



# futurefit

Shaping healthcare together

**Consultation plan**  
*November 2017*



## Document version control

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## 1.0 Introduction

The purpose of the consultation plan is to describe our approach to communications and engagement for the formal public consultation on the transformation of hospital services in Shropshire and Telford & Wrekin. Telford & Wrekin CCG and Shropshire CCG are reviewing the way hospital services are delivered for the populations Shropshire, Telford & Wrekin and mid Wales. The CCGs have their own overarching communications and engagement strategies in place, but recognise that this joint transformation programme requires a bespoke consultation focused communications and engagement plan to be in place.

The aim of this communications and engagement plan is to ensure activity clearly informs the development of a new model of urgent and emergency care and diagnostic and treatment, combined with local planned care services. It aims to ensure that the services that will be delivered will appropriately meet the needs of the population now and into the future. This plan draws on feedback received to date from the public and key stakeholders.

The plan describes mechanisms that are already in place and what else we intend to do to consult with staff, the public, patient, carers and key stakeholders.

### 1.1 Setting the context of the consultation

In November 2013 a major engagement exercise took place in Shropshire, Telford & Wrekin with public and clinicians under the NHS England's Call to Action. The response of local people was very clear. They said they wanted full engagement in thinking through options for the future and that nothing should be predetermined. It was agreed there was a compelling case to review the way hospital services are provided for future generations to benefit. Citizens called for more accessible and connected care which is closer to home and responds to the needs of the local population. Clinicians called for safe care that brings together specialist expertise in the best way to offer patients the best outcomes and a great experience. Building on this, an agreement was made to deliver new models of care which are fit for the future.

This call to action event resulted in the launch of the NHS Future Fit programme. This programme agreed it would bring together patients, NHS leaders and local authority partners to look at how services are currently used in detail and compare this with the best clinical practice across the UK and beyond. The outcomes from this were used to develop options for how services can be improved in order to deliver excellence for the future.

From this piece of work three key areas were identified:

- Long term care and frailty;
- Diagnostic and treatment centre combined with local planned care services
- Urgent and emergency care

For this consultation we are focusing on the urgent and emergency care and planned care services, with a 24 hour urgent care services, outpatient services and tests (diagnostics) at both sites.

In Shropshire, Telford and Wrekin we currently have two major hospitals serving the local population, consisting of around 500,000 patients accessing services of which around 70,000 are from mid Wales. It is recognised that having predominantly the same hospital services provided across two sites, set less than 20 miles apart, is not sustainable now or in the future.

The clinical and financial sustainability of local acute hospital services has been a concern for more than a decade. Shropshire and Telford & Wrekin has a large enough population to support a full range of acute general hospital services, but splitting these services over two sites is increasingly difficult to maintain without compromising the quality and safety of the service.

Most pressingly, the Shrewsbury and Telford Hospital NHS Trust (SaTH) currently runs two A&E departments that require at least 12 consultants. Currently there are only five consultants who have to be on call one full weekend, day and night each month. This means they could be working 12 days in a row. Similar hospitals have enough consultants so that they only need to be on call four times per year.

Therefore, SaTH currently has particular medical workforce recruitment and retention issues around A&E s and critical care services. Most of these services are currently delivered on two sites, although stroke services were brought together on an interim basis at Princess Royal Hospital to address workforce issues. This latter move has delivered measurable improvements in clinical outcomes. The single site stroke service has to stay with the Emergency Care site so forms part of the Future Fit consultation.

SaTH has developed its Sustainable Services Programme to address these challenges. It has produced a Strategic Outline Case (SOC) which has now been developed into a Draft Outline Business Case (OBC).

The clinician-led work over the last four years, forms the basis of what we will be consulting on. The options developed in the programme have gone through an appraisal process to analyse certain factors such as distance and quality. An Integrated Impact Assessment and an Equalities Impact Assessment were carried out in 2016. A further IIA was conducted into the impact of any potential re-siting of women's and children's services from Telford to Shrewsbury in 2017. This was conducted at the same time as an Independent Review into the process so far, conducted by KPMG, again in 2017. You can read these on our website [www.nhsfuturefit.org](http://www.nhsfuturefit.org)

Throughout the development of the options and subsequent plan development there has been extensive engagement and communication with the key stakeholders and the general public. A 'mind map' of activity to date (as at Nov 2016) and a stakeholder map are available in Appendices 1 and 2 at the end of this document. Activity has ensured that we have worked with and involved stakeholders in mid Wales to ensure that correct processes are followed in line with Welsh guidance and legislation.

## 2.0 The purpose of the consultation plan

The purpose of the consultation plan is to describe our process for formal consultation and how we will reach stakeholders including patients, their carers, families and members of the public across Shropshire, Telford & Wrekin and mid Wales. This process will ensure that our methods and approaches are inclusive and tailored to the people we want to reach so that they can have their say. These include:

- Public, patients, carers and their representatives
- Key stakeholders including partner organisations
- Voluntary, community and social enterprise sector organisations
- Staff across all partner organisations of the Sustainability and Transformation Partnership
- Local Councillors, MPs and AMs
- Joint Health Overview and Scrutiny Committee and Powys Community Health Council
- Particular interest groups, including seldom heard groups

The plan sets out the activity which will take place and the timelines involved, including the resources required to deliver the plan. The intention of the plan is to help people understand what to expect from the formal consultation, how they can be involved and how long the process will take. The purpose of the consultation communications and engagement activity is to:

- Raise awareness of and provide information on the changes being proposed.
- Involve stakeholders in discussions about the proposed changes and draw out any issues and concerns.
- Support us to pay 'due regard' to our equality duty in our decision making
- Work with stakeholders to consider potential solutions to any issues raised.

- Gather feedback which will inform the decision about the future model of hospital services .
- Ensure we meet our statutory duties as set out later in this document.

### 3.0 Aims and objectives

We will deliver a best practice consultation, guided, advised and assessed by The Consultation Institute, which is founded on the commitment to inform and listen. The Consultation Institute is undertaking a Quality Assurance role and has provided feedback to date on the consultation document, consultation summary document and consultation plan, all of which remain in draft until final approval stages in order to take on board comments and feedback from many varied channels, including CHC, Joint HOSC and NHSE.

We will work with our stakeholders to deliver key consultation activities and to collate and analyse the results to ensure an objective outcome. We will use an approach that allows for volume and richness of response.

To help us achieve this aim, we have the following high-level objectives:

- To ensure that the consultation is transparent and that it meets its statutory requirements through sufficient inclusiveness, breadth, and depth.
- To create a significant and meaningful amount of engagement with local stakeholders.
- To create a thorough audit trail and evidence base of feedback.
- Collate, analyse and consider the feedback we receive to make an informed decision.

### 3.1 Principles for consultation

- Make sure our methods and approaches are tailored to specific audiences as required.
- Identify and use the best ways of reaching the largest amount of people and providing opportunities for those within the nine protected characteristics.
- Provide accessible documentation, including Easyread, large print Word documents and Word documents for use with screen readers.
- Ensure that Welsh language versions of all materials are produced.
- Offer accessible formats including translated versions or interpreter facilities where required
- Equality monitor participants so we ensure the views reflect the whole population and review and adapt activity as required.
- Use different methods or direct activity to reach certain communities where we become aware of any under-representation.
- Arrange our meetings so they cover the local geographical areas that make up Shropshire, Telford & Wrekin and mid Wales.
- Arrange meetings in accessible venues and offer interpreters, translators and hearing loops where required.
- Purchase our resources for delivering consultation activity from the local community wherever it is possible.
- Inform our partners of our consultation activity and share our plans.

Consultation is the formal process of asking the public their views on any proposals to change the way services are provided and delivered. This process is supported by our legal obligations. Any formal consultation process requires us to follow a legal process so that we can ensure local people have a voice and an opportunity to provide us with their view. Consultations will be based on what we already know and should only take place when we have already engaged with the public.

We have made sure that key stakeholders have fed into this document, which has taken into account the different methods for consulting. We have taken their advice on the needs of local people and, budget permitting, their advice is reflected in the methodology used for this consultation. In addition a detailed Future Fit Communications and Engagement Event

Planner has been drafted which plots all events and meetings we plan to attend throughout the consultation period – see Appendix 4. This is a live document that will reflect the detail of the ongoing consultation activities.

## 4.0 Consultation: mid-point review

As part of our consultation procedure, The Consultation Institute (tCI) will conduct a mid-point review half way through the consultation period. This will look at how well we have engaged to make sure we are providing the best opportunities for people to have their say. TCI will assess if there has been sufficient feedback from seldom heard or minority groups so that we can adapt our activities to reach groups of people who have not yet been involved. We will also, as required, adapt our methods and channels used so far, to ensure that we make the best use of the most effective channels and that our resources are directed accordingly. As the consultation period is likely to fall over the winter holiday period, we will adjust/extend the consultation length to accommodate for those times when people are less likely to be able to be involved in the process. We are not aware of any pre-election periods that will occur at the time of the consultation.

## 5.0 Legislation and guidance on consultation

There is a legal duty on NHS organisations to involve patients and the public in the planning of service provision, the development of proposals for change and decisions about how services operate:

- Section 242, of the NHS Act 2006, places a duty on the NHS to make arrangements to involve patients and the public in planning services, developing and considering proposals for changes in the way services are provided and decisions to be made that affect how those services operate.
- Section 244 requires NHS bodies to consult relevant OSCs on any proposals for substantial variations or substantial developments of health services. This duty is additional to the duty of involvement under section 242 (which applies to patients and the public rather than to OSCs).
- The NHS Act 2012, Section 14Z2 updated for Clinical Commissioning Groups places a duty on CCGs to make arrangements to secure that individuals to whom the services are being or may be provided are involved (whether by being consulted or provided with information or in other ways):
  - in the planning of the commissioning arrangements by the group,
  - in the development and consideration of proposals by the group for changes in the commissioning arrangements where the implementation of the proposals would have an impact on the manner in which the services are delivered to the individuals or the range of health services available to them,
  - in decisions of the group affecting the operation of the commissioning arrangements where the implementation of the decisions would (if made) have such an impact.
- Section 183 of the National Health Services (Wales) Act 2006 requires LHBs, with regard to services they provide or procure, to involve and consult citizens in:
  - planning to provide services for which they are responsible
  - developing and considering proposals for changes in the way those services are provided;
  - and making decisions that affect how those services operate.
- Section 242 of the National Health Service Act 2006 extends this requirement to NHS Trusts.
- Regulation 27(2) and 27(3) from the Community Health Councils (Constitution, Membership and Procedures) (Wales) Regulations 2010 which places a duty on NHS Trusts in England to consult with Community Health Councils in Wales on substantial variation in health services

For the full guidance from NHS Wales on engagement and consultation please use the following link  
<http://www.wales.nhs.uk/sitesplus/documents/900/Guidance%20on%20Engagement%20and%20Consultation.pdf>

Our approach to public involvement and consultation is also informed by legal case law which has established some key principles (commonly referred to as The Gunning Principles). In summary these are:

- A consultation must be held “when proposals are still at a formative stage”
- There must be “sufficient reasons for proposals to permit ‘intelligent consideration’”
- There must be “adequate time for consideration & response” of proposals
- Responses “must be conscientiously taken into account”

## The Equality Act 2010

The Equality Act 2010 unifies and extends previous equality legislation. Nine characteristics are protected by the Act, age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation.

Section 149 of the Equality Act 2010 states that all public authorities must have due regard to the need to a) eliminate discrimination, harassment and victimisation, b) advance ‘Equality of Opportunity’, and c) foster good relations. All public authorities have this duty so the partners will need to be assured that “due regard” has been paid through the delivery of this formal consultation.

To help support organisations to meet these duties a set of principles have been detailed in case law. These are called the Brown Principles;

- The organisation must be aware of their duty.
- Due regard is fulfilled before and at the time any change is considered as well as at the time a decision is taken. Due regard involves a conscious approach and state of mind.
- The duty cannot be satisfied by justifying a decision after it has been taken.
- The duty must be exercised in substance, with rigour and with an open mind in such a way that it influences the final decision.
- The duty is a non-delegable one.
- The duty is a continuing one.
- This formal consultation will fulfil part of our consideration of our legal duty

We note the additional duties to consult in Wales and refer to guidance set out in the ‘The Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011’

## The NHS Constitution

The NHS Constitution came into force in January 2010 following the Health Act 2009. The constitution places a statutory duty on NHS bodies in England and explains a number of patient rights which are a legal entitlement protected by law. One of these rights is the right to be involved directly or through representatives:

- In the planning of healthcare services
- The development and consideration of proposals for changes in the way those services are provided, and
- In the decisions to be made affecting the operation of those services.



## 6.0 Findings from pre-consultation engagement activity

Our approach is formed on the basis of work already carried during the pre-consultation period of engagement which ran from November 2013 – November 2016. This process involved the Call to Action event, deliberative events, pop up events, social media and regular newsletters, alongside a communications and media programme led by The Shrewsbury and Telford Hospital NHS Trust. Patient representatives have contributed at every stage of the programme, attending work stream meetings and events, and so have helped to shape the proposals. See Appendix 1 for summary of engagement to date.

The following themes have been identified and have fed into the proposals on during the engagement and communications activity:

- NHS services should be more 'joined up'
- Help me understand how to access the right urgent care services
- Assess and treat me promptly and in the right place
- Admit me to hospital only when necessary
- Make my stay in hospital short, safe and effective
- Try to care for me at home, even when I am ill

In accordance with Guidance for Engagement and consultation on changes to Health Services this draft consultation plan has been shared with Powys CHC for its feedback prior to the start of the formal consultation.

## 7.0 Consultation mandate

The CCGs have already decided that change is necessary to deliver safe, sustainable services that improve outcomes for patients. They now need to make an informed decision on progressing the future shape of hospital services. To do this they need to ensure that these are high quality, safe, sustainable and affordable and result in the best possible outcome and experience for patients. Therefore they need to understand the views of all patients, public, stakeholders and staff who live and work in Shropshire, Telford & Wrekin and mid Wales. This includes those directly impacted by the proposals (which may include patients, public and stakeholders in surrounding areas) which may lead to a change in the future to the way provide emergency and planned care, including urgent care.

## 8.0 Process for consultation

### 8.1 What we already have in place

There are a number of mechanisms in place which help us provide information and communicate with a range of stakeholders. These mechanisms have and will continue to be utilised throughout this process.

- Staff are already being engaged through a number of methods including briefings, newsletters etc.
- Local councillors and MPs are updated through discussions at scrutiny and Health & Wellbeing Boards and with briefings at committees and forums. In addition one- to-one meetings with MPs and AMs provide an opportunity for regular briefings.
- Joint Health Overview and Scrutiny Committees (HOSC), Health & Wellbeing Boards and Powys Community Health Council (CHC) are kept up to date with our plans through presentations and briefings.
- We have a dedicated NHS Future Fit website which will be signposted to from all local NHS and partner websites. These pages contain a range of information including the consultation documents and supporting information. We will continue to use existing social media we have in place as a communication tool to promote the consultation.

- Close working with Healthwatch and CHC colleagues to ensure we provide consistent messages to the public.
- We engage with local GP practices to make sure they are aware of any involvement activities and promote participation via surgeries, for example through patient reference groups.
- We review existing websites including those attached to the local media to gather feedback.
- We work closely with the local voluntary, community and social enterprise sector to share information and deliver activities to obtain feedback on our behalf.
- Patient groups and representatives are informed and opportunities to engage in conversations are promoted.
- We circulate information widely to our existing stakeholder database which includes a range of local community, voluntary, statutory and other organisations and members of the public.
- Regular discussions with stakeholders in mid Wales have allowed us to be advised and guided to ensure our communications and engagement approach to residents in Powys is robust.

## 8.2 What else do we need to do

To ensure formal consultation can take place we will need to provide more opportunities for communication and information sharing and discussion, offer stakeholders the chance to host conversations and directly reach identified groups. The consultation plan has been co-produced overtime with key stakeholders through a number of workshops, focus groups and surveys in order to understand the methods and approaches that are appropriate. We will continue to work with people to refine our approach up to and throughout consultation.

The formal consultation will be delivered over a 12/14 week period using a number of mechanisms. The process will need full commitment from all partners to provide staff and appropriate key speakers as required. We are in the process of confirming a comprehensive list of key spokespeople, including clinicians, GPs and senior managers. Many are already aware that they will be asked to commit to attending a range of activities from meetings, such as those for mothers and babies, roadshows in high footfall and community spaces and taking part in larger scale public meetings. Spokespeople will be encouraged to attend pre-consultation briefing sessions, which can be delivered face to face or via a webinar. They will be provided with briefing packs and a series of media awareness / training sessions are currently being scheduled. In attendance at events we will aim to have a range of experienced engagement staff, clinicians and managers wherever possible, to ensure that questions can be answered and feedback gathered and all staff feel supported.

In planning the consultation activities we recognise that due to the time of year there may be instances where bad weather occurs. In the case of severe weather such as snow, flooding, high winds or very cold temperatures we will take as early decision as possible to cancel any public events or meetings so that people are not put at risk of injury. We will take measures to ensure that the event or meeting is rescheduled at the earliest opportunity. We will use our networks to ensure the message is circulated to all relevant stakeholders.

## 9.0 Consultation activities

**Pre-launch** - We continue with a thorough programme of key stakeholder engagement leading up to the start of the consultation. This includes ongoing dialogue with the Joint HOSC, PTHB and Powys CHC, formal attendance at CHC, regular MP briefings, updates to communications colleagues and regular liaison with the local media. Prior to launch of consultation, we will inform key stakeholders of the start finish date

**Launch** - The NHS Future Fit website will contain more information about the consultation, including links to the consultation documents and supporting information. The website will provide information on how to respond to the consultation. This will include a survey which can either be completed and submitted online or downloaded and printed. It will also include a schedule of planned events and activities which will continue to be updated. A number of briefings will also take place with

key stakeholders and information. We will also launch through communication channels such as local media, social media and radio.

**Public Exhibition events** – We are planning to hold a series of drop-in public exhibition events at key locations across Shropshire, Telford & Wrekin and mid Wales. These ‘marketplace’ style events will be an opportunity for people to find out more about the consultation, meet our doctors, nurses and other healthcare staff, ask questions and have their say. We will capture feedback at events and encourage people to fill out our survey

**Existing networks** – We will capture people’s views through face to face conversation using our existing relationships with the voluntary, community and third sector. We will use our networks and existing platforms to host conversations and ensure comments and views are captured by circulating the consultation documents and survey for community groups. This will include Welsh and Easyread versions of our longer and summary documents, with additional formats and translated documents as requested. This approach will ensure we gather view from the widest possible range of groups and individuals.

**Staff**– We will build on existing platforms in organisations and utilise notice boards, websites, staff briefings and local intranets. A range of opportunities for consultation including events, presentations and information sessions will be promoted.

**Elected representatives** - We will use face to face meetings and regular written briefings to ensure these key stakeholders are informed and involved. In addition the Joint Health Overview and Scrutiny Committee (JHOSC) and Powys Community Health Council (CHC) will be formally consulted on our plans.

**Existing meetings** – We are building a schedule of regular group meetings attended by local people. These may be organised by the voluntary sector, community groups or patient groups and will offer opportunities for spokespeople to attend and share information, answer questions and gather feedback. This approach will reach people that may not attend other events or feel able or confident enough to speak up in unfamiliar settings.

**Seldom heard groups** - We will continue to aim to reach groups that have been identified by the Equalities Impact Assessment and ongoing equalities activities as being impacted by the proposals. Through the consultation process we will continue to review and update our Equalities Impact Assessment, remaining open to identifying groups and impacts that have not been identified by the work to date

See the full list of scheduled events so far in Appendix 4. New events will be added to this list and publicised on our website

## 10.0 Key messages

Below are the overarching key messages to our stakeholders:

- Over the last four years we have listened to and involved thousands of local people and together we have developed proposals that we believe will deliver improvements to how patients are cared for at both the Royal Shrewsbury Hospital, Shrewsbury and the Princess Royal Hospital, Telford to ensure that we maintain two vibrant hospitals.
- Every patient has the right to expect safe and high quality NHS care now and in the future. We are committed to ensuring that our patients and communities across Shropshire, Telford & Wrekin and mid Wales receive the very best healthcare within available resources.
- We will not make any decisions about the proposed options until after the public consultation has closed.
- We want to hear the views of the people living in Shropshire, Telford & Wrekin and mid Wales

## 11.0 Communication material

We will produce a range of communication materials to support the consultation process including:

- Full consultation document with a pull-out survey, including equality monitoring.
- A summary document with a pull-out survey. Both documents will be on the website and distributed to key outlets, for example hospitals, Council buildings, libraries, sport centres, GP practices and community venues.
- Accessible Easyread materials.
- Documents will signpost to how people can request materials in alternative formats and languages if required.
- Hard copy surveys for use at events
- Online survey.
- Posters and flyers for distribution.
- Electronic materials for partner websites.
- Displays and stands for use at public events and roadshows
- The consultation documents have been translated into the Welsh language in accordance with the Welsh Language Act.

### 11.1 Consultation documents and survey

The consultation documents and survey have been developed in conjunction with the Consultation Institute with feedback from all key stakeholders. Two workshops have been held with a reading group of patient representatives from Shropshire, Telford & Wrekin and mid Wales. They include:

- What the consultation is about and what is not included, in a clear and simple way
- Description of the proposed model of hospital care and the two options we are asking for people's views on
- Why change is needed
- Information about what hospital services will be at the Emergency Care and Planned Care site
- What these changes would mean for people and their families
- What impact these changes would have on patient choice
- How doctors, nurses, other staff and patients have been involved in reaching the options we are consulting on
- Our preferred option and how we reached this decision
- How to give your views and deadline for submitting responses
- Survey
- Equality monitoring and analysis
- The assurance process we have followed
- Improving out of hospital care in Shropshire and Telford & Wrekin
- How to access alternative versions
- When and how a decision will be made
- Next steps after consultation

## 12.0 Reaching the right audiences

We will use the following key channels to reach identified target audiences:

Target Audience	Delivery Method
Service users, general public, third sector	<ul style="list-style-type: none"><li>- Events</li><li>- Printed material</li><li>- Mailshots/posters etc.</li><li>- Media/social media</li><li>- Advertising</li></ul>

	<ul style="list-style-type: none"> <li>- Partner channels</li> <li>- Existing meetings and forums</li> <li>- Patient Reference Groups</li> <li>- Third sector organisations</li> <li>- Patient groups</li> <li>- Carers groups</li> </ul>
Joint HOSC, Health and Wellbeing Boards, Powys CHC	<ul style="list-style-type: none"> <li>- Meetings</li> <li>- Written briefings</li> </ul>
Staff (hospital and community health services staff, CCG and PTHB)	<ul style="list-style-type: none"> <li>- Bulletins and briefings</li> <li>- Staff events/displays</li> <li>- Intranet</li> </ul>
Healthwatch	<ul style="list-style-type: none"> <li>- Written briefings</li> <li>- Face-to-face meetings</li> </ul>
Elected members / Councillors/MPs/AMs	<ul style="list-style-type: none"> <li>- Written briefings</li> <li>- Face to face meetings</li> <li>- Public events</li> <li>- Website</li> <li>- Media/social media</li> <li>- Advertising</li> <li>- JOSC/Health and Wellbeing Board</li> </ul>
Local Professional Committees, PTHB Partnership Forum	<ul style="list-style-type: none"> <li>- Written briefings</li> <li>- Face to face meetings</li> </ul>
Media	<ul style="list-style-type: none"> <li>- See Future Fit Media Handling plan in Appendix 3</li> </ul>
Local GP Practices	<ul style="list-style-type: none"> <li>- Existing meetings</li> <li>- Intranet</li> <li>- Practice visits</li> <li>- Bulletins</li> </ul>

## 12.1 Capturing Feedback

- Feedback will be gathered from our public, stakeholder, staff meetings and events.
- Feedback through face to face contact will be recorded on data capture sheets.
- Feedback from surveys will be gathered electronically and via a FREEPOST response address.
- Comments cards will be captured in the same way as comments are gathered through the CCG websites
- All the intelligence will be evaluated.
- Information will be collated in line with Data Protection Act 1998.
- All the information we gathered will be analysed.
- We recognise that Powys CHC reserves the right to request copies of all comments received from Powys residents and will gather data to ensure this right can be met.
- Questions and Answers (Q&A): We will monitor feedback received via surveys at events and through the media and other mechanisms on an ongoing basis. We will update our Q&A and website and use other communications mechanisms to clarify any factual information or correct inaccuracies. Where required we will aim to respond to stakeholders directly, however our aim is use resource effectively to deliver thorough consultation activity.

## 12.2 Equality

To ensure the consultation process meets the requirements to evidence that due regard has been paid to their equality duties, all the consultation activity will be equality monitored routinely to assess the representativeness of the views gathered during the formal consultation process. Where it is not possible to gather such data, such as complaints and social media we will record any information provided. Half way through the consultation we will review responses so far and adapt our approach to seek more feedback from any groups that might not so far have fed back.

We will ensure that our consultation process targets protected groups as above using our community assets and relationship matrix via the voluntary sector and local authority colleagues. We will ensure all adjustments and arrangements are made to enable protected groups to participate fully in the consultation process. Advice will be sought to create accessible and easy read copies of the consultation, translations and language and British Sign Language (BSL) interpreters for events. In accordance with the Welsh language all materials will be translated into the Welsh language.

Once gathered the consultation data will be independently analysed. At a mid-point in the consultation, analysis will be reported to highlight any under-representation of patients who we believe could be potentially affected by any change in services, and if this is demonstrated further work will be undertaken to address any gaps.

Once complete the analysis will consider if any groups have responded significantly differently to the consultation or whether any trends have emerged which need to be addressed in the implementation stage. This data will also be used as part of the evidence to support the equality impact assessment process which will be carried out simultaneously.

## 12.3 Analysis of data and reporting of findings

Consultations can be sensitive and controversial. We have secured the services of an independent organisation, affiliated to the Consultation Institute to assist with the design of the consultation survey, undertake the collation and analysis of all data and feedback and provide content for the final report. We recognise that the format for responses will be varied and analysis may be required on data collected from a number of sources, this is not an exhaustive list:

- Hard copy and online surveys
- Qualitative feedback from comments cards and data capture forms
- Transcripts and minutes of meetings
- Letters and emails
- Petitions

At the mid-point review there will be an intermediate analysis (including Powys segmentation) to support the identification of further action during the remaining consultation period (including assessing whether such additional action can be completed adequately during the remaining period).

Once the formal consultation data input has taken place and the data analysed we will ensure that all the intelligence is captured into one report. We propose to share an early draft report with commissioners and in confidence with a stakeholder reference group including patients and members of voluntary, community and social enterprise sectors. This open and transparent approach will allow us to address any issues arising from feedback before finalising the report. In addition to the final report, a simple summary and easy read version will be produced. This report will provide a view from staff, public, patients, carers and key stakeholders on the proposals.

To provide additional assurance The Consultation Institute will be commissioned to provide an independent evaluation of the consultation as part of their role in quality assuring the consultation process.

Once finalised the report will then be received through internal reporting mechanisms and due consideration will be given to the findings to determine the next steps.

## 12.4 Decision-making process

Once the proposed 12/14 week formal consultation period has finished, the responses will be collated, coded and carefully analysed by consultation specialists, Participate Limited. They will then produce a report which summarises their findings. The CCGs will read this report and carefully consider all feedback.

A Joint Committee of Shropshire and Telford & Wrekin CCGs will consider the final report after the consultation period has ended as part of their decision-making process. The report will be made publicly available at around six to eight weeks after the consultation period has ended. This period is subject to confirmation, depending on the volume and complexity of the responses received. No decision will be taken until full consideration has been given to the responses and the analysis.

All reports on the decision-making process will be available on our website [www.nhsfuturefit.org](http://www.nhsfuturefit.org)

## 13.0 Pre-consultation stakeholder communications

<p>We will engage with the following key stakeholders either via letter or where possible face to face:</p> <ul style="list-style-type: none"> <li>• GP members and practices</li> <li>• Chairs of patient engagement groups at GP practices</li> <li>• Powys Teaching Health Board (PTHB)</li> <li>• Chairs of PTHB Health Forums in Powys</li> <li>• MPs and AMs</li> <li>• Councillors</li> <li>• Health and Wellbeing Board members (via chair)</li> <li>• Powys Community Health Council</li> <li>• Scrutiny panel members (via chair)</li> <li>• Bordering CCGs and Healthwatch- to inform them that a formal consultation is imminent and to seek their views on an informal basis</li> <li>• NHS staff and local authority staff</li> <li>• Professional bodies such as Royal Colleges</li> <li>• Unions and trade bodies</li> <li>• Healthwatch (via Chair)</li> <li>• Media (health correspondents where possible)</li> </ul>	<p>Pre- launch of formal consultation</p>
<ul style="list-style-type: none"> <li>• Press release for local media</li> <li>• Articles in partner newsletters, including voluntary sector, town council, parish council and NHS partner newsletters</li> <li>• Advert in relevant local newspapers</li> <li>• Launch of website, including consultation documents,</li> <li>• Messages on social media</li> </ul>	<p>Launch of consultation</p>

See Appendix 2 Stakeholder Matrix

## 14.0 Activity plan

Pre-Consultation activity	What's included	Additional notes
<b>Editorial of full consultation document</b> - <i>People fully understand the issues and solutions to enable them to have an informed say</i>	Project management of production of consultation document (Including: liaising with design team, client, account team, compiling, writing, editing, proofing, up to 3 rounds of amendments, up to 10 teleconferences or attending up to 4 meetings) Production, editing and proofreading of consultation summary document and evaluation report (Including up to 3 rounds of amendments).	In-house Future Fit team. 48 page document including 4-page survey Document currently in draft
<b>Editorial of summary consultation document</b> - <i>People fully understand the issues and solutions to enable them to have an informed say</i>	Drafting content, adhering to English and Welsh consultation guidance; testing with reading group; amends and sign off	In-house Future Fit team – 28 page document including 4-page survey. Document currently in draft
<b>Translation of documents into Welsh</b> - <i>ensuring information meets Welsh Guidance</i>	Required under Welsh Guidance.	Outsourced activity – supplier identified (Meta Translation)
<b>Development and print of an Easy read version of summary document</b> – <i>ensure consultation information is accessible</i>	Expert advice taken to ensure this meets best practice guidelines for documentation required in this format	Outsourced activity – supplier identified. (Easyread online) – costed at 1,000 print run
<b>Development of survey</b> - <i>tool to support stakeholders to feedback views on the consultation</i>	Up to 2 rounds of amends, design of survey, mechanism and hosting. Support to test out on patients	Outsourced activity – Participate Printing and distribution included.
<b>Design and print of (up to) 48 page consultation document</b> - <i>produce an engaging document which encourages stakeholders to participate</i>	Includes up to four design amends. Takes into account NHS branding guidelines, upload onto FF website. To include survey	Outsourced activity – potential suppliers identified.
<b>Design and print of 28 page summary document</b> - <i>produce an engaging document which encourages stakeholders to participate</i>	Includes up to four design amends. Takes into account NHS branding guidelines. Upload onto FF website	Outsourced activity – potential suppliers identified.
<b>Layout and print of (up to) 40 page Welsh consultation document</b> - <i>produce an engaging document which encourages stakeholders to participate</i>	Required under Welsh Guidance.	Outsourced activity – potential suppliers identified.
<b>Layout and print of 28 page Welsh summary document</b> - <i>produce an engaging</i>	Required under Welsh Guidance.	Outsourced activity – potential suppliers identified.



<i>document which encourages stakeholders to participate</i>		
<b>Event supporting materials</b> <i>- Design of 10 items of collateral needed to support the event.</i>	Up to 10 pull up banners based on the consultation infographics.	Outsourced activity – potential suppliers identified. For use at events, in situ for a period of time at venues such as libraries etc.
<b>Design of A4 posters</b> - <i>People are aware of all the activities and have supporting information to help inform their responses</i>	Design of posters (including up to four amends) supplied as a PDF or JPEG	Outsourced activity – potential suppliers identified.
<b>Design of A5 flyers</b> - <i>People are aware of all the activities and have supporting information to help inform their responses</i>	Design of flyers (including up to four amends) supplied as a PDF or JPEG	Outsourced activity – potential suppliers identified.
<b>Advertising of events</b> - <i>1/4 page in local free weeklies and paid-for publications and online to advertise local events.</i>	Includes design of advert and placement in papers.	Delivery through Future Fit team – resource to be identified - working alongside media outlets. Schedule of activity TBA with media outlets once approval to commence consultation is provided. (Costs vary throughout the year due to offers etc).
<b>Website development</b> - <i>Ensuring that all people can access information on the consultation on fill in an online survey</i>	Licence fee for hosting online platform, functionality for consultation, providing advice on what documents and evidence needs to be on the site, what the site will look like and how people will navigate it and website administration training.	Outsourced activity - potential suppliers identified. Content updates ongoing through consultation team by Future Fit team
<b>Public Exhibition events</b> <i>Local people are targeted in local venues providing access to information and experts to allow them to fill in survey.</i>	Planning 8 drop-in events with stands for people to meet clinicians,  Identifying clinicians/CCG reps (board members/senior managers)/programme executives to man the stand,	Future Fit team – resource to be identified.  Supported by existing in-house communications and engagement resource.
Local stakeholder events - e.g Parish Council Meetings.	Co-ordination of event planner to ensure we capture events attended, numbers attending and information /materials supplied.	Existing engagement activities delivered by the engagement leads in each CCG; briefings and materials for engagement leads in all public sector organisations in Shropshire, Telford and Wrekin to support their business as usual engagement activities.
<b>EQIA - hard to reach T&amp;W and Shropshire/ Powys</b> - <i>Those most impacted by potential changes have their voices heard and able to influence.</i>	Meetings with reach protected characteristics under Equalities Act 2010. Events summary report.	Future Fit in-house with support from partners
<b>QA of consultation – assurance process</b>		Outsourced activity. To be delivered by The Consultation Institute.

<b>Stakeholder briefings</b>	Coordination of activities of leaders of organisations to ensure questions and answers are captured and frequency/number of meetings can be reported on	In-house teams and Future Fit team – resource to be identified. Support from the Communications and Engagement workstream.
<b>Telephone Survey - Design, execute and reporting of telephone survey</b>	Includes purchase of phone numbers, design of telephone script, application and implementation of survey. Potential for time slot / booked appointments.	Outsourced activity – potential suppliers identified.
<b>Advertising strips (call to action) - Local readership of around 100k of people who would have access to information on the consultation encouraging them to get involved</b>	A run of strips, raising awareness and encouraging people to fill in survey	Future Fit team – resource to be identified.
<b>Social media schedule and advertising - Regular schedule of social media to target communications to specific stakeholders, keeping them engaged throughout the programme, encouraging debate, signposting to survey and events and more information.</b>	Provide a schedule of creative messages (including any hashtags),	In-house team. In-putting of social media schedule, monitoring of responses, reacting to stakeholder comments and reporting on FF activity.  Future Fit team – resource to be identified.  Support from the Communications and Engagement workstream.
<b>Communications schedule delivery – essential PR for print, broadcast and online media, forums and platforms</b>	Communications activities to include pro-active and reactive activity	Future Fit team – resource to be identified Outsourced activity for out of hours media support.
<b>Miscellaneous materials</b>	Video to be shown at Public Exhibition events with English/ Welsh subtitles plus short video clips for social media	Contingency to support social media, engagement and communications activities
<b>Data input – capturing feedback</b>	Capturing feedback from all non-web based surveys and letters	Outsourced activity – to be carried out by external company Participate Ltd
<b>Post consultation analysis - Coding of all responses with themes</b>	Analysis and coding of feedback. Feedback report and summary feedback report	Outsourced activity – to be carried out by external company Participate Ltd
<b>Drafting of final consultation report</b>		Outsourced activity – to be carried out by external company Participate Ltd

## 15.0 Timeline for consultation

The dates below detail the recent circulation of consultation plan and documents:

### Meeting

### Dates

Future Fit Programme Board – circulated draft consultation plan	31 July 2017
Joint Committee - circulated draft consultation plan and documents	10 August 2017
Telford & Wrekin CCG Board - circulated draft consultation plan and documents	15 August 2017
Shropshire CCG Board – circulated draft consultation plan and documents	16 August 2017
Telford & Wrekin CCG Board - circulated draft consultation plan and documents	12 September 2017
Powys CHC - circulated draft consultation plan and documents	12 September 2017
Shropshire CCG Board – circulated draft consultation plan and documents	13 September 2017
Shropshire Health & Wellbeing Board - circulated draft consultation plan & documents	14 September 2017
Joint HOSC – circulated draft consultation plan and documents	25 September 2017
Telford & Wrekin CCG Board - circulated draft consultation plan and documents	10 October 2017
Shropshire CCG Board – circulated draft consultation plan and documents	11 October 2017
Future Fit Programme Board - circulated draft consultation plan and documents	13 November 2017
Telford & Wrekin CCG Board - circulated draft consultation plan and documents	14 November 2017
Shropshire CCG Board – circulated draft consultation plan and documents	15 November 2017

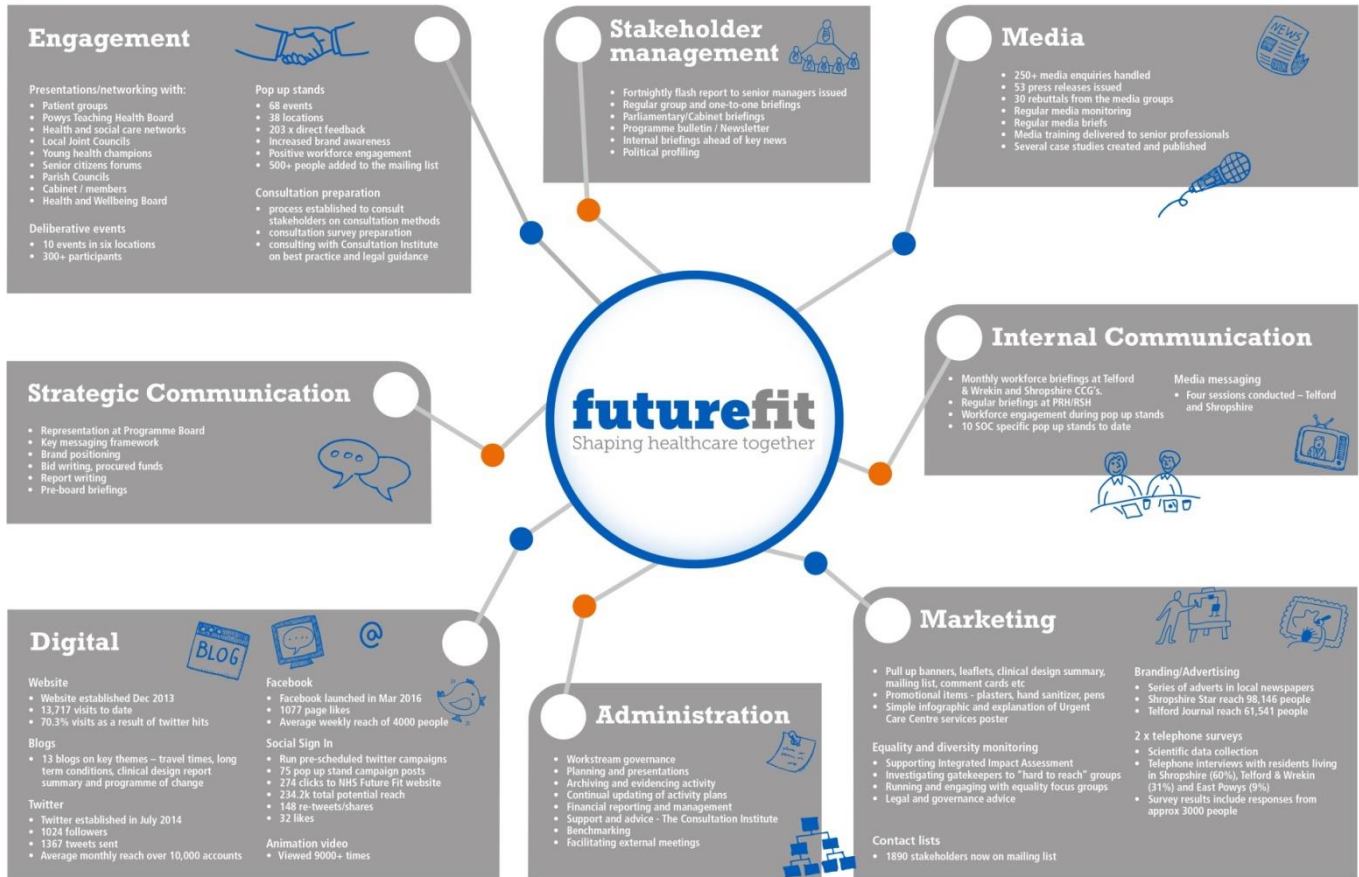
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### The documents will be circulated at the following upcoming meetings:

Joint HOSC – draft consultation plan and documents to be circulated	5 December 2017
Telford Health & Wellbeing Board	6 December 2017
Telford & Wrekin CCG Board	12 December 2017
Powys CHC Full Council	12 December 2017
Shropshire CCG Board	13 December 2017
Start of formal public consultation	TBC
Deliberation and analysis of findings	TBC
Joint Committee of Shropshire and Telford & Wrekin CCGs (decision-making)	TBC

# 16.0 Appendices

## Appendix 1: Engagement Mind Map



July 2014 – November 2016

**NB: Further updating required for final draft to incorporate all pre-consultation engagement**

## MPs / AMS / Local Councils

- Shrewsbury and Atcham (Con) MP: Daniel Kawczynski
- North Shropshire (Con) MP: Owen Paterson
- Telford (Con) MP: Lucy Allen
- The Wrekin (Con) MP: Mark Pritchard
- Ludlow (Con) MP: Philip Dunne
- MP Glyn Davies (Con) for Montgomeryshire
- MP Chris Davies (Con) Brecon and Radnorshire
- MP Christopher Davies (Con) Brecon and Radnorshire
- MP Glyn Davies (Con) Montgomeryshire
- AM Russell George (Con) Montgomeryshire Wales
- AM Kirsty Williams (Lib Dem) Brecon and Radnorshire
- AM Joyce Watson (Labour) Mid and West Wales
- AM Eluned Morgan (Labour) Mid and West Wales
- AM Simon Thomas (Plaid Cymru) Mid and West Wales
- AM Neil Hamilton (UKIP) Mid and West Wales
- AM Russell George (Con) Montgomeryshire
- Telford & Wrekin Council (Lab) Leader: Shaun Davies
- Shropshire Council (Con) Leader: Malcolm Pate
- Shropshire Association of Local Councils (SALC)
- Powys County Council (Ind) Leader Barry Thomas
- Shropshire Local Joint Committees
- Telford & Wrekin Parish Council Forum
- Town and Community Councils Powys

## Regulators / Scrutineers

- Care Quality Commission
- Audit Commission
- NHS Improvement
- Powys CHC
- Shropshire Health and Wellbeing Board
- West Midlands Clinical Senate
- Telford & Wrekin Health and Wellbeing Board
- Telford & Wrekin Council and Shropshire Council Joint Health Overview and Scrutiny Committee
- NHS England Gateway
- NHS England Midlands and East
- Shropshire Healthwatch
- Telford & Wrekin Healthwatch
- Welsh Government
- Powys Public Service Board and Regional Partnership
- Local Government Ombudsman Board

## Other Opinion Formers

- Media**
  - Central News
  - Midlands Today
  - BBC Wales
  - ITV Wales
  - S4C
  - Telford Live
  - Shropshire Live
  - BBC Radio Shropshire
  - County Times
  - Radio/Online/Print/ Television
  - Shropshire Star
  - Local Free papers including: Shrewsbury Chronicle and Telford Journal
- Patient Groups**
  - Shropshire Patient Group
  - Telford & Wrekin Health Roundtable
  - Patient Participation Groups
  - Shropshire Public and Patient Engagement Committee
  - Health Forums in Wales
  - PTHB Stakeholder Forum
- Campaign Groups**
  - Shropshire Defend Our NHS
  - People First, Telford
  - Shropshire Fights Back
  - PTHB Stakeholder Forum
- Voluntary Sector**
  - Shropshire Voluntary Sector Assembly
  - Carers Centre Telford
  - Listen not Label
  - Age UK
  - Telford & Wrekin Senior Citizens Forum
  - Shropshire Youth
  - Shrewsbury Signal
  - Shropshire Seniors
  - IMPACT
  - Rights and Fairness Telford (RAFT)
  - Carers Partnership Board
  - Telford & Wrekin CVS
  - Shropshire Youth Parliament
  - Shropshire Young Health Champions
  - Telford Young Health Champions
  - League of Friends in all hospitals
  - Shropshire Deaf & Hard of Hearing Forum
  - Mental Health Forum Shropshire
  - Mental Health Forum Telford
  - Powys Association of Voluntary Organisations (PAVO)

**NHS Future Fit Stakeholder map**  
 NHSFUTUREFIT.ORG  
 facebook.com/nhsff  
 @NHSFUTUREFIT

## Providers

- Primary Care**
  - 60+ GP practices
  - Shropdoc (out of hours GP services)
  - Local Medical Council
  - Shropshire CCG
  - Telford and Wrekin CCG
  - Local Pharmaceutical Council
  - Powys Teaching Health Board
  - North Powys GP Cluster
- NHS Organisations**
  - Shrewsbury and Telford Hospital NHS Trust
  - Shropshire Community Health NHS Trust
  - Powys Teaching Health Board
  - South Staffordshire and Shropshire Healthcare NHS Foundation Trust
  - Robert Jones and Agnes Hunt Orthopaedic Hospital Foundation Trust
  - West Midlands Ambulance Service NHS Foundation Trust
  - Welsh Ambulance Services NHS Trust
  - Betsi Cadwaladr University Health Board
  - Mid Wales Healthcare Collaborative
- Neighbouring NHS Organisations**
  - Wye Valley NHS Trust
  - Royal Wolverhampton NHS Trust
  - Mid Staffordshire NHS Foundation Trust
  - University of North Staffordshire NHS Trust
  - Hwyl Dda University Health Board

## Appendix 2: Key Stakeholder Matrix

## Appendix 3:

### Future Fit Media Handling Plan

#### Context:

This document sets out the media handling plan to support the pending launch of the NHS Future Fit Programme's public consultation process.

Over the past three months, a number of key milestones have been reached required as part of a rigorous scrutiny and assurance process to ensure and provide assurance to those responsible for the delivery of health services to the people of Shropshire, Telford & Wrekin and mid Wales.

The NHS Future Fit Communications and Engagement Team will deliver a number of activities post, during and post consultation which will provide opportunities to engage with the media.

#### Objectives:

- To reassure the public that decisions are being clinically led, have gone through a robust assurance process and that no final decisions will be made, until a public consultation has taken place.
- To broaden our reach and increase engagement with the general public
- To raise awareness about the opportunity to take part in the public consultation.

#### Approach:

It is proposed that a 'phased' approach is adopted to compliment the stages of the public consultation process. Currently we are in a pre-consultation phase (phase one).

During this phase, the general approach with the media has been to provide reactive comment if asked.

When a launch date for public consultation can be agreed, phase two, the general approach with the media will be proactive. This will continue as the public consultation progresses over the 14 week period. During the evaluation period, phase three, there will be a number of opportunities to engage with the media to support the Programme.

#### Phase One pre launch preparation:

Regular briefings are held where local journalists are invited to attend to engage with them and keep them informed about developments within the local health economy.

Information about NHS Future Fit has been provided at these briefings to date.

A meeting has been held with BBC Radio Shropshire to plan for launch publicity whilst a meeting will be held with Shropshire Star to offer the same approach.

## **Media training/coaching**

Key spokespeople have been identified and will be offered additional support as required/requested.

### **Key messages to support launch:**

- Over the last four years we have listened to and involved thousands of local people and together we have developed proposals that we believe will deliver improvements to how patients are cared for at both the Royal Shrewsbury Hospital, Shrewsbury and the Princess Royal Hospital, Telford to ensure that we maintain two vibrant hospitals.
- Every patient has the right to expect safe and high quality NHS care now and in the future. We are committed to ensuring that our patients and communities across Shropshire, Telford & Wrekin and mid Wales receive the very best healthcare within available resources.
- We will not make any decisions about the proposed options until after the public consultation has closed.
- We want to hear your views/now time for people living in Shropshire, Telford & Wrekin and mid Wales to have your say

### **Launch day media briefing pack:**

A media briefing pack will be prepared and distributed on the day that the public consultation announcement to launch is made:

The pack will contain:

- Press release about the main announcement from both CCGs
- Dates and details of the public events
- Copies of the final consultation documents
- Background information (inc what the options are and timeline)
- Q&A document
- PDF of Options Artwork (for online outlets)
- Link to CCG Leads video – script?
- Contact information for C&E Team
- An offer of arranging interviews with key spokespeople

Opportunities for broadcast media will be explored immediately prior to launch and at the time public consultation goes live. BBC Radio Shropshire has already made a request to interview a key spokesperson/spokespeople when an announcement is made. The broadcaster would also like to attend and cover the first public exhibition event.

We will distribute the press release widely to local, regional and national media and invite the media to contact us to obtain further comment from key spokespeople.

## **Social Media**

NHS Future Fit Twitter and NHS Future Fit Facebook page will be relaunched at the time the public consultation goes live.

Twitter and Facebook will be used to raise awareness and signpost to the website for further information with pre-scheduled tweets providing a framework to build engagement.

### **Advertising**

A plan is being developed to support raising awareness about the public consultation and the programme of events to the general public.

### **Phase Two: during consultation**

There will be a number of opportunities to engage with the media during the consultation process which will continue to keep interest levels high and broaden our reach.

These will be provided by engagement in events and with local groups and organisations in the region.

At mid-point, an evaluation of engagement work will take place and this will provide us with insight and guidance about where we need to target our activities most in order to reach seldom heard groups and other sectors of the community who may not have responded to the call to action to complete the public consultation survey.

### **Phase Three: post consultation and evaluation**

Once the public consultation period has ended, a press release will be issued from both CCGs to thank people for taking part and provide information about what the next steps are.

### **Monitoring and evaluation**

During all phases of the public consultation process, the Communications and Engagement Team will continue to monitor and evaluate media coverage about NHS Future Fit.



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