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NB: There are no jury materials for 25, 27 and 28 January and so no daily uploads for these days

Fit for the Future
Developing specialist hospital services in Gloucestershire



Prof. Mark Pietroni
Director for Safety and Medical Director
Gloucestershire Hospitals NHS Foundation Trust

Citizens Jury - 20 January 2021



Film



[Mark Pietroni - Vision R1.mp4](#)

Session Purpose

Fit for the
Future
Developing specialist hospital
services in Gloucestershire

What is:

- An integrated care system – One Gloucestershire
- Fit for the Future
- A Centres of Excellence approach?

Why are changes to hospital services being proposed?

What are the main service changes being proposed?



One Gloucestershire

Fit for the
Future
Developing specialist hospital
services in Gloucestershire

One Gloucestershire is the working name given to the partnership between the county's NHS and care organisations to help keep people healthy, support active communities and ensure high quality, joined up care when needed.

- NHS Gloucestershire Clinical Commissioning Group
- Primary Care (GP) Providers
- Gloucestershire Health and Care NHS Foundation Trust
- Gloucestershire Hospitals NHS Foundation Trust
- South Western Ambulance Service NHS Foundation Trust
- Gloucestershire County Council.



Fit for the Future

Fit for the
Future
Developing specialist hospital
services in Gloucestershire

As part of our response to the NHS Long Term Plan and commitment to the public in Gloucestershire, when patients have serious illness or injury that requires specialist care, they should receive treatment in centres with the right specialist staff, skills and equipment by delivering care that is fit for the future.

The *Fit for the Future Programme* includes looking at how to develop outstanding specialist hospital care in the future across the Cheltenham General and Gloucestershire Royal hospital sites; our “*Centres of Excellence*”

The aim is to strike the right, but often difficult, balance between having **two world class ‘centres of excellence’** at CGH and GRH and **providing local access to services**.

There was a rigorous assessment of the options before the proposals were consulted on; details in the consultation documents

Feedback from earlier Engagement... Support to continue to develop a ‘centres of excellence’ approach, reflecting how some services are already concentrated in one place e.g. oncology (cancer care) in Cheltenham and children’s services in Gloucester.



The need for change

Fit for the
Future
Developing specialist hospital
services in Gloucestershire

Challenges

- Patients **don’t always see the right specialist** e.g. senior doctor to meet needs 24/7
- **Too many operations are being cancelled** that don’t need to be
- There aren’t enough **staff to stretch across two hospital sites**.

Opportunities

- With the medium to longer term strategy defined, decisions can be made on how to **make best use of resources** e.g. workforce recruitment and training, use of our estate, specialist high tech equipment etc.
- **Joint working between specialist teams could be improved** e.g. how doctors, nurses, therapists, scientists and support functions are located work together.

If hospital services do not continue to develop:

- **Local NHS hospitals could fall behind other hospitals** i.e. lose services, funding or our training status for some specialties and fail to recruit or keep staff
- Patients would have to **travel further** for some specialist care (out of county)
- There would continue to be **disruption to planned care services** at times of high demand.



Centres of Excellence Vision



Centres of excellence vision for Gloucestershire
A single specialist hospital for Gloucestershire, operating out of two campuses, one in Cheltenham and one in Gloucester. All the specialist care and expertise will be right on hand: whether for planned surgery, or in an emergency.

Cheltenham General Hospital (CGH)
 Centre of Excellence for
 Planned Care and Cancer

Gloucestershire Royal Hospital (GRH)
 Centre of Excellence for
 Emergency Care, Paediatrics and Obstetrics

Our centres of excellence vision includes a greater separation between planned and emergency care...




What is a centre of excellence?



Specialist services are brought together to ensure:

- **Highly skilled clinical teams** are available round the clock to give patients the care they need
- **Sophisticated equipment** is available and accessible to clinical teams and patients when required
- Clinical practice is enhanced through more **collaborative working**
- **Quality and safety of care benefits** from best practice and a reduction in unwarranted variation
- **Quicker assessment and decision-making** about patients treatment and onward care
- **Improved patient experience** e.g. fewer cancellations




Aims



The aim is to:

- **Improve health outcomes**
- **Reduce waiting times** and ensure **fewer cancelled operations**
- Ensure **timely assessment and decision making** - patients see the right hospital specialist to meet their needs
- Ensure there are **always safe staffing levels**, including senior doctors available 24/7
- Support **joint working between services** to reduce the number of visits patients have to make to hospital
- **Attract and keep the best staff** in Gloucestershire
- Create flagship **centres for research, training and learning.**




Summary of changes proposed



Gloucestershire Royal Hospital	Or	Cheltenham General Hospital
Acute Medical Take		Gastroenterology inpatient services
Emergency General Surgery		Planned day case General Surgery
Trauma inpatient services		Planned Orthopaedic inpatient services
Image Guided Interventional Surgery 'Hub'		Image Guided Interventional Surgery 'Spoke'
Vascular Surgery		Planned Lower GI (colorectal) service
Planned Lower GI (colorectal) service		Planned Lower GI (colorectal) service




Summary

Fit for the
Future
Developing specialist hospital
services in Gloucestershire

- The Fit for the Future Programme looks at how to develop outstanding specialist hospital care in the future
- The centres of excellence vision includes a greater separation between planned and emergency care
- The recent public consultation has been about potential changes to 5 specialist services being provided by Gloucestershire Royal and Cheltenham General Hospitals
- The main aim is to improve patient outcomes and enhance staff recruitment, retention and satisfaction





What does a good NHS public consultation process look like?

Frances Newell

Senior Programme Lead (Community Involvement)

System Transformation Team, NHS England and NHS Improvement

NHS England and NHS Improvement



Introduction and what this session will cover

1. What is public consultation?
2. What does the law and national guidance require from an NHS public consultation?
3. What features would a good NHS public consultation process have?
4. What features might a poor NHS public consultation process have?
5. Other relevant points about public consultation processes
6. Summary of main points



What is public consultation?



- NOT: an individual consultation with a doctor or another clinician
- It's about giving views on proposals relating to health and care services – or other issues that affect the public such as changes to national laws; planning; education; transport

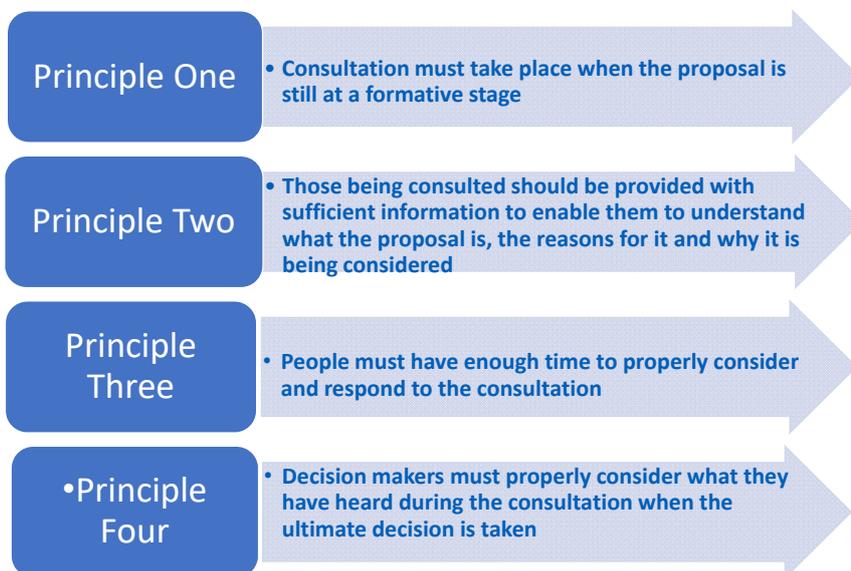


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What does the law and national guidance require from an NHS public consultation?

- NHS must involve the public if it plans to change how services are delivered
- Service users may be involved by “being consulted or provided with information or in other ways”
- The law requires the NHS to not discriminate against people with “protected characteristics”:
 - age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation
- The NHS must consult the local authority on proposals for substantial changes to health services in its area
- The local authority can challenge NHS change proposals under certain circumstances

Public consultation must be fair

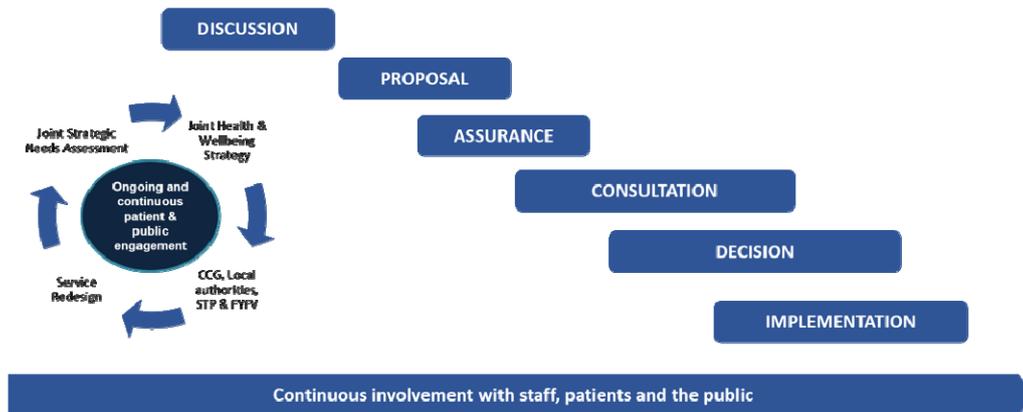


Public consultation must be proportionate

- What's the impact of proposals on people who may be affected?
 - The greater the extent of changes and number of people affected, the greater the level of activity that is likely to be necessary
- NHS bodies need to consider their duty to involve the public alongside their duty to act effectively, efficiently and economically
- Location, access and demographic issues need to be taken into account

The health service change process

*Planning and delivering service change for patients
NHS England, March 2018*



Features of a good public consultation

- Expectations for public consultation are set out in:
 - The Gunning Principles and other case law
 - Cabinet Office Principles
 - Guidance from relevant bodies
- Public consultation in the NHS is heavily scrutinised by local government, the media, public representatives, some members of the public
- The process of public consultation is often the subject of appeals to the Secretary of State for Health and court cases
- There is lots of national guidance on how to do public consultations



Good consultation: Cabinet Office Principles

- Consultations should:
 - be clear, concise, informative, targeted, and have a purpose
 - last for a proportional amount of time
 - take account of the groups being consulted
 - be agreed before publication
 - facilitate scrutiny
- Consultations are only part of a process of engagement
- Government responses to consultations should be published in a timely fashion
- Consultation exercises should not generally be launched during local or national election periods.

Good practice for running a public consultation

- **Identify** and **engage** groups that are harder to hear, for example:
 - groups that are often excluded from systems and services, such as disabled people, Black, Asian and Minority Ethnic people
- Work with the **voluntary, community and social enterprise sector** (VCSE) and with the Healthwatch network
- There should be **different ways for people to engage**, with opportunities for dialogue, such as public meetings, roadshows and drop-ins, live phone-ins, briefing journalists
- **Social distancing** creates new challenges for public engagement. Some methods may not be safe but there are still options, e.g phone, post, open air community interaction, digital engagement
- Responses to a public consultation must be reported fairly



Features of a poor public consultation

- Judgements are made about public consultation processes if they are referred to court by individuals or organisations
- The Independent Reconfiguration Panel also reviews proposals for change that are referred by local authorities
- Consultation processes are not expected to be perfect, and if cases go to review they are always considered in the context of local circumstances
- Appeals have been upheld and judicial reviews have succeeded if the consultation process is shown to be poor, for example:
 - Not enough time or information provided, or data is inadequate
 - Failure to consult the people who will be affected by proposed changes
 - Methods of seeking views not inclusive enough
 - Proposals not developed transparently
 - Consultation responses are not adequately analysed, presented, or taken into consideration by decision-makers

In summary...

- Public consultation is about giving views on proposals relating to public services
- The law and national guidance sets out requirements for public consultation in the NHS
- Public consultations can be challenged in court on the grounds of poor process
- Important parts of the law are that public consultation must be fair and proportionate
- People leading public consultations should **identify** and **engage** groups that are harder to hear, paying particular attention to 'protected groups' such as race, age, disability



What does good NHS public consultation information look like?

Frances Newell

Senior Programme Lead (Community Involvement)

System Transformation Team, NHS England and NHS Improvement

NHS England and NHS Improvement



What this session will cover

- What information does the law and national guidance require to be included in an NHS public consultation?
- What would be the features of good information content in an NHS public consultation?
- What might be the signs of poor information in an NHS public consultation?
- Summary of main points

The law and consultation information

- The law tends to focus on consultation processes, for example:
 - In what circumstances must the NHS involve the public?
 - How should it carry out that consultation?
- It has less to say about the content of the proposals that are consulted on, as this will be different in every case
- The second Gunning Principle deals with consultation information

The Gunning Principles (again!)

1. Proposals must be at a formative stage
2. **Sufficient information and reasons must be put forward for the proposal to allow for intelligent consideration and response**

Those being consulted should be provided with sufficient information to enable them to understand what the proposal is, the reasons for it and why it is being considered.

They should be made aware of the basis on which a proposal for consultation has been considered and will be considered thereafter, including any criteria to be applied or factors to be considered.

This may involve providing information about (or at least making reference to) arguable alternatives and the reasons why they are not also being considered. The level of detail provided will depend on the circumstances.

3. Adequate time must be given for consideration and response
4. Consultors must conscientiously consider the output of the consultation

The law and guidance: information to include in proposals for change

- NHS England guidance :
 - “Development of proposals for consultation should look for a comprehensive range of perspectives to identify the full range of service change solutions that can meet the stated aims of the programme within available resources.”
 - Staff need to consider wider impacts, for example on hospital services in neighbouring areas, and on access - transport links and ambulance availability

- Case law from previous judgements has established that:
 - There is no duty to carry forward to public consultation, where it is required, proposals that in the view of the commissioners are unrealistic, unviable or unsustainable
 - Commissioners may need to provide information about discarded proposals, if there is a requirement to consult on the proposals.

Features of good information content



- An identifiable brand for all activity
- Key messages and approach, ideally developed with patient/public feedback.
- Consistently presented information, in plain English, based on:
 - What happens now?
 - What are we proposing?
 - Why would this be better?
- “We helped the CCG have different levels of detail on the proposals, so people could access the information that matched their interest, time and understanding.”
Chair of the Patient, (Carer) and Public Engagement Group, Dorset CCG

Good practice on how to present the information and seek responses



- Accessible
 - Website information that is accessible
 - Easy read, other language and large print documents
 - Video and social media content
 - Publicise in a proportionate way, e.g. advertising in local papers and social media
- Ways for people to respond, such as:
 - Survey (paper-based, online, phone)
 - Through dialogue at meetings with key feedback logged
 - Logging petitions, letters
 - Advocacy and support may be needed for some individuals and groups to respond
- Different levels of information to suit different audiences
 - A full formal consultation document with detail on proposals
 - A summary document for those who don't want to go into full detail

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Good practice on presenting information responsively



Information in a consultation should be responsive to the issues that come up:

- An interactive website kept up-to-date with all documents, meeting records, presentations and evidence material
 - Questions and answers updated to reflect feedback from residents and staff, and available online and to those engaged in meetings
 - Logging who is responding throughout the consultation period and taking action to hear from a reflective range of people
- A consultation in Cumbria realised it had not heard from many working age men or young people and made extra efforts to reach these groups via outreach at auctions and at further education colleges*

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Signs of poor information in a public consultation



- Not enough information is given for proposals to be properly understood by those being consulted
- Data is incorrect, incomplete or material is presented in an inaccurate or misleading way
- The consultation materials are poorly written or presented, or not available in accessible formats
- Engagement methods are not inclusive for people who may be affected by the proposals (for example, digital exclusion)

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In summary...

- For a public consultation to be fair, there must be sufficient information about the proposals and reasons for them
- The NHS is not expected to put forward proposals that are judged to be unviable
- There should be information about wider impacts e.g services in neighbouring areas, transport links, ambulance services
- Information on proposals for change should be presented clearly in plain English and accessible formats
- It is good practice if information provided during the consultation responds to the issues raised by consultees