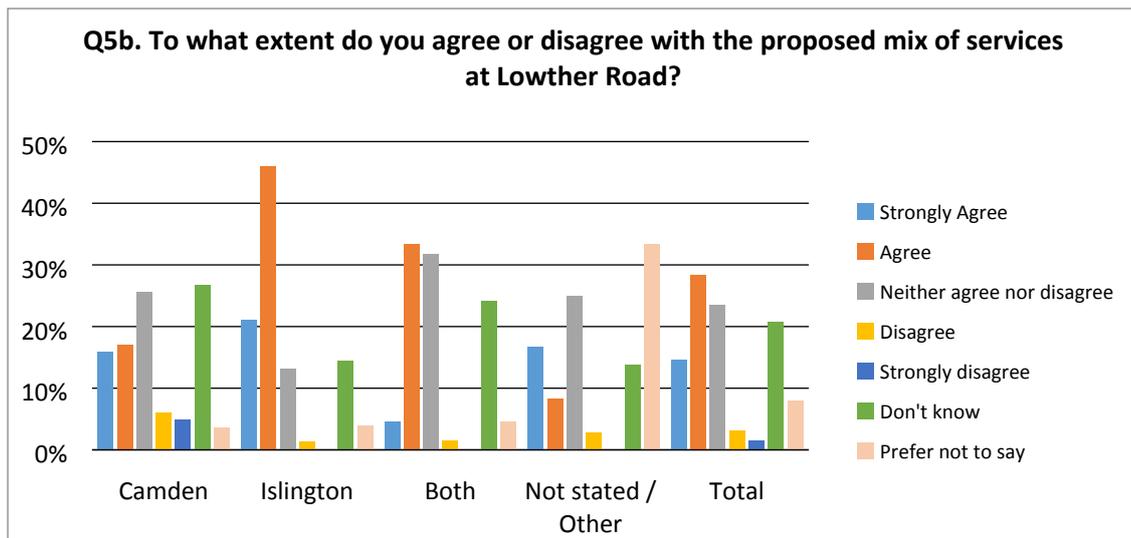


The findings to Q5a demonstrate that there is mixed opinion and uncertainty with the proposed location of Lowther Road as a community hub, with 44% overall in agreement but 54% either feeling they don't know, prefer not to say or cannot agree/disagree. It should be noted that there are higher levels of agreement in the Islington area only, with 73% of Islington respondents in agreement.

**Q5b. To what extent do you agree or disagree with the proposed mix of services at Lowther Road?**

Q5b	Camden	Islington	Both Areas	Not stated / Other	Total
Strongly Agree	16%	21%	5%	17%	15%
Agree	17%	46%	33%	8%	28%
Neither agree nor disagree	26%	13%	32%	25%	23%
Disagree	6%	1%	2%	3%	3%
Strongly disagree	5%	0%	0%	0%	2%
Don't know	27%	14%	24%	14%	21%
Prefer not to say	4%	4%	5%	33%	8%

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36



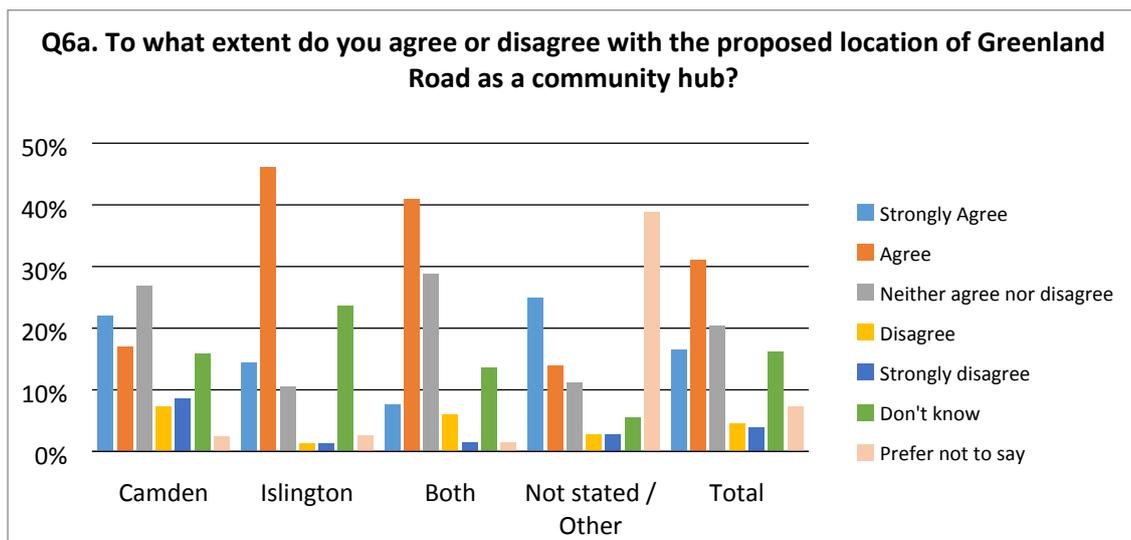
The findings to Q5b demonstrate that there is mixed opinion and uncertainty with the proposed mix of services at Lowther Road, with 43% in agreement but 52% either feeling they don't know, prefer not to say or cannot agree/disagree.

**Q6a. GREENLAND ROAD**

**To what extent do you agree or disagree with the proposed location of Greenland Road as a community hub?**

Q6a	Camden	Islington	Both Areas	Not stated / Other	Total
Strongly Agree	22%	14%	8%	25%	17%
Agree	17%	46%	41%	14%	31%
Neither agree nor disagree	27%	11%	29%	11%	20%
Disagree	7%	1%	6%	3%	5%
Strongly disagree	9%	1%	2%	3%	4%
Don't know	16%	24%	14%	6%	16%
Prefer not to say	2%	3%	2%	39%	7%

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

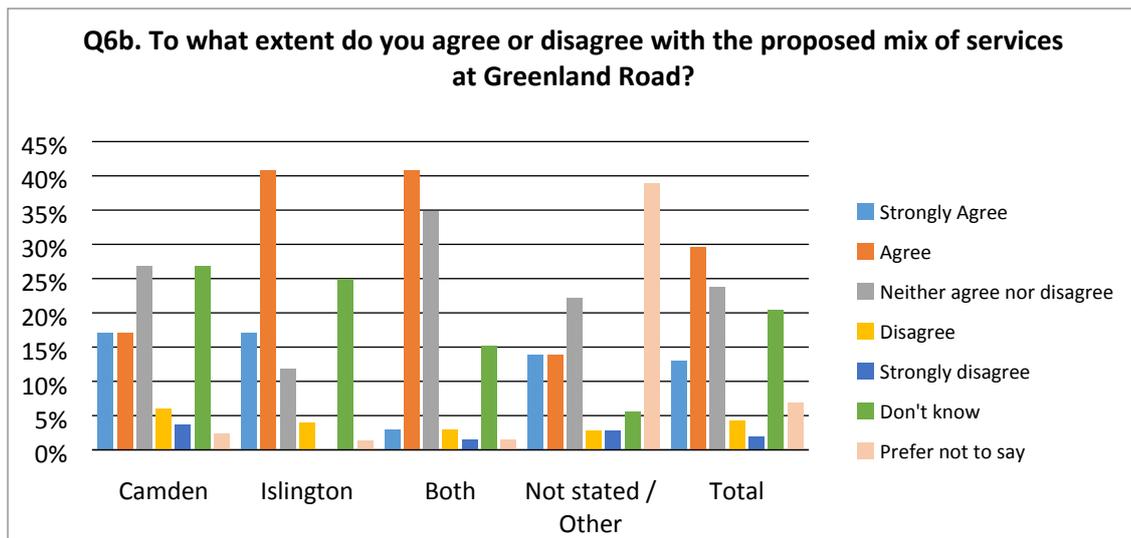


The findings to Q6a demonstrate that there is mixed opinion and uncertainty with the proposed location of Greenland Road as a community hub, with 48% in agreement but 43% either feeling they don't know, prefer not to say or cannot agree/disagree. It should be noted that there are higher levels of agreement from Islington respondents, with 60% of these in agreement.

**Q6b. To what extent do you agree or disagree with the proposed mix of services at Greenland Road?**

Q6b	Camden	Islington	Both Areas	Not stated / Other	Total
Strongly Agree	17%	17%	3%	14%	13%
Agree	17%	41%	41%	14%	30%
Neither agree nor disagree	27%	12%	35%	22%	24%
Disagree	6%	4%	3%	3%	4%
Strongly disagree	4%	0%	2%	3%	2%
Don't know	27%	25%	15%	6%	20%
Prefer not to say	2%	1%	2%	39%	7%

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

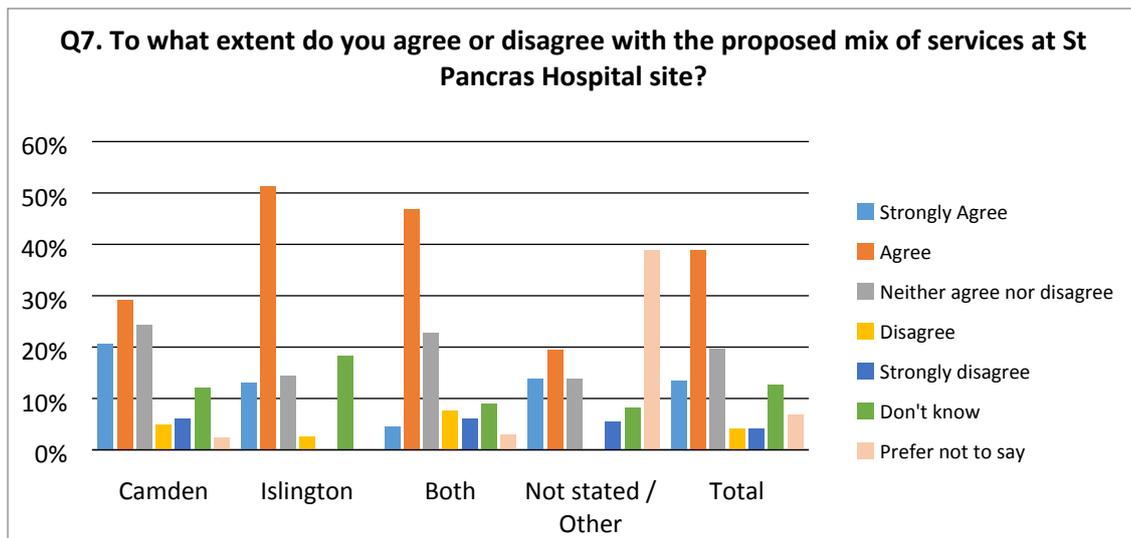


The findings to Q6b demonstrate that there is mixed opinion and uncertainty with the proposed mix of services at Greenland Road, with 43% in agreement but 51% either feeling they don't know, prefer not to say or cannot agree/disagree. It should be noted that there are higher levels of agreement among Islington respondents, with 58% of these in agreement.

**Q7. To what extent do you agree or disagree with the proposed mix of services at St Pancras Hospital site?**

Q7	Camden	Islington	Both Areas	Not stated / Other	Total
Strongly Agree	21%	13%	5%	14%	13%
Agree	29%	51%	47%	19%	39%
Neither agree nor disagree	24%	14%	23%	14%	20%
Disagree	5%	3%	8%	0%	4%
Strongly disagree	6%	0%	6%	6%	4%
Don't know	12%	18%	9%	8%	13%
Prefer not to say	2%	0%	3%	39%	7%

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36



The findings to Q7 demonstrate that there is mixed opinion and uncertainty with the proposed mix of services at St Pancras Hospital, with 52% in agreement but 40% either feeling they don't know, prefer not to say or cannot agree/disagree.

**Q8. Please use the box below to give any other suggestions for additional locations for the community hubs or any other comments that you feel we should take into account in relation to our proposals on community services.**

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
None	32	39	24	23	118
I don't think there are any issues / happy with suggestions	7	5	5	3	20
Need to know what is proposed for each site before we can say its suitable	6	6	3	1	16
More smaller hubs so that everyone who needs it can get support	2	2	6	2	12
Don't know	4	3	4	0	11
I don't know where these locations are	2	7	2	0	11
Hubs should be person centred	6	3	1	1	11
Comprehensive service required covering a mix of needs	4	4	0	2	10
Staff are key to delivery especially for crisis care	2	0	5	1	8
Greenland Road not suitable for vulnerable people – presence of drug dealers etc.	5	0	1	1	7
Staff must be considered and be able to move around the sites to deliver services	2	0	4	1	7
Open up the hubs for other organisations to deliver services	2	2	1	0	5
A further community hub on the Camden North or North Western boundary	1	1	2	0	4
Both St Pancras and Greenland Road are in South Camden / close together	1	1	2	0	4
Supporting service users to find the new location	2	1	1	0	4
Needs to be welcoming and make them feel safe	1	1	2	0	4
St Pancreas site should only be for mental health	2	0	2	0	4
Keep beds as they are at St Pancras	1	1	2	0	4
Service users don't like being singled out attending clinical services	1	2	0	1	4
A mix up and confusing	1	1	1	0	3
Greenland Road site is excellent	2	0	1	0	3
Hubs should be based near deprived communities	3	0	0	0	3
Need to see the financial breakdown	2	1	0	0	3
Hubs need to be cost effective and accessible	1	0	1	1	3
Hubs need to be accessible by public transport	1	1	1	0	3
Need somewhere south of Euston / Pentonville Road / Pentonville Prison site	1	0	1	0	2
On the site of Holloway Prison. Being developed. Good transport access	2	0	0	0	2
Greenland Road is difficult to find / don't know it	1	0	1	0	2
Space at Euston Road	0	0	1	1	2

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
Build a new facility at St Pancras	0	0	2	0	2
Change is good	2	0	0	0	2
Greater ability to self -refer for early intervention	0	1	1	0	2
Lowther Road is not a welcoming location	1	1	0	0	2
Greenland Road is accessible by tube / buses	1	0	1	0	2
Greenland Road has transport issues (red route / poor parking) / disabled access	0	0	2	0	2
Hubs should be purpose built	2	0	0	0	2
Need to let people know where they go for services once changes have been made	1	0	0	1	2
Why move iCope to Lowther Road - less accessible no tube	0	2	0	0	2
Would like to retain the service in Camden	1	0	1	0	2
Hubs should not take away facilities for community services	0	1	0	1	2
Concerned about the Naylor Report and building of houses, private listed	1	0	0	1	2
Modern equipment and facilities is good	0	2	0	0	2
Compassionate and caring staff	1	0	1	0	2
Proposed mix of services not as good as a separate mental health service	0	1	0	1	2
Where will North Camden Recovery Team be based?	0	1	0	0	1
There should be some service provision in or near Fitzrovia	0	0	1	0	1
Peckwater is a good site for some mental health services and facilitates	0	0	0	1	1
Only know about Camden	0	0	1	0	1
Should have a hub somewhere near the Tavi	0	0	1	0	1
An additional location with easy access	0	1	0	0	1
Space at Welcome	0	0	0	1	1
What about the universities	0	0	0	1	1
What about libraries	1	0	0	0	1
Space at Euston One Stop on Hampstead Road	0	0	0	1	1
Not for physical health or employment support - stick to mental health	0	0	0	1	1
In shopping malls	0	1	0	0	1
In Town Centres	0	1	0	0	1
In local neighbourhoods	0	1	0	0	1
Hubs should offer a setting for young people that is not clinical	1	0	0	0	1
Day Centres are important and colleges are not a suitable substitute	0	0	1	0	1
Find a location in the Camden area	0	1	0	0	1
Lowther Road more accessible to Islington respondents	0	0	1	0	1

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
There was no reference to "Minding the Gap" transition for 18 - 25 year olds.	0	0	1	0	1
Greenland road interior is poor	1	0	0	0	1
Hubs should be open more hours	0	1	0	0	1
BAME organisations should be involved to help their communities	1	0	0	0	1
As long as service is maintained / improved and no cuts	0	0	1	0	1
City Road Building is better than Moorfields	1	0	0	0	1
Don't know the evidence for hubs or support from users and staff	1	0	0	0	1
Do not cut the service in future	0	0	1	0	1
Why move the general assessment team to the Camden Hub, what about Islington respondents that need to access that team?	0	1	0	0	1
Need to protect patient privacy	0	1	0	0	1
Won't be able to access services at my GP because that is outside Camden and Islington	0	0	1	0	1
Need to know how it integrates with clinical services	1	0	0	0	1
Hubs need car parking for disabled access	0	1	0	0	1
Need enough trained staff to cope with volume transferred from St Pancras	0	0	1	0	1
Nice to have parks and open spaces	0	0	1	0	1
Suggest having dedicated space in each community hub for the facilitation of both AHM and FTT reviews.	0	0	0	1	1
Patients may require financial assistance for costs	0	0	1	0	1
Patients may require family support	0	0	1	0	1
Hubs should be welcoming	0	0	1	0	1
You wanted to move the Rivers crisis house from St Pancras - not mentioned in this consultation so the CONSULTATION IS NOT FIT FOR PURPOSE	1	0	0	0	1
Hubs should complement existing services not replace them	1	0	0	0	1
The hospital I used is now closed	1	0	0	0	1
Issue is the lack of overall resources for mental health. Good if this increases resource	1	0	0	0	1
The site redevelopment is an opportunity to provide the Recovery College with proper premises	0	0	1	0	1
We would like to work together with local commissioners to develop and commission a KidsTime workshop in each hub	0	0	1	0	1
We have not seen anything about it in the media	0	1	0	0	1
Separating personality disorders and mental illness may help	0	0	1	0	1
What about services for dementia and Alzheimer's disease	0	0	1	0	1

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
Camden MIND are based near Greenland Road, will their services be integrated?	0	1	0	0	1
You will be on trial at the Hague for crimes against humanity	1	0	0	0	1
Base	82	76	66	36	260

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

**Q11. Please use the box below to state any other comments or concerns you would like us to consider as part of the proposals.**

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
None	48	63	35	26	172
Support plans / think it will work	4	2	5	4	15
Do whatever it takes to support people with mental health issues	2	2	4	2	10
Not convinced changes will work / don't change things	3	1	4	0	8
A lot of upheaval	2	1	3	0	6
Community hubs good for early intervention and better outcomes	2	0	2	1	5
Reduce the impact on service users where possible	2	0	2	0	4
Please provide more details about capacity which will be provided including staffing and where iCope will be based	4	0	0	0	4
Need more information about the facilities in the hubs	3	0	1	0	4
Consultation is flawed / unfair	2	0	1	1	4
Better information and sign posting about the proposals	2	2	0	0	4
Concerned that there won't be enough patient beds	0	1	3	0	4
Waiting lists for mental health are still too long	2	2	0	0	4
Modern sophisticated buildings don't make as much difference as is assumed	1	0	2	0	3
Need additional beds for people living on the street / arrested / emergency care / displaced due to renovation	1	1	1	0	3
Need to retain public assets and land - not housing	2	0	1	0	3
Don't know	2	0	0	0	2
If Moorfields come to St Pancras you have more money –how will it be spent?	0	0	2	0	2
The consultation document is long and repetitive with PR spin	0	0	2	0	2
Build the new facility before you take away the old one	1	0	1	0	2
Consider upgrading current facilities instead	1	0	1	0	2
Need more facilities for young people	0	0	2	0	2
Provide detailed financial breakdown	2	0	0	0	2
Need a drop in system for counselling and GP referrals	2	0	0	0	2
Make Recovery College great again! / more space / rooms	0	0	1	1	2
Concerned about travel cost and time to Whittington Hospital	0	0	2	0	2
Assume no community services will be removed including crisis homes	0	0	1	1	2
Physical and mental health are interlinked –treat both	0	1	0	1	2
Hubs / day centres should provide personalised mental health services	1	0	0	1	2

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
We'll need information in easy read	1	1	0	0	2
This move is part of a series of additional moves. The public should be given the full picture involving the Whittington sites and Moorfields as well as your own	1	1	0	0	2
Crisis centre is essential to be retained for early intervention	1	0	1	0	2
There are facilities for both Camden and Islington respondents	0	0	0	1	1
Do it as soon as possible	1	0	0	0	1
May be difficult to find alternative sites for hubs	0	0	1	0	1
There isn't much support for older people / discharged for being too old	0	0	1	0	1
Acute wards should have outdoor access for fresh air / smoking	1	0	0	0	1
Acute wards should have exercise / gym room	1	0	0	0	1
More day centres	0	0	1	0	1
More facilities in south of borough	0	0	1	0	1
Say more hubs are planned - for what?	0	0	1	0	1
Find large building difficult to use	0	0	1	0	1
The meetings are being mistaken for the consultation by many service users	0	0	1	0	1
What service user involvement was there in designing this consultation	0	0	1	0	1
Bookable space should be available to voluntary organisation dropping in to work with patients around welfare issues	1	0	0	0	1
Don't merge services that are already busy and complex	1	0	0	0	1
Build offices not houses	0	0	1	0	1
Additional housing will put more pressure on services	0	0	1	0	1
Look at all options and make sure no-one misses out	0	0	1	0	1
Ensure mental health services available and accessible	1	0	0	0	1
Greenland Road will not work well for people with learning difficulties	1	0	0	0	1
Has Rethink (statutory advocacy) been consulted about the changes?	0	0	0	1	1
Current advocacy service is poor	0	0	0	1	1
Where will advocacy be based in future	0	0	0	1	1
Will the telephone numbers for the advocacy service stay the same	0	0	0	1	1
Need more women's centres and groups to support human contact for suicide prevention	0	0	1	0	1
This proposal removes the possibility of additional beds on the same site	0	1	0	0	1

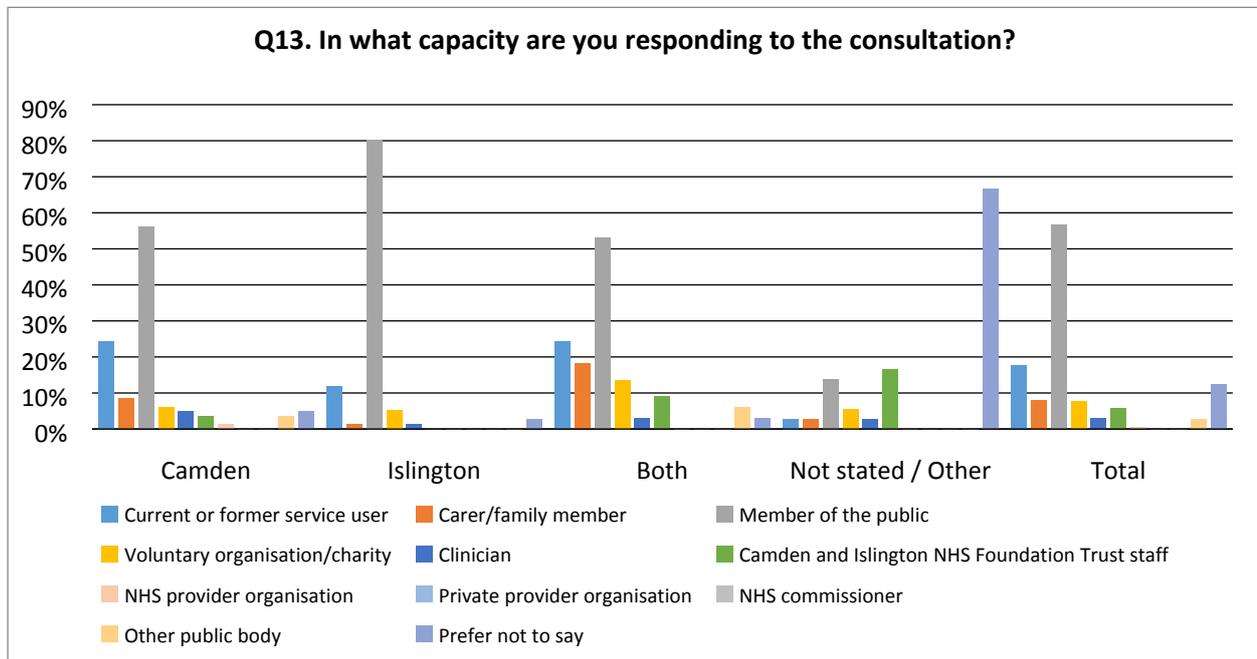
Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
Insufficient money and support for social and health workers	1	0	0	0	1
Difficult to adjust to something new	1	0	0	0	1
I do not want more mental health services in Archway	0	0	1	0	1
Need more facilities in Camden	0	0	1	0	1
Need a hub nearer where I live	0	1	0	0	1
Not seen any advertising or communication about the consultation	0	1	0	0	1
Should keep attractive old buildings	0	0	1	0	1
Housing should be for staff / sheltered housing - not for private sale	1	0	0	0	1
Where is the "temporary decant facility" going to be at St Pancras?	1	0	0	0	1
Consider BAME needs as they are over represented in the patient group	0	1	0	0	1
Provide the best not the cheapest option	0	0	1	0	1
Confusing for people with learning disabilities	1	0	0	0	1
Mental health more fragile than physical health and needs more care	1	0	0	0	1
Mental health services needs organising and streamlined, separating MI and PD and offering the services required for each group could be a way	0	0	1	0	1
Need more translators	1	0	0	0	1
Do not move to Whittington Hospital site	0	0	1	0	1
New fit for purpose buildings will be better	0	1	0	0	1
Placebo medicine works even when people know they are placebos	0	0	0	1	1
Patients will improve faster with easy access to family / friends and in a familiar area	0	0	0	1	1
Continuity of care with people you know and understand your issues are better than a target number of consultations	1	0	0	0	1
Don't stigmatise everyone as having the same issues - especially drug and alcohol abuse - as it cause discrimination for people trying to recover and get back into the community	1	0	0	0	1
Privacy of patients is important for self-belief	0	1	0	0	1
I have always thought that the psychiatrists got it wrong!	0	1	0	0	1
Improve services for disabled people	0	1	0	0	1
Need to have consistent monitoring of the efficacy and outcomes to patients improvement/worsening to see that the changes are working	1	0	0	0	1
These services was not available in my previous area/address	1	0	0	0	1

Coded Response	Camden	Islington	Both Areas	Not Stated / Other	Total
If you are looking for sites for outreach work, e.g. a weekly session in a community centre. See <a href="http://www.sPCA.org.uk">www.sPCA.org.uk</a>	1	0	0	0	1
Has the broad cultural identity of these areas or government cuts prompted these changes?	0	0	1	0	1
Would like to work with local health commissioners to develop and commission suitable early support and intervention for children and young people of parents with a mental illness	0	0	1	0	1
Believe the proposal involves staff in trying to make the best of a bad funding situation, but in doing so they are making irrevocable decisions which it will be too expensive to overturn in the future	0	1	0	0	1
Recommend consulting with the wider community to assess their needs from both from hubs and the services within the hospital	0	1	0	0	1
Support further engagement with community partners and voluntary sector and are motivated to consider the required transformation to respond to identified need in the Borough and provide an excellent integrated service offer to all	0	1	0	0	1
What happens if they change the place and don't tell you?	1	0	0	0	1
Why is the South Wing out of scope?	1	0	0	0	1
Base	82	76	66	36	260

Base – Total = 260, Camden = 82, Islington = 76, Both = 66, Not stated / Other = 36

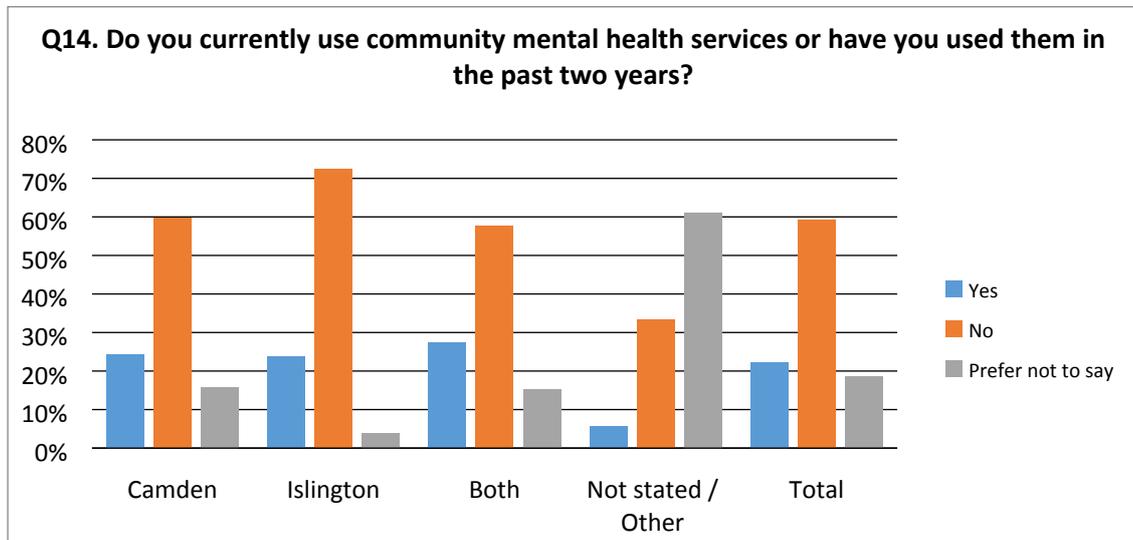
**Q13. In what capacity are you responding to the consultation?**

Q13	Camden	Islington	Both	Not stated/Other	Total
Current or former service user	20	9	16	1	46
Carer/family member	7	1	12	1	21
Member of the public	46	61	35	5	147
Voluntary organisation/charity	5	4	9	2	20
Clinician	4	1	2	1	8
Camden and Islington NHS Foundation Trust staff	3	0	6	6	15
NHS provider organisation	1	0	0	0	1
Private provider organisation	0	0	0	0	0
NHS commissioner	0	0	0	0	0
Other public body	3	0	4	0	7
Prefer not to say	4	2	2	24	32
Base	82	76	66	36	260



**Q14. Do you currently use community mental health services or have you used them in the past two years?**

Q14	Camden	Islington	Both	Not stated/Other	Total
Yes	20	18	18	2	58
No	49	55	38	12	154
Prefer not to say	13	3	10	22	48
Base	82	76	66	36	260



### Meeting Notes Data

The following sets out the list of meeting notes supplied for analysis.

Meeting	Date	Doc Title	Group
1	07/07/2018	St Pancras Community Association Fair	Public
2	18/07/2018	Islington GP Forum feedback	Staff
3	24/07/2018	iBug meeting feedback	Service Users
4	11/07/2018	CCG 1st Public Event	Public & service users
5	25/07/2018	Drop in session	Services users
6	20/07/2018	Camden Carers public consultation event - Peckwater Centre	Service users
7	03/09/2018	St Pancras Association AGM	Public
8	19/07/2018	Public Meeting	Service users
9	30/07/2018	Women's Strategy Group	Service users
10	27/07/2018	Age UK Islington, BAME Carers Support Group - public consultation meeting	Service users
11	02/08/2018	Frontline feedback from meeting	Staff
12	07/08/2018	Age UK Meeting - 9 Manor Gardens	Service users
13	07/08/2018	Camden Patient and Public Engagement Group	Public
14	14/08/2018	Ruby Ward Community Meeting	Service users
15	15/08/2018	180815 Positive Connections Self Support Group meeting	Service Users
16	21/08/2018	CBug meeting	Service Users
17	23/08/2018	Highgate Mental Health Centre staff	Staff
18	21/08/2018	Staff event at St Pancras Hospital	Staff
19	19/07/2018	CCG 2nd Public Event	Public & service users
20	21/08/2018	Rosewood Ward Community Meeting - St Pancras Hospital	Staff & service users
21	04/09/2018	Extraordinary Service User Alliance Meeting	Service users
22	05/09/2018	Labour Party Cantelowes Branch meeting	Public
23	05/09/2018	Nubian Service User Forum	Service users
24	07/09/2018	Jade Ward Community Meeting - Highgate	Service users
24	07/09/2018	Jade Ward Community Meeting - Highgate	Staff
25	21/08/2018	August open CBUG minutes	Service users
26	12/09/2018	Somers Town Neighbourhood Forum	Public
27	13/09/2018	Amphill Practice Patient and Public Engagement Group	Public
28	31/08/2018	Notes from Keep our NHS Public meeting on 31 August 2018	Public
29	28/08/2018	MH Service User & Carer Group	Service users
30	25/09/2018	Amber Ward Community Meeting	Service users
31	25/09/2018	Emerald Ward Community Meeting	Service users
32	25/09/2018	Malachite Ward Community Meeting	Service users
33	25/09/2018	Opel Ward Community Meeting	Service users
34	25/09/2018	Sapphire Ward Community Meeting	Service users
35	26/09/2018	CCG 3rd Public Event	Public & service users

Meeting	Date	Doc Title	Group
36	20/09/2018	Site consultation meeting on Laffan Ward at St Pancras Hospital	Staff and service users
37	20/09/2018	Sutherland Ward at St Pancras Hospital	Staff and service users
38	08/10/2018	Dunkley Ward Community Meeting - St Pancras Hospital	Staff and services users
39	09/10/2018	Montagu Ward Community Meeting - St Pancras Hospital	Staff and service users
40	11/10/2018	St Pancras Site Redevelopment consultation meeting notes - Topaz Ward	Staff and service users
41	19/09/2018	St Pancras Users Group	Service users
42	26/09/2018	Drop-in session 2 with Vincent Kirchner	Service users

The following tables set out the themes to have emerged from the meetings/groups held. These have been coded for overall categories as per the table below followed by tables containing the detail of mention for each theme under that category.

Category	Staff	Service users	Both	Public	Public & service users	Total
Related to Hubs	17	48	12	23	92	192
Consultation process and details	11	68	7	32	69	187
Related to Inpatient Services	2	36	13	12	63	126
Financial considerations and funding	0	18	7	30	60	115
About the buildings	4	32	16	7	35	94
Transport related comments	2	11	1	15	37	66
Bed Availability	5	27	2	8	17	59
Support the plans	3	20	4	12	19	58
Transition to the new service	5	28	6	5	12	56
Equalities and impact issues	0	25	1	16	14	56
Staffing needs	2	18	6	9	13	48
Overall capacity issues	0	17	1	11	13	42
About community services	3	14	1	5	16	39
Housing related	3	8	1	14	12	38
Relating to site closures	2	13	1	1	7	24
Referrals into the new service	1	7	2	0	10	20
Other	1	4	0	2	6	13
<b>Total</b>	<b>61</b>	<b>394</b>	<b>81</b>	<b>202</b>	<b>495</b>	<b>1233</b>

### **Overview of key common themes from meetings**

The most popular themes from all of the meetings undertaken, in order of frequency, are:

- Will there be a garden / outside areas / quiet for elderly and autistic
- Share design details for community hubs /service user input
- Will there be sufficient capacity to cope with increased demand
- Plans are very positive / good
- What's the cost / how will it be funded
- Will the hubs be appropriate / how to access
- More clarity around which services are staying at St Pancras and which are moving
- What provision will there be for growth in population and MH services
- Needs to be appropriately staffed
- Need more information about what is included in the Community Model
- Transport more difficult - further away
- Need to ensure capacity to cope with increased and unpredictable bed demand
- Will all community services move to community hubs?
- How long will it take to complete

**Related to Hubs**

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Will the hubs be appropriate / how to access	3	9	2	2	19	35
Will all community services move to community hubs?	3	6	1	5	6	21
Need more than 2 hubs / more in each location	0	6	1	2	10	19
what community wellbeing services will be included?	1	4	3	2	6	16
Hubs can be easy access for early intervention	0	2	1	2	8	13
Will there be other facilities (cafes and shops) at the hubs	2	1	0	2	8	13
Crisis team not located in the right place	1	3	1	3	1	9
Community model - Single entrance so people can't tell which patients are drug or mental health related	0	1	0	0	6	7
What additional services exist around the hubs (shops, café's, post office etc)	2	1	0	0	4	7
We have 30 sites, how many will remain and how many move into the hubs	1	2	0	1	2	6
How will other units closing affect the hubs?	0	3	0	0	3	6
How big will the hubs be?	2	0	2	0	2	6
Hubs at Lowther Road and Greenland Road are easy to get to	0	1	0	0	4	5
Community concept is good	0	1	0	0	4	5
Access to other healthcare services vital - not just being in the same location	1	1	0	3	0	5
Why 2 hubs in Camden and only 1 in Islington?	1	1	0	1	1	4
Will hubs include dentist / holistic / faith room	0	1	0	0	2	3

Hub sites have issues such as drug taking	0	1	0	0	2	3
<b>Coded Theme</b>	<b>Staff</b>	<b>Service users</b>	<b>Both</b>	<b>Public</b>	<b>Public &amp; service users</b>	<b>Total</b>
Community concept stigma being addressed / tactful with the new name	0	2	0	0	1	3
Community Model - Drug and mental health service users don't want to mix	0	0	0	0	2	2
Are the hubs on inpatient sites	0	1	0	0	0	1
Interactive white boards needed to support workers	0	0	1	0	0	1
Hubs relate to social care what about the row of houses	0	0	0	0	1	1
Whittington has a bad reputation for dealing with self harm - what will you do to support staff / security staff	0	1	0	0	0	1

### Consultation Process and Details

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Share design details for community hubs /service user input	2	14	4	5	18	43
More clarity around which services are staying at St Pancras and which are moving	4	10	1	9	6	30
Need more information about what is included in the Community Model	2	8	0	4	11	25
Are you looking at best practice / research from elsewhere on inpatient and hub design	1	9	1	2	5	18
Need less opinions and more facts and figures	0	9	0	0	8	17
How much will you listen to the views in this consultation	0	5	1	2	5	13

Explain / diagram of how you reached this decision	0	4	0	1	2	7
Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Promises have been made before but not delivered	0	3	0	1	3	7
Poor use of pictures - need better visuals	1	1	0	0	4	6
Will there be separate consultations on the use of NHS land? Planning permission	0	2	0	2	1	5
Will monitor the impact of lorries and demolition on air pollution /mental health	0	0	0	3	1	4
Are you including Whittington Hospital Area in the consultation	0	1	0	1	1	3
Would like more information about TMS	0	1	0	0	1	2
Where will Trust HQ and corporate be based?	1	1	0	0	0	2
Does the government / council have oversight of these proposals?	0	0	0	1	1	2
Will there be a Brexit impact?	0	0	0	1	0	1
Why move away from the current service - are you saying its inappropriate?	0	0	0	0	1	1
Have you spoken to Whittington Hospital groups especially transport?	0	0	0	0	1	1

**Related to Inpatient Services**

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Will there be a garden / outside areas / quiet for elderly and Autistic?	1	18	7	4	16	46
Need single rooms with en-suite	0	5	2	0	5	12
Will there be same sex wards?	0	1	2	0	7	10
Good to have new Purpose built inpatient unit - replaces Victorian buildings	0	1	0	1	8	10
Could inpatients be kept at a new building at St Pancras Hospital?	0	1	0	1	7	9
Good to have all inpatients on the same site (Whittington)	1	1	0	0	4	6
Need somewhere to smoke	0	3	0	1	1	5
Inpatient services should not be all in one place	0	1	0	1	2	4
Mental inpatients are a better resource than medical staff think	0	1	0	1	2	4
Will it be a new building or a renovated building for inpatients?	0	0	1	0	2	3
Will Inpatient include holistic / faith room / exercise facilities?	0	0	1	0	2	3
New buildings can make you feel unwell	0	0	0	0	3	3
Inpatient staff retention important	0	0	0	1	2	3

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Will Waterlow Park be used [accessible] as a facility?	0	0	0	2	0	2
Good to be close to acute hospital for service support	0	1	0	0	1	2
What about inpatient beds / wards for Autism and learning disabilities	0	1	0	0	1	2
Electronic notice boards in wards please	0	2	0	0	0	2

### Financial Considerations and Funding

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
What's the cost / how will it be funded?	0	10	1	7	20	38
Concern about selling off NHS estate	0	0	2	9	8	19
Should not be financed through sale of buildings / being done for financial reasons	0	1	1	6	10	18
How are staffing costs funded?	0	1	1	1	3	6
Will the Government fund this?	0	0	0	1	3	4
Will you sell to Moorfields? / moving is good	0	1	0	2	1	4
People don't realise the Government have not provided the NHS with promised additional funding	0	0	0	1	3	4

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
How are estate costs funded?	0	1	0	0	3	4
What does self funding mean?	0	1	0	1	1	3
Should money be spent on staffing instead of buildings?	0	0	1	1	1	3
Will the Trust have to find the funds for this?	0	1	0	0	1	2
Will leaseholders have to be consulted?	0	0	0	1	1	2
Could lease out space for commercial revenue	0	1	1	0	0	2
Tottenham Resource Centre sold for £4.5m not £12m - where has that money gone?	0	0	0	0	1	1
If proposal fails will buildings still be sold?	0	0	0	0	1	1
How are decisions about investment in buildings made?	0	0	0	0	1	1
Will there be charges for using the hubs?	0	0	0	0	1	1
Good that it is self funded	0	0	0	0	1	1
Where has the money raised from the sale of St Lukes gone?	0	1	0	0	0	1

## About the Buildings

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
We were promised a gym at HMHC / would like a gym in new building	0	8	4	0	4	16
Why not renovate the wards at St Pancras instead / rebuild?	0	4	0	0	7	11
Are you building the hospital from scratch?	2	4	3	0	0	9
Needs to be approachable - not an institution	0	2	2	0	5	9
Are the buildings listed or protected for heritage?	1	1	1	2	2	7
No more tall buildings - are not close to St Pancras and not representative of the estate	0	1	0	3	2	6
Would like to give feedback on what the new facility would look like	0	4	1	0	1	6
Sites may be too small	1	1	1	0	3	6
Current sites not up to standard / fit for purpose	0	0	2	1	2	5
Keep River Crisis House	0	2	0	0	2	4
CQC positive report suggests new buildings less important	0	1	0	0	2	3
Would like alarms and disability access equipment	0	3	0	0	0	3
Why is the South Wing not included in the proposals? Not fit for use?	0	0	0	1	2	3
River Crisis Centre is a good size and personable (not institutionalised)	0	0	1	0	1	2
Where is the new site for Whittington Hospital and Highgate Mental Health?	0	1	0	0	1	2
River Crisis Centre not in the best location or clean	0	0	0	0	1	1
Need college or learning facilities to be included	0	0	1	0	0	1

## Transport Related Comments

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Transport more difficult - further away	1	5	0	8	11	25
Will transport costs be paid? / shuttle bus?	0	1	0	0	9	10
Locations should take into account where the current patients come from	0	1	0	2	5	8
Good to address transport issues for inpatients	0	1	0	1	4	6
Whittington Hospital does have good connections	1	2	0	0	1	4
May affect patients too depressed / disabled to travel	0	1	0	1	2	4
Will there be car parking available?	0	0	1	1	1	3
Can you work with TFL to ensure buses run to the new hubs?	0	0	0	1	2	3
All inpatient facilities in the plan are based in the North of Islington	0	0	0	0	1	1
Transport is not an issue when you are ill	0	0	0	1	0	1
How accessible is the Highgate site?	0	0	0	0	1	1

### Bed Availability

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
What provision will there be for growth in population and MH services?	0	14	2	3	9	28
Need to ensure capacity to cope with increased and unpredictable bed demand	1	11	0	3	8	23
Will the new place at the Whittington Hospital have the same number of beds?	2	1	0	2	0	5
Will there be fewer rehab beds - changes to Sutherland Ward?	2	1	0	0	0	3

### Support the Plans

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Plans are very positive / good	3	15	4	8	11	41
Good to have new / better buildings	0	3	0	3	3	9
Better buildings improve wellbeing	0	2	0	0	2	4
Good that there's no loss of beds or cuts in service	0	0	0	1	1	2
Good to have this consultation	0	0	0	0	2	2

**Transition to the New Service**

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
How long will it take to complete?	1	11	4	3	1	20
Can you outline the plans with milestones / implementation?	3	7	1	1	4	16
How will services be affected during the changeover?	1	3	1	1	2	8
Need buildings with long tenancies for continuity of care	0	1	0	0	3	4
Need somewhere for transition from wards with the same staff skills / Not for profit orgs	0	3	0	0	0	3
It takes a while for new premises to work, don't despair	0	1	0	0	1	2
Which professionals will be working on the transition?	0	0	0	0	1	1
Will the new unit still be called St Pancras Hospital?	0	1	0	0	0	1
What will happen to the Art Exhibition at St Pancras Hospital / can it be moved to the new units?	0	1	0	0	0	1

**Equalities and Impact Issues**

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Need to consider the needs of older people / disabled / access with Hill issues	0	4	1	2	3	10
Meeting individual needs	0	7	0	2	0	9
What about services for children / adolescents?	0	1	0	6	0	7
Build a hostel at St Pancras site for homeless people	0	1	0	2	2	5
No consistency of care for young people who see multiple people for treatment	0	3	0	0	1	4
What about facilities for BAME?	0	2	0	1	1	4
What about Patients with psychosis and prevalence in community?	0	2	0	0	2	4
Mental Health patients disturbing local respondents	0	0	0	0	4	4
Elderly inpatients would prefer Highgate	0	1	0	1	0	2
What about patients with Autism and learning difficulties?	0	0	0	1	1	2
Need to include personality disorders	0	2	0	0	0	2
Long recovery period is important and may never end	0	1	0	0	0	1
Would like a Women's Resource Centre at Drayton Park	0	1	0	0	0	1
What about Dementia / Alzheimer's?	0	0	0	1	0	1

### Staffing Needs

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Needs to be appropriately staffed	2	8	4	5	9	28
Need consistency of staff support - too many changes	0	5	1	3	2	11
Staff training and development is key. Retain and motivate them	0	2	0	1	2	5
Need consistent counselling support	0	3	1	0	0	4

### Overall Capacity Issues

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Will there be sufficient capacity to cope with increased demand?	0	17	1	11	13	42

### About Community Services

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Health and social care providers and commissioners need joined up thinking on community services	2	2	1	3	3	11
Good to have presence in all GP surgeries	0	4	0	0	5	9
Need more info on mental health teams in GP surgeries	1	2	0	0	5	8
Community services provide vital preventative work	0	3	0	1	2	6
Can health professionals go out to people in the community?	0	1	0	0	1	2
Coded Theme	Staff	Service users	Both	Public	Public & service users	Total

					service users	
Need proper mental health care not just counselling	0	2	0	0	0	2
Too many people locked up - need more community services	0	0	0	1	0	1

### Housing Related

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
What about private housing? What will they cost? / Need social housing	1	1	1	8	6	17
Need supported living rather than hospital beds	1	4	0	0	2	7
Would like to see some supported housing on site to reduce length of stay	1	3	0	1	2	7
Need more staff accommodation	0	0	0	5	2	7

### Relating to Site Closures

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
What about the Hoo / Daleham Gardens?	0	6	0	1	0	7
Will River Crisis Road be affected?	0	3	0	0	3	6
Concerned about what will happen to the Recovery College	0	2	0	0	1	3
Why not join with Tavistock?	0	2	0	0	0	2
Keep Huntley Centre	0	0	1	0	1	2
Will all the other centres be closed?	1	0	0	0	0	1

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Will Kings Cross Road practice be closed?	0	0	0	0	1	1
Don't close Drayton Park Women's Service as its needed	0	0	0	0	1	1
What will happen to the Southwood Smith Centre?	1	0	0	0	0	1

### Referrals into the New Service

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
How will referrals from GP's work?	0	2	0	0	3	5
Will people from outside the area be able to access these services?	0	3	2	0	0	5
There are so many services it is confusing	1	1	0	0	3	5
How will waiting times be affected?	0	0	0	0	4	4
You will not be allowed to go to Sec 136 suite until medically cleared	0	1	0	0	0	1

**Other**

Coded Theme	Staff	Service users	Both	Public	Public & service users	Total
Will buddying and peer support be included? / family and carer support	0	0	0	2	3	5
Some ridiculous suggestions being made	0	0	0	0	2	2
Many councillors have changed since May	0	2	0	0	0	2
How do we tell more people about this consultation / plans?	1	0	0	0	1	2
Need worry beads	0	1	0	0	0	1
How is your mental health?	0	1	0	0	0	1

### Other Responses

The following sets out the 'other responses' received to the consultation in terms of emails and documents. These responses have been coded for common themes (outlined within the frequency tables in this section). The themes have informed the summary of findings at the start of this report.

Responses (outside of the survey) were received from:

Number	Date	Type	From	Title
1	07/08/2018	Email	Service User	Service user email
2	10/08/2018	Tweet	Other / not stated	Tweet from DWH Coalition
3	31/08/2018	Formal Response Document	Other / not stated	Healthwatch Camden
4	12/09/2018	Verbal comments	Other / not stated	CCG chair, Dr Neel Gupta, took verbal comments
5	13/09/2018	Email	Other / not stated	Unknown email
6	01/10/2018	Telephone	Other / not stated	Community members views
7	04/10/2018	Letter	Other / not stated	Response from Woodpecker Project
8	11/10/2018	Email	Other / not stated	Service user email
9	12/10/2018	Letter	Other / not stated	London Borough of Camden
10	12/10/2018	Email	Other / not stated	Public email
11	15/10/2018	Formal Response Document	Other / not stated	Healthwatch Islington & Voluntary Sector Partners
12	15/10/2018	Formal Response Document	Other / not stated	Whittington Health
13	17/10/2018	Letter	Other / not stated	Camden & Islington Joint Health Scrutiny Committee
14	18/10/2018	Formal Response Document	Other / not stated	Healthwatch Camden
15	18/10/2018	Letter	Other / not stated	Manor Gardens Welfare Trust
16	05/11/2018	Email	Other / not stated	Defend the Whittington Hospital Coalition

Below are the key themes from Healthwatch Camden, Healthwatch Islington and Community Partners, London Borough of Camden Council and Camden and Islington Joint Health Scrutiny Committee.

### Healthwatch Camden

- Conducted in-depth interviews with 26 current in-patients at both St Pancras and Highgate Hospitals, with 16 hospital staff, with 5 former in-patients and with 8 carers. The findings from those conversations are set out in a full report to the Trust.
- Positive that the consultation document promises that 'no services will be cut under these proposals' particularly given the high levels of mental health needs
- Support the Trust to deliver services which are 'safe, more therapeutic and maintain individual privacy'
- Environment at Greenland Road may be difficult for those with learning disabilities (busy, noisy, drug use and drug selling)
- Don't see the benefit of hubs for service users – only for providers
- Move is well understood and most responses are supportive
- Current patients don't want to stay at St Pancras
- Understand the need to knock down before rebuilding
- Concern about selling off NHS assets
- Concerns about access to the new site – particularly local amenities (café, shop)
- Worried about getting up hill at new site – can bus stop be moved
- Social Housing should be built – not private housing
- Further consultation recommended at planning stage
- Healthwatch don't fully understand the hub proposal – will not undertake their consultation on this until it is clearer
- Which community services will be provided in the hubs – what won't be provided elsewhere? – lack of public trust – need clarity
- Greenland Road is central and easy to get to – but don't know what's there?
- Why is South Wing staying?
- Don't keep asking the same questions
- Agree with the inpatient move to the new location
- Support improved facilities including en-suite bedrooms and access to outdoor space for all wards
- Change of location from central St Pancras to Highgate will be inconvenient for some patients, carers and staff – longer journey times (but nearer for others)
- Proposals and consultation are silent on the issue of the future of CNWL services on the St Pancras site
- Impact assessments are not sufficiently robust (transport is just a map and quality impact assessment is just a list).

### Healthwatch Islington and Community Partners

- Positive that no services will be cut
- Welcome developing a site that is safe, more therapeutic and maintains individual privacy
- Strongly support improved purpose built better facilities:
  - building en-suite bedrooms for patients and shared work and open spaces

- Should include staff, local respondents and patients in design
- Government Policy doesn't allow this investment without selling off assets – at least much of this is only leased out retaining ownership
- Not just about physical space – need to reduce length of stay by including community and preventative services and reduce health inequalities
- The Health Inequalities assessment does not analyse or address these
- Hubs provide an opportunity to deliver preventative and early intervention
- Confusion on what the hubs offer
- Lowther Road not a good location for wellbeing services – more accessible and less medical in other locations
- Are hubs meant to be for step down from acute services?
- While services consolidated across less sites is against the principle of care closer to home, bringing a range of services together seems logical (Saves time, less stress and more time for patients)
- Staff and resident feedback should inform hub design and services
- Service users with a range of disabilities should be involved in the design of physical space
- Organisational culture is as important as physical space
- Community organisations and the voluntary sector need to be included in plans at an early stage
- Physical health and mental health are closely related and services should be more joined up
- How is the Trust engaging with Whittington Health for improved physical health outcomes?
- Support the move of inpatient beds to the new facility for a better therapeutic environment
- Maintaining bed numbers needs more explanation – Acute beds? Configuration of beds (flexibility to adapt layout), reducing length of stay
- Concerns about planning for 2025 when building won't start until 2020
- Should we be maintaining or increasing bed numbers – changes in population versus early intervention
- Sites will be closer for some and further away for others – but good public transport in London
- Concern about accessibility of sites for wheelchair, disability and pushchair access – especially up the hills
- Increased preventative community services while budget cuts reduce council day care services
- These community services need to be available to as wide a range of respondents as possible
- There are issues around the stigma of attending the hubs – obvious that they are mental health patients (not so with community services)
- Why has Camden got two locations and Islington only one with limited provision in South Islington
- Need more information about what services will be available at the hubs – particularly holistic services
- Needs to be more accessible to BAME groups – not just a change of building
- Access for all patients needs to be monitored, analysed and influenced
- Socio economic and social inclusion need to be considered (poverty)
- Would encourage the Trust to engage with the wider community and community organisations to help design and deliver the service

## London Borough of Camden Council

- Support for re-development of the St Pancras site
- Existing buildings are out-dated, in need of major repair and unsuited to meeting the needs of patients
- Modernisation and redevelopment are long overdue
- Supported capital funding bid for the commitment to providing affordable and key worker housing
- Relocation of the beds from St Pancras to the new site will mean that some Camden respondents and their families will be anxious and have to travel further
- Respondents would benefit from improved facilities
- Impractical and unaffordable for the inpatient beds to be built of the St Pancras site
- Concerned that South Wing has not been included fully in the plan – needs to be addressed – provide new facilities either at St Pancras or the new site
- Redevelopment of the St Pancras site should be consistent and the heritage asset should be considered
- Pleased to see the proposals adhere to the council's and Mayor of London's planning policies to look at affordable housing and for public sector workers to meet targets
- The St Pancras site is important for local respondents – needs to be a communication and engagement plan for local respondents including a regular forum to meet with the Trust as the development progresses
- Council officers would like to continue being involved to support the implementation of the proposals as they develop
- In terms of the community hubs :
  - Welcome proposals to develop services around GPs bringing health services closer to communities
  - Will be good for early intervention and prevention
  - Good to join up inter-related physical and mental health
  - Should be integrated with broader arrangements including council, CCG, local partners and the voluntary sector – otherwise risk that it won't meet respondents future needs
  - Not convinced Greenland Road is the right site for community hub – no other locations as yet identified
  - Greenland Road is close to St Pancras meaning that large parts of the borough will not be accessible
  - Need hubs close to populations that need support – a needs led assessment should be undertaken to determine the best location for the hub
  - Unlikely that the best location would be in the west of the borough
  - Greenland Road is in a very busy and unsuitable location for the care of mental health patients
  - Greenland Road provides an important heritage site which may mean it cannot be converted to the most effective type of facility

## Camden and Islington Joint Health Scrutiny Committee

- Number of inpatient beds should meet current and future needs with no patient ever having to be sent outside the area in future

- If Moorfields Eye Hospital does not relocate to the St Pancras site then further consideration and consultation over site usage is required
- Current approach to the Greenland hub should be halted until further consultation with respondents, local councils, CCG and voluntary organisations has taken place
- Should commit to 50% social housing on a redeveloped St Pancras site
- Need further clarification on the vision, values and core principles of the Estate Strategy for the St Pancras site
- Requires an assessment of what success looks like for St Pancras site
- Need to confirm if St Pancras site is to be retained as a public asset
- Undertake further consultation on the Estates Strategy

## Themes from all Other Responses

- Plans are very positive / good
- What provision will there be for growth in population and MH services?
- Need to ensure capacity to cope with increased and unpredictable bed demand
- No resident should be sent outside the area for inpatient services (insufficient capacity)
- Community services provide vital preventative work
- Health and social care providers and commissioners need joined up thinking on community services
- What's the cost / how will it be funded?
- Need more staff accommodation
- Provide affordable rental properties as part of the housing development (commit to 50% social housing on the St Pancras site)
- What community wellbeing services will be included?
- Needs to be appropriately staffed
- Concern about selling off NHS estate (oppose selling off assets)
- Why not renovate the wards at St Pancras instead / rebuild
- Inpatient ward could be built on right hand side of St Pancras site so that Mental Health patients would not be overlooked
- Lot of building work can affect patients health
- Why is South Wing staying
- Are the buildings listed protected for heritage?
- Concerned about what will be done with the St Pancras site if long leases are available
- May need more understanding of what will be included in the hubs
- Hubs should be delivered in a welcoming, community-focused setting as non-clinical as possible
- Voluntary sector organisations should deliver services in the hubs and need to be consulted
- Hubs can be easy access for early intervention
- Hubs may benefit providers more than service users
- Retain some existing community services and develop a hub and spoke model to reach further into communities
- Would seek reasonable notice if current services such as iCope move from community settings so that alternative use of that space can be planned
- Where has the money raised from the sale of St Luke's gone?
- Day Centre should be brought back to St Pancras
- Not sure why Whittington Hospital is involved – it's a general not a mental hospital
- Will there be a garden / outside areas / quiet for elderly and autistic?
- Combine interlinked physical and mental health resources
- Hubs should include drop-in soup kitchen
- Poor use of pictures - need better visuals
- Agree - leave the Psychodynamic Psychotherapy Service on the St Pancras site - need further consultation around the layout and positioning
- What happens to the St Pancras site if Moorfields Eye Hospital does not relocate
- Concern about the suitability of Greenland Road as a hub (busy, noisy, drug use, drug selling)

- Halt the Greenland Hub proposition until further consultation with the public and stakeholders has taken place
- Need further clarification on the Estates Strategy including assessments and appropriate consultations
- Oppose the relocation of St Pancras Inpatient Mental Health Unit to the Whittington Hospital site
- Not convinced that these proposals offer the amount of community based professional care required locally
- Two main residential units should not be in the same proximity as it's not beneficial to service users and their families
- Transport more difficult - further away
- Will transport costs be paid? / shuttle bus?
- Will there be car parking available?
- Concern about knocking down Education Block and staff quarters at Whittington Hospital – essential for training and recruitment of staff
- Constructive for increased liaison between Mental Health and Hospital Services