

Working in partnership

Opportunities and challenges of public consultation

Kevin Dixon

Chair

Healthwatch Torbay

Ray Chalmers

Head of Communications and
Strategic Involvement

South Devon and Torbay CCG

The next 20 minutes

- Why Healthwatch and South Devon and Torbay CCG?
- Opportunities
- Challenge of different perspectives
- Approach taken in South Devon and Torbay
- Converting challenges into opportunities



Opportunities

- Deploy best practice
 - Promote understanding of underlying issues
 - Increase transparency
 - Get input from those who use and care about our services
 - Get key people on the same page
 - Demonstrate partnership working
- Improve proposals
 - Consultation concentrates the mind
 - Capture different perspectives - identify problems early!
 - Demonstrate responding to external scrutiny
- Keep an eye on the future
 - More engaged relationships help promote wellbeing
 - Build understanding and trust

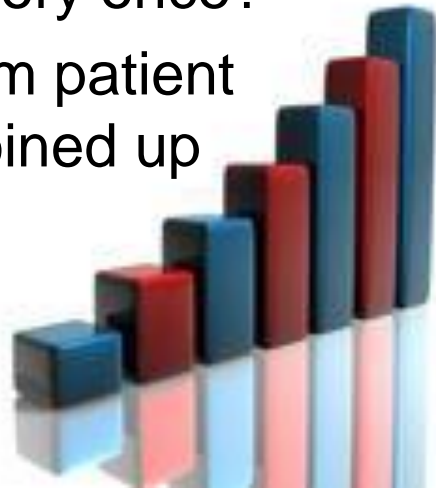
The NHS perspective

- Improving services and meeting demand
 - Tackling quality and safety issues
 - Taking advantage of:
 - Modern medical practices
 - Better ways of delivering care
 - Ensuring services sustainable, building capacity
 - Locating services in the best place
 - Choice
 - Concentrating resources – staff and money



The paradox

- Who doesn't want to see improvement?
 - Receive better services?
 - Have more personal care?
 - Tell their story once?
 - Benefit from patient focused, joined up services?
- Why do people appear to:
 - Dislike change?
 - Resist change?
 - Campaign against change



Community perspective

- Why change what appears to work?
 - A&Es, community hospitals, GP practices
- Changes appear to discriminate against 'remote' communities
 - Rural areas losing out to towns and cities
 - Already lost post office, police stations
- Poor track record of delivering change?
 - Lack of transparency in the past
 - Perceived disparity between promises and outcomes
- Scepticism of authority/professionals?
 - Political cynicism?
- Cuts/privatisation
- Tick box exercise/done deal



Consultation staff perspective?



Staff perspective?



Statutory perspective

- **Section 14Z2 of the Health and Social Care Act**
- **Government's Four Tests of Service Reconfiguration**
 - *Strong public and patient engagement*
 - *Consistency with current and prospective need for patient choice*
 - *Clear, clinical evidence base.*
 - *Support for proposals from commissioners*
- **Assurance processes including NHSE and Scrutiny Committees**
- **Gunning principles for public consultation**
 - *Public bodies keep an open mind and not have already made the decision*
 - *Sufficient reasons for proposals to permit 'intelligent consideration'.*
 - *Adequate time for consideration and response*
 - *Feedback and responses conscientiously taken into account*
- **Cabinet Office consultation principles published in January 2016**

Need support - phone a friend



- Healthwatch
 - Critical friend
 - Engagement support
 - Contacts
 - Independent
 - Practical support
 - Attendance at all public and community meetings
 - Recipients of consultation feedback
 - Analysis of feedback
 - Produced feedback report

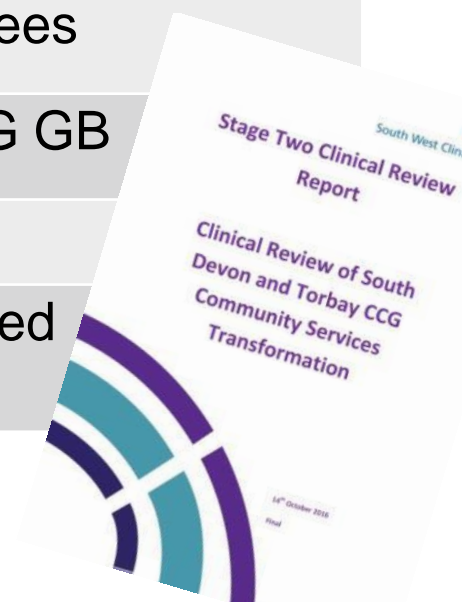


Consultation part of a process

- Consultation proposal:
 - Switch spend from hospital based care to community based care
- Two key aspects
 - Engagement
 - Two way discussions to understand perspectives, issues, aspirations and wishes in order to influence thinking and planning. It should be clear how the
 - Clarity as to how outcomes from this engagement influence any proposals.
 - Consultation
 - Formal, legally required process to seek opinion and feedback on specific proposals.
 - Opportunity to reach out and embrace communities

It takes time - pre consultation

2013	Engagement: what people wanted from community health & social care services
2015	Integrated Care Organisation established
2015/16	Regular stakeholder engagement in seven towns - challenges facing health and social care
2015/16	Care model development
2015/16	Progress reporting to scrutiny committees
April 2016	Consultation options approved by CCG GB
August 2016	NHSE assurance process complete
Autumn 2016	Clinical Senate review (Report published November)



Sept – Nov 2016: consultation approach

- Single option – open to alternatives
- Activity informed by equality impact assessment
- Briefed scrutiny, MPs, key stakeholders
- Public meetings in key locations
 - Independent chair
 - Presentation
 - Round table format
 - Q&As
 - Healthwatch recorded comments
- Encouraged community based groups to invite us to their meetings
- Care homes, ‘on the buses’, schools and colleges
- Met with ‘activists’
- Vast amount of information published



Sept – Nov 2016: consultation snapshot

- 14,000 consultation documents, 2,000 posters
- Information sent to more than 300 groups
- Facebook advertising reached 35,000 people
- Twitter chats and promotion
- 23 public meetings - independently chaired
- 60+ meetings - community based groups & staff
- 1,700+ people attended public meetings
- Feedback recorded by Healthwatch
- Consultation web pages - 8,000+ unique user
- 700+ signed up for weekly stakeholder update
- 1,400 feedback questionnaires returned



healthwatch
Torbay

healthwatch
Devon

NHS
South Devon and Torbay
Clinical Commissioning Group

Torbay and South Devon **NHS**
NHS Foundation Trust

Consultation Feedback Questionnaire

It takes time - post consultation

November to
December 2016

Healthwatch analysing feedback

January 2017

Healthwatch consultation report

Evaluation of alternative proposals

Governing Body decision

Scrutiny reporting

Implementation



Opportunity and challenge - the conundrum

- Requirement to move at pace
 - Co-production, engagement, consultation, OSCs, clinical senate reviews all take time
 - Multiple consultations
- Judgement call - no right answer
 - Quality improvement subjective
 - Change not necessarily seen as improvement
 - Scepticism over statistics
 - Conflicting experts – eg retired clinicians
 - Focus on Landmark buildings and not 21st century services
- Choice often seen as privatisation?
- Consultation versus “It’s a done deal”
- Quality and safety versus “It’s all about the money”
- Judicial review

Exploiting opportunity

- Recognise concerns/current problems
- Constant engagement and communication
 - Transparency
 - Honesty
 - Information
 - Pilot and evidence benefits of change
 - Celebrate success
- Focus on attainable benefits
- Show that focus on 'prevention and self care' doesn't mean 'no care'
- Deliver promises
- Enable people to see outcomes of each initiative
- Acknowledge 'the money'



Any questions?

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