

To:

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To: The Chief Executive

1. NOTICE OF CALL-IN OF EXECUTIVE DECISION

In accordance with Overview and Scrutiny Procedure Rule 22, we, the undersigned, hereby give notice that we wish to call-in the Executive decision detailed in section 2 below:-

<u>NAME (PLEASE PRINT)</u>	<u>SIGNATURE</u>
...Cllr Nana Asante	<i>Nana Asante</i>
.....
...Cllr Paul Scott	<i>Paul Scott</i>
.....
... Cllr Keith Ferry Cllr Margaret Davie	<i>Margaret Davie</i>
...Cllr Chris Noyce	<i>Chris Noyce</i>
... Cllr Asad Omar Cllr Navin Shah	<i>Navin Shah</i>
.....
..... Cllr Bill Stephenson	<i>Bill Stephenson</i>

2. DETAILS OF EXECUTIVE DECISION

The details of the Executive decision are as follows:-

Decision: ...To accept officer recommendations for Wiseworks as contained
 in report to Cabinet of 14th December 2005

.....

Made by: ...Cabinet 14th December 2006

(Cabinet/relevant Portfolio Holder)

Published On: ...19th December 2006

.....

(Date) 28/12/06 (Date of submission)

- In Paragraph 5.3 of the Report to Cabinet, the statement that “Respondents indicated that the proposals were not fully understood...” is misleading. They were not understood because no details of re-provided services in either CMHT or The Bridge were provided in document or at the public meetings. The lack of clarity in the consultation document and the lack of relevant information suggests a breach of at least 2 criteria of the Cabinet Code of Practice:
 - Criterion 2 - ‘Be clear about what your proposals are, who may be affected ...’
 - Criterion 3 – ‘Ensure that your consultation is clear, concise ...’
- In the Report to Cabinet, p32 Comment 1, respondents commented that ‘More information needed about the implications of the proposals/alternatives’. In reply the Council said ‘It is accepted that only an outline was included in the consultation’ and that the report to Cabinet agrees that ‘Further work to be done following decision.’ The consultation does NOT comply with The Cabinet Office Code of Practice as described at 9.1, page12. (See Appendix C), as the Council clearly has no clear understanding of the proposals and who will be affected and to what degree. Any decision taken to accept these flawed recommendations could be an expensive failure.
- Consultation has a purpose: ‘The main purpose is to improve decision making, by ensuring that decisions are soundly based on evidence, that they take account of the views and experience of those affected by them, that innovative and creative options are considered and that new arrangements are workable.’ (Cabinet Office Code, see Appendix C). If the purpose of consultation is not understood by the report writers as evidenced by their failure to take into account responses to the consultation, then the consultation is not meaningful and has been an expensive waste of public funds.
- The evaluation of the consultation, also gives grounds for serious concerns. The purpose of an evaluation is to pick up mistakes with a view to improving the process and assessing the value of a particular consultation. Whilst the report states ***‘There needs to be a greater lead-in time for future consultations to allow more time for preparation and the potential involvement of partners and stakeholders in contributing to the development of the consultation proposals and processes’*** (emphasis ours). Yet requests to be involved in the design of the consultation were met with the answer ***‘we do not feel it would be appropriate for the users of the services to be involved in the design of the consultation.’*** (Portfolio Holder answer to public question 3rd August).

If several requests to be involved in the design of the consultation were refused, how can the analysis then state that involving stakeholders and partners in the development of consultation proposals and processes is desirable?

(b) The absence of adequate evidence on which to base a decision

The consideration of the report at Cabinet did not take any account of the responses, which pointed out flaws in the report. There are several, clear instances of factual inaccuracies and contradictions. For example:

- In the analysis, in response to Comment 8, p33 of the Cabinet Report, the report states 'Wiseworks is not an employment facility'. This statement conflicts with a Portfolio Holder answer to a question put to her on 3rd August 2006 when she said 'Wiseworks has undergone a number of developments and changes over the years however, **its principal remit is to help service users with critical and substantial mental health needs secure employment.**' Emphasis ours.
- The figure of 38 quoted in the report is misleading. In fact between 90 and 120 Service Users have been attending Wiseworks and the process of winding down Wiseworks has already begun. The contract for maintenance of Sanctuary Garden at NPH's Mental Health Centre was not renewed with Wiseworks, and the registration of new clients was stopped (see Appendix B).
- The summary in the Cabinet paper on 'Vocational Rehabilitation' misquotes the Department of Work and Pensions (DWP) / Department of Health (DH) 'Vocational Services for People with Severe Mental Health Problems: Commissioning Guidance' (Appendix D) which refers to 'supported work', not vocational rehabilitation and states clearly that:

'There should be a range of services and support to enable people with severe mental health problems access to paid employment, mainstream education / training or integrated voluntary work in the local community. Where people do not wish to take that route, they should have access to supported working or stimulating day occupation'.

'10/15 places per 100,000 population should be provided for supported work / social enterprises.'

- There are inaccuracies in the description of the alternative proposals in the Cabinet Report.

(c) The action is not proportionate to the desired outcome

The decision is based solely on a need to save money in the short-term and takes no account of the effect on the lives of vulnerable users who will lose a valued service. Nor does it take into account the extra cost, which will be incurred by the Council in the long-term, if the needs of these users are not met when they are needed. It is clear that those disabled by mental health problems will be affected disproportionately.

(d) Potential Human Rights Challenge

The decision will have a negative impact on the lives of those with mental health problems and their families and affect their right to family life, and thereby constitutes a breach of the human rights of those disabled by mental illness.

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users and their carers; current service providers including private, small, medium and large companies/organisations; local community, voluntary and faith groups; current and/or potential council tax payers; some employers; some council partners like the Primary Care Trust and advocacy services with whom the council has contracts.

The Cabinet Code of Practice on Consultation (Jan 2004) has six criteria:

1. Consult widely throughout the process, allowing a minimum of 12 weeks for written consultation at least once during the development of the policy.
2. Be clear about what your proposals are, who may be affected, what questions are being asked and the timescale for responses.
3. Ensure that consultation is clear, concise and widely accessible.
4. Give feedback regarding the responses received and how the consultation process influenced the policy.
5. Monitor your department's effectiveness at consultation, including through the use of a designated consultation co-ordinator.
6. Ensure your consultation follows better regulation best practice, including carrying out a Regulatory Impact Assessment if appropriate.

Consultation Co-ordinator: Mark Gillett (mark.gillett@harrow.gov.uk)

Complaints about the consultation process: Stuart Dalton
complaints.peoplefirst@harrow.gov.uk

Please note that the Complaints Service cannot investigate the proposals themselves.

Thank you for taking the time to give us your views.

Sent to all Councillors 11/12/2006
Prepared by Ann Freeman - Coordinator
(Harrow Rethink)

APPENDIX B

RESPONSE TO THE PUBLISHED REPORT ON THE WISEWORKS CONSULTATION

Introduction

This is an initial response to report for Cabinet Meeting of 14th December; it highlights:

Item	Page
1) Concerns about the process a. Timing of the publication of the analysis b. Legality of lack of timely information c. Breach of the Cabinet Code of Practice on Consultation d. Breach of the Harrow Compact on Consultation e. Lack of understanding of the purpose of consultation	2
2) List of Misleading and inaccurate statements in the report	3 - 5
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Concerns about the process

1. **Publication of the analysis:** Although the promised deadline for publication of the analysis was 6th December, it was not until the 8th of December that the analysis was available. It had to be purchased at a cost of £6.50 because it was not downloadable from the website.
2. **Legality:** Is it legal for papers to be available only 3 working days before the Cabinet meeting of 14th December and 1 working day before the deadline for public questions for that same meeting? As the reports were not prepared in time, it was not possible to prepare any public questions for the Adult and Social Care Scrutiny Committee on 7th December. Is this time-table legal?
3. **Breach of Cabinet Code of Practice on Consultation:** Several instances of this but this response will highlight one in this section. No consultation has taken place on how relocation might affect users at the Bridge. Guidance from the Cabinet Office website states:

‘A document should so far as possible include an assessment of the **impact of the proposals on groups likely to be particularly affected**, and every effort should be made to ensure that views are received from all such groups.’

As the consultation did not include an assessment of the possible impact of the proposals on the Bridge, it falls short of best practice.

4. **Breach of the Compact:** these concerns have been documented in a report to the Compact Monitoring Group and stands referred to Harrow Strategic Partnership.
5. **Lack of understanding of the purpose of consultation:** at Cabinet meetings during the consultation period, reassurance was given that no decision had been given and that it was possible to suggest other alternatives to the two proposals in the consultation document. Yet the Outcome of consultation report states

‘The **Wiseworks** proposals were not fully understood by all who received them. Comments favoured the retention of Wiseworks because it worked well and could not be effectively replaced by the proposed options.’ (summary point 4 of the Analysis of responses)

The report seems to miss the purpose of consultation. ‘The main purpose is to **improve decision-making**, by ensuring that decisions are soundly based on evidence, that they take account of the views and experience of those affected by them, that innovative and creative options are considered and that new arrangements are workable.’ (Cabinet Office consultation code)

Misleading and inaccurate statements in the report

(1) Paragraph 5.1: The figure of 38 quoted in the report is misleading. Between 90 and 120 Service Users have been attending Wiseworks. Even the 3rd August Cabinet papers refer to an assessment of 66 Service Users. Despite the consultation process in place, the process of winding down Wiseworks has already begun. The contract for maintenance of Sanctuary Garden at NPH's Mental Health Centre not renewed with Wiseworks, and given to an 'outside' contractor in Feb/March. Registration of new clients was stopped. It would be fairer to say services at Wiseworks have been run down to 38 users.

(2) Paragraph 5.3: The statement "Respondents indicated that the proposals were not fully understood..." is mis-leading. They were not understood because no details of re-provided services in either CMHT or The Bridge were provided in document or at public meetings. The lack of clarity in the consultation document and the lack of relevant information suggests a breach of at least 2 criteria of the Cabinet Code of Practice:

- Criterion 2 - 'Be clear about what your proposals are, who may be affected ...
- Criterion 3 – 'Ensure that your consultation is clear, concise...'

There are inaccuracies in the description of the alternative proposals:

Mind in Harrow /HUG's alternative proposal was not seen and agreed by a Harrow User Group meeting "due to the imminent deadline". Harrow Rethink did not submit an alternative proposal. 'The Independent Steering Group', an independent group of Service Users including the Chairperson of Harrow User Group, Carers and Interested Individuals, submitted "Wiseworks Renewed".

(3) Paragraph 5.4: The statement "The relocation of the employment services to the Bridge." is misleading. Wiseworks Enterprises' services include 'Supported Employment' and slow entry to work experience, that are not being transferred. The report acknowledges that those most disabled by mental health will be affected by the proposals yet makes flawed recommendations to Cabinet. The Wiseworks Renewed proposal suggests aligning services differently and tapping into external funding sources in order to implement the service. The idea is to use funding available for the core statutory service to lever in additional funding and sustain the service through a social enterprise model. The "support and social interaction" that happens now at Wiseworks Enterprises occurs daily in context of training, support, work experience and social events to sell products, outings and daily contact with the public. If the team of tutors is not kept together, or the service made sustainable through a process such as Wiseworks Renewed, what is the point of the comment "Officers should seek to identify a location for Wiseworks to meet on a social basis..." The comment demonstrates a lack of understanding of what actually happens at Wiseworks and how the centre works.

(4) Paragraph 8.1: The experienced and skilled Wiseworks tutorial Team is an asset to those vulnerable people in Harrow who have and WILL HAVE severe mental illness. The Team should be offered a chance to comment on any changes and not put in fear of losing their jobs if they comment and put forward their ideas of improving the Wiseworks experience.

(5) Paragraph 9.1: The consultation did not follow the Cabinet Office Code of Practice on Consultation. There are several instances of breach. It did not follow the Compact as officers were unaware of its existence or relevance. In terms of the 6 criteria

- Criterion 2, be clear about proposals and who may be affected - The proposals are NOT clear,what is to happen at The Bridge/CMHT? Why was there no 3rd proposal concentrating on widening services on the Wiseworks Site and accessing funds outside the Council to run the service needed? There is no clear indication on how people are to be affected. "Yes" is the answer in the Consultation document to question "will I be affected!" What is to happen to those who need supported work and employment, (not, as stated in the summary 'vocational rehabilitation') as laid out in Department of Health document of Feb.'06, which states 10/15 places, should be available for 100,000 head of population? It also states that a range of opportunities should be offered. "No one size fits all."
- Criterion 4, feedback about how the consultation has influenced policy – There has been incomplete feedback regarding the responses received. How the consultation process influenced the policy has NOT been given. The proposal "Wiseworks Renewed" which aims to set up a Social Enterprise which will be cost neutral to Council and the in depth analysis from Julian Lewis have been ignored. Commentary responses as tabled in Appendix 1 are misleading and some are inaccurate.

(6) Paragraph 9.3: Why was the consultation pack not sent to The Bridge members, as changes, unknown, are to happen to accommodate more service users?

(7) Paragraph 9.8: The information provided at public meetings was erratic, with conflicting statements from one meeting to another (e.g. fate of the Wiseworks Site) and ignorance of the Compact agreement by Councillors. It was also difficult also to have a meaningful debate due to other 3 consultations taking place at nearby tables.

(8) Paragraph 10. Equalities Impact: the feedback from the consultation, without exception, states that at present, those disabled by severe mental illness, only have Wiseworks Enterprises. It is the only facility in Harrow where people are gently brought back from brink of despair to recovery from and understanding of mental illness so they can be confident to rejoin society. This pathway of care will disappear, the fine team will be disbanded and those now at risk will be adversely affected.

The expected benefits will be to Council Officers only who have been given the task to dismantle Wiseworks.

(9) Paragraph 12. Corporate Priorities: This report does NOT address the Corporate Priority of Making Harrow Safe, Sound and Supportive. Taking away an excellent care pathway makes Harrow unsafe, unsound and unsupportive to those with severe mental illness.

(10) Paragraph 13. Section 17 Crime and Disorder Act 1998 Considerations: If this report "Deals throughout with the needs of a group of adults who are amongst the most vulnerable and at risk in Harrow" then service users' needs as set out in responses and the alternative proposals should be listened to and acted upon. In any case, as already stated consultation has a purpose

The main purpose is to **improve decision-making**, by ensuring that decisions are soundly based on evidence, that they take account of the views and experience of those affected by them, that innovative and creative options are

considered and that new arrangements are workable.' (Cabinet Office consultation code)

This report fails to show that it has taken account of the views of respondents and that the decision has been affected by the experience of those affected by the service.

Concerns with the Analysis at Appendix 1

Under Methodology on page 16 in the second table under the title Organisation, "Mental health partnership" with a membership of 19 is quoted – what does the term mean? Analysis of participant response also raises serious concerns as the comments did not bear scrutiny and the recommendations reveal a disturbing lack of understanding of what the current recommended course of action will mean.

1	More information needed about the implications of the proposals/alternatives	It is accepted that only an outline was included in the consultation	Further work to be done following decision.
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If, as in Commentary, "It is accepted that only an outline was included in the consultation" in answer to Comment No.1 "More information needed about the implications of the proposals/alternatives" then consultation does NOT comply with The Cabinet Office Code of Practice at 9.1, page 12. The report agrees that "further work to be done following decision". This implies that Council has no clear understanding of the proposals and who may be affected and any decision taken to accept the flawed recommendations will be an expensive failure.

2	People like me have benefited in the past, others in need will not benefit in the future if there is reprovision at Wiseworks	The style of service will change not level of support	Monitor performance
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The Cabinet Code of Practice has not been complied with, as it is not clear how the service style will change and what level of support will be given.

3	It would cost more money if Wiseworks is closed, as some service users may become unwell and have to go to hospital or will require other services	No evidence is available to support his	Monitor outcomes of service users
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There is research evidence to support the comment. Julian Lewis' detailed response quotes Studies that have proven this comment. Anecdotal evidence disproves this Commentary. See letter in Nov. HUG newsletter and commentaries from ex. users who say suicide contemplated until access to Wiseworks gave them hope. The National Service Framework for Mental Health says that "...and some at least may be able to obtain and sustain work..."

4	Do not close Wiseworks/expand current services at Wiseworks	There are no resources for this.	N/a
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Commentary is not accurate. See proposal "Wiseworks Renewed" that mentions Wiseworks as a Social Enterprise and suggests tapping into external funding sources as well as generating income. Harrow in Business has been consulted by the Steering Group and this offers a solution worth exploring. The only resource required at this stage is access to information, the staff and the site. The only expenditure required would be what the Council has to spend by statute, the aim is to prepare a

comprehensive business plan which will include income streams. It needs the political will to make it happen.

5	Better budgeting/monitoring at the council is required to avoid future problems	There is already council wide budget monitoring.	Kept under review
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The commentary is misleading as Wiseworks Enterprises makes money and could be self-funded if staff plans were listened to and marketing were improved. Providing information on current budgeting and monitoring would be helpful.

6	Wiseworks is important for self-esteem of users	Accepted	Ensure replacement services address this
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Breach of Cabinet code of Practice on Consultation. Proposals do not state how the proposed replacement service would address this.

7	Will Bridge be able to hold all 60 users of Wiseworks	There is provision to accommodate all existing users of a merged service.	N/a
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NO CONSULTATION ON A MERGED SERVICE. There is currently a 9-month waiting list for The Bridge. 90 to 120 attended Wiseworks before cut backs on referrals

8	Voluntary work will be regressive step. At Wiseworks service users feel it is real work	Wiseworks is not an employment facility	N/a
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The commentary is not accurate. Wiseworks IS an employment facility...giving supported employment opportunities, work experience and support to those with mental health problems by learning new skills in a non-stressful environment and regaining confidence to gain employment and voluntary work. One of the reasons given for 'reprovisioning Wiseworks' was that it did not move enough people into employment. Here the report commentary is that Wiseworks is not an employment facility. The fact is, it is more than that and this needs to be understood if the decision on Wiseworks is to be a good one.

9	New system will need an army of staff, because they will need to work with individual users rather than with groups	The merge option gives the opportunity for group work	To be taken into account in the decision
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Commentary mentions opportunity for group work yet this has not appeared in the consultation. What is this option?

10	How can justify closing it when working so well?	Good practice to be transferred	Good practice to be transferred to new arrangements
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Commentary says "Good practice to be transferred". Where to? What does this mean? It is not mentioned in consultation.

11	Bridge can't offer gardening and some other activities	Accepted	Support is provided to access activities off site
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The commentary accepts that The Bridge cannot offer gardening and some other activities and then recommends that support is given to access activities off site.

There are no details in the consultation. Where and how and at what cost will this be provided?

12	Already have employments centre / drop in centres at the Bridge, which didn't work.	There is no clear evidence of this	Monitor performance
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The weekly Job Club run by Rethink Phoenix Project at The Bridge was not well attended. Rethink Phoenix Employment Project works in Harrow to help Service Users into work experience, voluntary work and supports into employment. Harrow Volunteer Bureau say that voluntary opportunities are limited... 10 applications for 1 place. CNWL MH NHS Trust runs a scheme of work experience and employment opportunities for Service Users. Their annual report boasts of 29 Service Users had work experience and 4 had offer of employment in over a year. THIS IS CLEAR EVIDENCE of the value of skills of Wiseworks Enterprises to help Harrow's Service Users compete for limited opportunities.

13	Wiseworks is not just employment – is caring/social/ reason to get up/to contribute/to help/health/meaning of life/something worthwhile/encouraged to use skills by service users (some are skilled)	Mental health services are capable of offering this support from other sources	Ensure that this is address via care plans
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The commentary states "Mental health services are capable of offering this support from other sources." What are the sources? Harrow Service Users and Carers of many years have not been able to tap other sources.

14	Wiseworks has been run down. Have decisions been made already?	No new referrals are being accepted whilst the future is unclear and people have moved on	The options in the consultation document reflect what will be available
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Why have no new referrals being accepted? This is a waste of the skills of staff and 8/9 months of possible learning, etc. for another 60 people. The fact that no new referrals are being accepted suggests a fait accompli which contradicts the assurances we have been given that no decision has been taken as yet and that views expressed in the consultation will be taken seriously.

15	DoH guidance on vocational rehab says that for every 100,000 people should be 15 places of vocational rehabilitation. So there should be 30-35 places in Harrow.	This is guidance. 30 to 35 is the top end of figures in the guidance. Providing 2 employment workers in the Community Mental health Team with a case load of 18 would deliver a service to 36 Harrow users	The council accepts the guidance
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THIS GUIDANCE REFERS TO SUPPORTED WORK AND NOT TO VOCATIONAL REHABILITATION. The recommendation says "The council accepts the guidance." IN THAT CASE, IS HARROW COUNCIL ACCEPTING THAT WISEWORKS IS PROVIDING NECESSARY SUPPORTED WORK PLACES? If not, where will 30 to 35 people with severe mental illness be supported in work? In any case providing 2 employment workers with a case load of 18 clients does not provide 'supported work' places and fails to appreciate the spirit of the guidance.

18	Can the Bridge accommodate all the current service users from Wiseworks.	Yes	Plans to be put in place to achieve this
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The current waiting list of 9 months for entry to The Bridge will rise. There has been NO CONSULTATION ON ANY "PLANS TO BE PUT IN PLACE " to accommodate more Service Users.

19	Need an impact assessment of current service users	There is not a statutory requirement for impact assessments.	This will be considered as part of the Cabinet report
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The Cabinet Office Code on consultation is not statutory but suggested practice. Best Practice suggests that an impact assessment would lead to better decision-making. The Compact Agreement in the Code of Practice on Consultation says that a statement to measure.."impact on a specific community" should take place. The Recommendation says "This will be considered as part of the Cabinet report." Does this mean it should have been done? Would it not make more sense to know what the impact will be before recommending a decision? How does this fit in with Disability Equality Duty that should be in place by Dec. 4th? Is it in place in Harrow?

20	Replacement means closure!	It is only the building not the service which would no longer be available.	The service to be reprovided in line with preferred option
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This statement is misleading and appears to be untrue. It is the first mention in print that the Wiseworks building will not be available. The Commentary and Recommendation say the service is to be reprovided. It isn't. In the comments above, the report already accepts that several services and activities provided at Wiseworks will not be available at the Bridge.

21	Re-provide using voluntary sector and local companies	This an option for the future which an be considered	To examined in more detail by the Local implementation team sub group as a future development
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If the Local Implementation Team is to examine "in more detail..." the reprovision using voluntary and community sector and local companies as a future development (see also proposals by Mind and The Independent Steering Group) then, in order for this to be an option, Wiseworks has to be kept open to wait for the outcome of this new proposal.

22	Can other Boroughs use services at Wiseworks and pay for them, to stop its closure?	The finances do not make this a viable option	Not to proceed with the suggestion
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Other Boroughs and other services (Youth Offending Team and Mencap) have used Wiseworks (see assessment attached to 3rd August papers). The Commentary does not make sense. If more money is coming in then the viability is helped. The creative solution suggested by Wiseworks Renewed will incorporate this income stream and cast the net throughout the West London Alliance area and further.

23	So many people not well enough. Need to think about recovery not employment	Other aspects of the mental health services work to this model and can meet needs	This aspect is covered elsewhere in mental health services
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The Commentary does not give details of where "other aspects of the mental health services work to this model (recovery) and can meet needs." The Mental Health Acute Day Hospital at Northwick Park Hospital has closed, there is a 9 month waiting list for The Bridge and a 9 month waiting list for assessment for any therapy. Harrow

MH Service works to medical model of treatment and overworked teams do not manage illness and are only able to monitor their clients for crisis.

24	Should have remodelled Wiseworks, rather than closure	Given the cost of the building this is not an option given current resources	Not to accept this suggestion
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Neither the Commentary, nor the consultation papers, give details of the "cost of the building". What does this mean? Wiseworks Renewed as stated in its' response to 21 challenges the commentary. Information needs to be provided about the cost of the building etc so the remodelling option can properly be examined and the social enterprise model explored.

25	What will the current user do in other hours when they are not seeing employment adviser	The availability of an employment advisor will assist the service user to access relevant options	Monitor performance
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The Commentary does NOT answer this Comment. What is the answer? An impact statement, as No.19 would give an answer. It has not taken place.

26	How will it improve the life of people?	Studies should that these schemes have a good track record in supporting service users in accessing employment	Monitor performance
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No evidence supporting this Commentary. See Julian Lewis' submission and see Department of Health Feb.06 guidelines and National Service Framework for Mental Health. "Range of options should be available."

27	Warned if Wiseworks goes to Bridge that some activity classes may be cut (French, needlework)/ Any chance part of Wiseworks going into the Bridge which is under used (woodwork, greenhouse, computer rooms)	These options will be explored	Explore these options
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Commentary shows that proposals 1 and 2 in original consultation document have not been thought through. If "These options will be explored" and Recommendation is "Explore these Options". Consultation should be undertaken when proposals are at a formative stage.

Appendix 4: Evaluation of Consultation against the Cabinet Office Code of Practice on Consultation

Concerns raised earlier are confirmed by the evaluation of the consultation. Time constraints do not permit a full exposition of our concerns:

1. Which "Advocacy groups were briefed on the consultation on the Friday before the consultation formally commenced"?
2. The Wiseworks Consultation followed on from an Action Plan that led up to the Paper presented to Cabinet on 3rd August, surely this period provided sufficient time for preparation? Offers from stakeholders to be involved were ignored. See joint

letters of 25th July and 10th August from HUG & Harrow Rethink, and from Chair of Patient & Public Involvement Forum of 31st July. See also the letter from Chris Mote of 21st August to Joan Penrose that says "consultation will be open to all stakeholders. However we do not feel that that it would be appropriate for the users of the services to be involved in the design of the consultation..."

How do you reconcile that statement (i.e. that it was not appropriate for users of the services to be involved in the design of the consultation) with the stated Action. "There needs to be a greater lead-in time for future consultations to allow more time for preparation and the potential involvement of partners and stakeholders in contributing to the development of the consultation proposals and processes"?

3. Re: Give feedback regarding the responses received and how the consultation process influenced the policy.

The time-scale of availability of documents for respondents, especially service users, is perhaps illegal? Available in hard copy late Friday 8th Dec. at cost of £6.50. On web site at same time but some cannot access. Public question deadline for Adult Health & Social Care Scrutiny Committee missed. Deadline for Cabinet public question time is 5pm on Mon.11th Dec. The outcome document possibly contains mis-leading and inaccurate statements that contradict information in the consultation document and at public meetings, that cannot be challenged widely before being presented as fait accompli to Councillors.

4. Re: ...recommends that carrying out Impact Assessments on each of service areas as part of implementation of any Cabinet decision.

Consultation covers a vital part of care for vulnerable Harrow citizens. An impact assessment should have been done before the proposals were put in place, as suggested by the HUG/Harrow Rethink joint letter of 25th July... ".in context of whole of Harrow Mental Health Service."

5. Partial Equality Impact Assessment of the Consultation. See last comment.

See Section 2. Concerns stated include "...possible reduction of services...may adversely affect vulnerable groups....potential changes in the quality of care...impact on carers...adverse impacts on grounds of disability.."

(a) IMPACT ASSESSMENT SHOULD HAVE BEEN DONE BEFORE THE PROPOSALS WERE SUGGESTED. SEE COMPACT AGREEMENT CODE OF PRACTICE.

(b) HOW DOES THIS FIT IN TO DISABILITY EQUALITY DUTY?

(c) Section 6. What did relevant groups say? What notice was taken of their comments?

Conclusion

The report is seriously flawed. The recommendations on Wiseworks should be rejected and officers should be asked to bring back a report free of inaccuracies and misleading statements. The Steering Group should be given access to information which will enable it to work with Harrow in Business to provide a business plan for a sustainable mental health service

which will meet the needs of the residents of Harrow. This will meet the corporate vision of a borough loved by its residents because it will be a demonstration of a Council which listens to the views of residents.

Prepared by Ann Freeman and agreed with Service Users, Carers and Interested Individuals.

11th December 2006.

Consultation – Cabinet code of Practice

<http://www.cabinetoffice.gov.uk/regulation/consultation/code/index.asp>

Effective consultation is a key part of the policy-making process. People's views can help shape policy developments and set the agenda for better public services. But we also need to make the process of consultation less burdensome and easier for people to engage with.

Tony Blair
January 2004

The six consultation criteria

Criterion 1

Consult widely throughout the process, allowing a minimum of 12 weeks for written consultation at least once during the development of the policy.

Criterion 2

Be clear about what your proposals are, who may be affected, what questions are being asked and the timescale for responses.

Criterion 3

Ensure that your consultation is clear, concise and widely accessible.

Criterion 4

Give feedback regarding the responses received and how the consultation process influenced the policy.

Criterion 5

Monitor your department's effectiveness at consultation, including through the use of a designated consultation co-ordinator.

Criterion 6

Ensure your consultation follows better regulation best practice, including carrying out a Regulatory Impact Assessment if appropriate.

These criteria must be reproduced within all consultation documents.

http://www.thecompact.org.uk/module_images/Consultation%20%20apprai.pdf

4. Appraising the impact of proposals on the voluntary and community sector

4.1 When developing policy initiatives, an assessment or impact statement should be prepared covering the likely effect of the proposals on voluntary and community organisations at national, regional and local level, for example: as employers; in their use of volunteers; in terms of additional costs; or in relation to any implementation role envisaged.

This can be done in three stages:

- by involving the sector in the development of proposals prior to consultation;
- by securing the sector's views during consultation; and
- through policy appraisal after consultation.

4.2 It is good practice to include the initial assessment in any consultation materials, to secure further input from the sector, and to provide feedback on any changes to that assessment at the end of the consultation process.

<http://archive.cabinetoffice.gov.uk/servicefirst/2000/consult/code/ConsultationCode.doc>

1. The **purposes of consultation** need to be borne in mind throughout the development of a policy (including legislation) or service.
 - a) The main purpose is to **improve decision-making**, by ensuring that decisions are soundly based on evidence, that they take account of the views and experience of those affected by them, that innovative and creative options are considered and that new arrangements are workable.
 - b) Effective consultation ought also to ensure that so far as possible **everyone concerned feels they have had their say** or at least that their interests have been taken into account.
 - c) The Committee on Standards in Public Life¹ has drawn attention to the importance of consultation with a wide cross-section of the public, without which the **openness and accountability of Government could be impaired**, and the dangers of privileged access magnified (Sixth Report, Chapter 7²). The House of Lords Select Committee on Science and Technology³ has emphasised the need for **open dialogue on science** (Third Report, February 2000⁴). Consultation should always be as wide as the circumstances permit. Other things being equal, public consultations are preferable to closed ones.

A document should so far as possible include an assessment of the **impact of the proposals on groups likely to be particularly affected**, and every effort should be made to ensure that views are received from all such groups.

Departments should always consider whether there is a **particular impact by gender, age, ethnicity or disability; in particular regions, or types of area; or on the socially excluded**. The *Policy Appraisal for Equal Treatment guidelines*⁵ are relevant here, as is the *Cabinet Office Departmental Policy Maker's Rapid Checklist*

Responses should be carefully and open-mindedly analysed, and the results made widely available, with an account of the views expressed, and reasons for decisions finally taken

¹ www.public-standards.gov.uk/

² www.official-documents.co.uk/document/cm45/4557/chap7.pdf

³ www.publications.parliament.uk/pa/ld199900/ldselect/ldsctech/38/3807.htm

⁴ www.publications.parliament.uk/pa/ld199900/ldselect/ldsctech/38/3801.htm

⁵ www.cabinet-office.gov.uk/regulation/1999/checklist/equaltreatment.htm

1. Responses should be **acknowledged** where possible.
2. They should be carefully **analysed**, in particular for:
 - a) Possible **new approaches** to the question consulted on;
 - b) Further **evidence of the impact** of the proposals;
 - c) **Levels of support** among particular groups.
3. **Analysing responses** is never simply a matter of counting votes. The House of Lords Science and Technology Select Committee⁶ has drawn attention to the risks of single-issue groups monopolising debate. Particular attention may however need to be given to the views of representative bodies, such as business associations, trade unions, voluntary and consumer groups, and other organisations representing groups especially affected. Eventually it is for ministers to assess the argument and evidence and reach decisions in the public interest.
4. It is desirable to **keep as full an account as possible of both formal and informal responses** to consultations; both to ensure that everyone's view is fairly considered, but also, in line with the reasoning of the Neill Committee⁷, to help address any allegation of privileged access.
5. **Decisions in the light of consultation should be made public promptly** with a summary of **views expressed** (subject to respondents' requests for confidentiality), and clear **reasons for rejecting options that were not adopted**. As far as reasonably practicable, this material should be accessible to all who responded, including on a departmental website (individual notification may be practicable in the case of those who have replied by e-mail). Respondents who ask why **individual proposals** have been rejected should receive an explanation.
6. If significant **new options** emerge from consultation, it may be right to consult again on them (though a shorter consultation period may be justified: see criterion 5 above).
7. **Individual responses should also generally be made available** to anyone else who asks for them. Failure to make material available may be incompatible with Open Government or Freedom of Information⁸ provisions. It is legitimate, in accordance with those provisions, to make a reasonable charge for copying and postage. But where respondents have sought confidentiality, it should generally be respected. It may also be necessary to keep confidential responses that may affect third parties' interests or privacy unfairly.

⁶ www.parliament.the-stationery-office.co.uk/pa/ld199697/ldinfo/ld16sctk/ld16sctk.htm

⁷ www.official-documents.co.uk/document/cm45/4557/4557.htm

⁸ www.homeoffice.gov.uk/foi/index.htm

Commissioning framework

41. Table 1 provides a commissioning framework for effective vocational services. The framework outlines the range of services needed and provides possible performance monitoring criteria for such services.
42. The aims of this commissioning framework are to implement evidence-based practice within vocational rehabilitation for people with severe mental health problems, and to develop strong links and referral arrangements with local employment, education and volunteering services. It is important that commissioners ensure that vocational services are based around the needs of the individual, irrespective of whether care is received from secondary or primary care services, and for there to be a focus on vocational outcomes as a measure of services.
43. There should be a range of services and support to enable people with severe mental health problems to access paid employment, mainstream education/training or integrated voluntary work in the local community. Where people do not wish to take that route, they should have access to supported work or stimulating day occupation which is integrated into the local community and economy.
44. There is the recognition that there needs to be a range of vocational services to meet the needs of all individuals, including those most disabled by their mental ill health. There will not be one approach that fits all.

Contracting specification	CLINICAL VOCATIONAL LEADS IN TEAMS	EMPLOYMENT SPECIALISTS	PUBLIC SERVICES AS EXEMPLARY EMPLOYERS	SUPPORTED WORK (social enterprises/firms)	LOCAL, MULTI-AGENCY FORUMS
Key linkages	To employment specialists and all providers in the network.	To all specialist and mainstream vocational providers including Jobcentre Plus and Connexions.	To clinical teams, day services, Jobcentre Plus, Human Resources and Occupational Health across public services.	To local business community, NHS, Jobcentre Plus and local authorities (procurement).	All
Level of provision	One per team (CMHT or specialist team).	One WTE per clinical team.	One WTE per LIT or PCT.	10-15 places per 100,000.	One per LIT/PCT or locally agreed area.
Number of people served		Employment specialists manage vocational caseloads of up to 25 people at any one time.	Employment specialists manage vocational caseloads of up to 25 people at any one time.	LIT/PCT population	
Performance indicators	Reduction of people on community team caseloads not involved in meaningful occupations.	Increase in the number of people supported in paid work. Increase in the number of people supported in mainstream education/training. Increase in the number of people supported in voluntary work. Reduction of people on clinical team caseloads not involved in meaningful occupation.	Increasing number of people being supported in paid employment in mental health trusts, PCTs, Local Authorities and other public services. Public services employment policies reflect commitment to employ service users.	10-15 people with severe mental health problems employed (full- or part-time) in local social firms.	Active local forum meeting at least quarterly. Membership involves all local agencies. Evidence that group has addressed local issues of inter-agency collaboration.