



**Integrated
Care System**
Shropshire, Telford and Wrekin



**Shropshire, Telford
and Wrekin**

Shrewsbury Health and Wellbeing Hub

**Shropshire Health and Adult Social Care Overview and
Scrutiny Committee**

31 October 2022

Structure of report

1) Feedback – You said, we did

2) Engagement recap

3) What has changed since the last update at HASC

4) Options other than the hub

5) Site options

6) Next steps

7) Project timelines

8) Statutory duties



Our engagement has told us that the public's main concerns about this development are:-

- A lack of information in relation to other options than the Shrewsbury Hub that have been considered and discounted
- The preferred site at Oteley Road and patient ability to get to it particularly on public transport
- A lack of information and transparency of decision making, particularly in the early stages of the project
- When is the formal consultation going to start and what is to be consulted on



You said:

There is a lack of information in relation to other options than the Shrewsbury Hub that have been considered and discounted

We did:

- The programme team are now working with the Stakeholder Reference Group to develop and evaluate other options
- A long list of 14 options were identified from earlier public engagement, which include do nothing, extend existing buildings, six new builds, different configurations and the Cavell hub option



The presentation and evaluation of these options was shared with the Stakeholder Reference Group on 6th October

You said:

The preferred site at Oteley Road and patient ability to get to it particularly on public transport is a concern

We did

- The programme team is now reviewing all previous site options and re-visiting alternative site locations
- The options appraisal and potential site locations, including a preferred option will be worked through with the Stakeholder Reference Group during October and November



You said:

There is a lack of information and transparency of decision making, particularly in the early stages of the project

We did:

- We acknowledge this
- We are revisiting the options appraisal and site locations
- The stakeholder reference group has been established and have an Important role of improving public engagement/ involvement and transparency



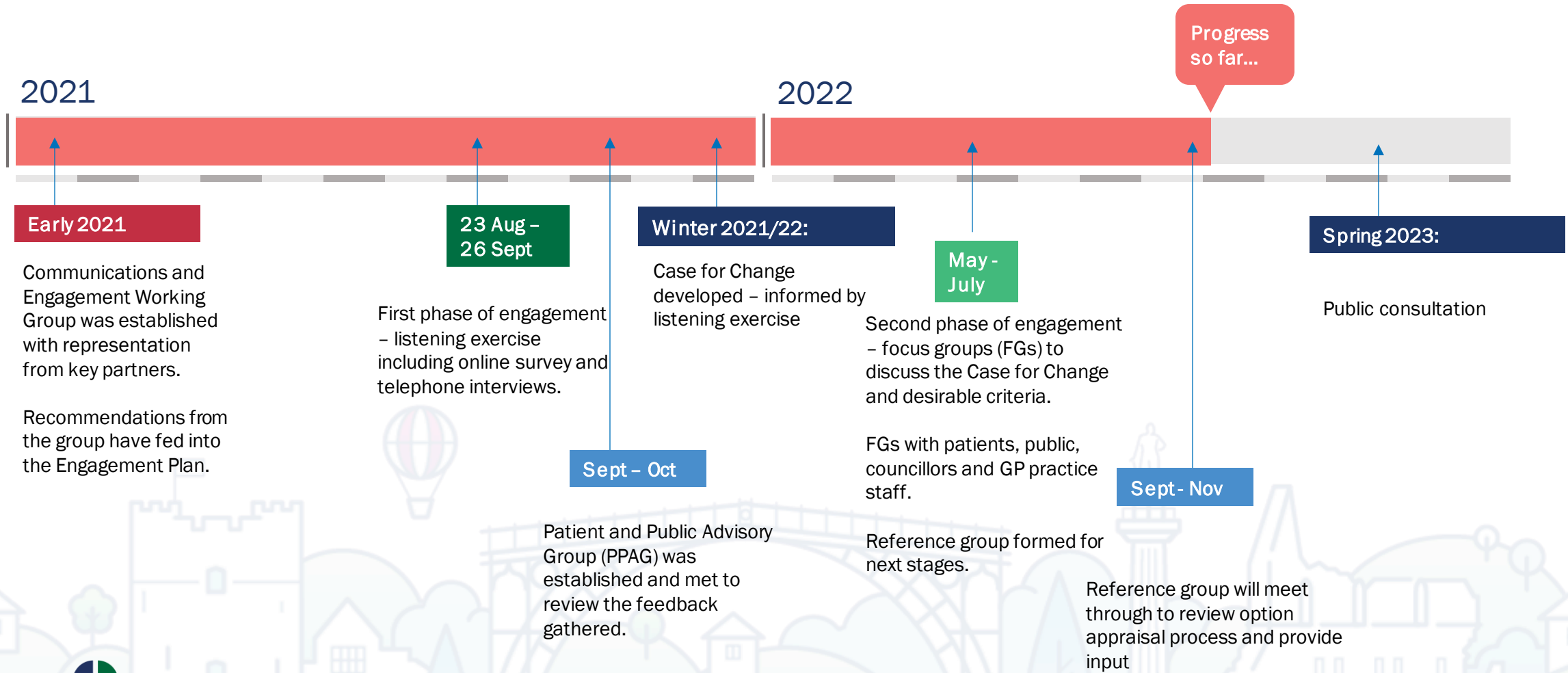
Programme of community engagement continues

Stakeholder Reference Group Membership

- Patients (with a range of protected characteristics)
- Practice managers
- A member of the practices' Patient Participation Group (PPG)
- 24 Shropshire councillors
- A Healthwatch representative
- The local LPC (Local Pharmaceutical Committee)
- VCSE
- Energize (who work with young people)
- Age UK
- Shropshire Council reps (working in engagement and feedback teams)



Engagement timeline



Recap: Phase 1 – August/September 2021

Listening exercise

- 1,287 responses were received
- Key themes that patients expressed for the hub were:
 - Easy to book appointments - convenient opening times, short waiting times, face to face options
 - High quality of care - clinical expertise, friendly staff, additional health and care services
 - Good access - close to home/work/study, easy to get to, good parking and transport links.
- Favoured services included: phlebotomy, diagnostics, access to rehabilitation and treatment, community diagnostics and imaging, pharmacy services and other primary care services.



Recap: Phase 2 – May to July 2022

Case for change

- Six focus groups were held in May 2022– four online and two face-to-face with 48 attendees across the sessions.
- A further six focus groups were then held in July and August 2022. Two with GP surgery staff, one with a local community organisation and three with elected members.
- Participants were asked to discuss their experiences of general practice, what they thought about the aims and benefits of the hub, what services they would like to see in the hub, and whether the Programme Team should consider anything else.



Comms and engagement activity since the last HASC meeting - Activity July –September 2022

- Online engagement meetings with General Practice staff from all practices
- Face to face meetings with the Patient Participation Groups from practices
- Online focus group meetings with elected members
- Face to face informal engagement with members of the Shrewsbury Veterans Group
- Establishment of a stakeholder reference group - output of the appraisal for other options than the Shrewsbury Hub shared
- Project Team and GPs attended the Town Council public meeting to answer questions on 4th October
- A letter distributed to all patients of the practices involved in the programme
- Publication of Project Initiation Document (PID) and original site options appraisal document
- Regular updates and posts on social media

Engagement in Options and Configuration of Services

Public and patients *have* influenced...

The long list of options other than the hub and the criteria for the appraisal

The long list of potential sites and the criteria for site options appraisal 2022

The potential future service model

Public and patients *will* influence ...

The focus for public consultation will be the potential future service model/configuration of services co-locating with the 6 practices

Technical decisions...

Site options appraisal assessment

Preferred site location



Evaluation of Potential Options for GP Practices



Options other than the Hub – Appraisal Process

- The process the Programme Team adopted to develop the essential criteria was informed by national public sector guidance '**HM Treasury: The Green Book 'Central Government Guidance on Appraisal and Evaluation 2022'**'
- 9 essential criteria were developed under 4 appraisal headings taken from the national guidance informed by feedback from the public engagement
- 14 scenarios were on the long list, informed by the feedback from the public engagement. These included do nothing, extend existing, 6 individual new builds, the Shrewsbury Health and Wellbeing Hub



Options other than the hub - the essential criteria

1. Will the proposal improve patient choice ?
2. Will the proposal improve patient access?
3. Will the proposal provide practices with sustainable with fit for purpose premises?
4. Does the proposal fit with national and ICB objectives?
5. Is the proposal value for money?
6. Does the proposal allow practices to meet predicted growth in demand?
7. Do we have the workforce to deliver it?
8. Does the proposal improve recruitment and retention?
9. Is the proposal affordable?

Options other than the hub - summary outcome of options appraisal

	Does the option meet the essential criteria to go forward to the medium/shortlist?			
Options/possible scenarios	Patient choice, access, fit for purpose premises, strategic fit	Value for Money	Meets predicted growth, do we have the workforce	Affordability
Business As Usual/Do Nothing	No	No	No	Yes
Do Minimum/Extend existing practice premises	No	No	No	No
6 Individual New Builds	Yes	No	Yes	No
3 new builds (2 practices per build)	Yes	No	Yes	No
New building single site Shrewsbury Health and Wellbeing Hub	Yes	Yes	Yes	Yes
New building single site Shrewsbury Health and Wellbeing Hub plus maintain a virtual GP service offer in the vicinity of the relocating practice premises	Yes	No	Yes	No

In line with our statutory responsibility only viable options can go forward to NHSE for approval

Options appraisal – Site location



Site options appraisal process

- Oteley Road was the preferred site from the 2021 options appraisal
- Based on public feedback and the progress of the project, the Project Team is now reviewing all previous site options and re-visiting alternative site locations
- The options appraisal and potential site locations, including a preferred option, is being worked through by the project team and the outcome will be shared with the Stakeholder Reference Group in November
- The options appraisal process will involve 2 stages 1) to get from a long list to a short list and 2) to prioritise the shortlist to identify a preferred option



Site options appraisal 2 stage process

Stage 1 technical criteria applied to take the long list to a shortlist

- Does the site meet the minimum area requirement?
- Will the land be available in the project timescales?
- Are there any significant site constraints that can be identified?



Site options appraisal 2 stage process

Stage 2 technical criteria to prioritise the shortlist to identify a preferred option

- The site location should be well located and in close proximity to serve the patients of the 6 participating practices
- The site should be well located and in close proximity to the strategic housing growth areas
- The site should be easily accessible by sustainable travel methods e.g. on foot, cycle and by public transport (on existing primary bus route, park and ride or to a proposed route in conjunction with Shropshire Council) and also by car
- The site should allow for some expansion of this space for future partner services
- The building plan is flexible in terms of the number of stories which will impact upon the footprint subject to planning constraints



Site options appraisal 2 stage process

Stage 2 technical criteria to prioritise the shortlist to identify a preferred option

- The site should be free of major planning constraints
- The site should have 'clean title' i.e. free from any insurmountable restrictive covenants
- The site should be available to acquire i.e. public sector asset disposal, on the open market, sale by private treaty or can be acquired via CPO
- The site should have access to statutory utilities and adopted highways, existing or to be created
- The site should be located within or near to an area in Shrewsbury which has the high levels of overall deprivation



Next steps



Future engagement activity – Oct to Dec 2022

- Face to face meeting with the Patient Participation Groups from practices
- Online and face to face Stakeholder Reference Group Meetings
- Online and face to face meetings with Shrewsbury Community Connector
- Targeted engagement with LGBTQ+ and Ageing Shrewsbury community
- Engagement with SANDS (safer ageing, no discrimination) network
- Engagement with Dementia Friendly Churches Network
- Engagement with Dementia Action Alliance
- Men's Health Week activity in Shrewsbury with general public attendance



Activity required to support public consultation

- Complete Integrated Impact Assessment (which will include the travel impact)
- Present impact assessment and consultation plans for assurance to NHS STW's Equality and Involvement Committee
- Complete Pre-Consultation Business Case (PCBC)
- Prepare a communication and engagement strategy and operational plan
- Use integrated impact assessment findings to further inform stakeholder mapping and engagement with protected groups to identify potential equality issues



When is the formal consultation going to start and what is to be consulted on?

- The anticipated start date for the public consultation is March/April 2023 for 8 weeks with mid point review to assess reach, response rates, and gaps. This will help the team to undertake targeted work if there are gaps in locality responses or demographic groups
- The consultation will be on the potential future service model/configuration of services co-locating with the 6 practices
- The NHS STW will involve service users (existing and future), their carers and their representatives (if there are any) with an opportunity to consider the proposal whilst it is remains at a formative stage.



Programme and Consultation Timelines



Formal consultation will proceed when options appraisal has been concluded and pre-consultation business case (PCBC) has been approved by NHS England, Health & Adult Social Care Overview and Scrutiny (HASC) and NHS Shropshire Telford and Wrekin Integrated Care Board (NHS STW ICB)

Consultation and Statutory Duties



Statutory Duties

The statutory duty to involve the public that applies to ICBs is contained at section 14Z45 of the National Health Services Act 2006 (the “NHS Act”) as amended by the Health and Care Act 2022

The wording of the statutory duty is not prescriptive about the form that public involvement should take, the duty is to involve the public, **“whether by being consulted or provided with information or in other ways.”**

- NHS STW has sought legal advice which has confirmed that involvement was not required to comply with the statutory duty to involve the public prior to submission of the Project Initiation Document (PID). It was sufficient to make arrangements to involve the public in the development and consideration of the proposal whilst it remained at a formative stage.
- The PID is an internal document which was shared at the project working group meetings (including NHS and Council representatives). All parties were invited to submit feedback on the draft PID (on 10th February 2021) prior to submission for NHSE/I and Primary Care Commissioning Committee sign off which took place on 28 February 2021.
- The Gunning Principles designed by Stephen Sedley QC confirmed consultation is only legitimate when the four Gunning Principles have been met

NB The duty at s.14Z45 NHS Act is near identical to that which preceded it and which applied to CCGs. The only significant difference between them is that the duty at s.14Z45 contains an express reference to involving carers and representatives of service users.

Our approach to meet the 4 Gunning Principles

Gunning 1 -The consultation must be at a time when proposals are still at a *‘formative stage’*

Decisions are not already made, or predetermined, by the decision makers and that Public bodies need *“to have an open mind, this does not mean an empty mind.”*

- A legal review confirmed arrangements to involve the public in the development of the proposals is at *“formative stage”*.
- Legal advice confirmed ICB/CCG approach is consistent with the necessary requirements for a service change of this scale.
- Patients/public were involved in the development of the proposal prior to the GP practices committing to relocate to the Hub.
- The programme remains at a formative stage and planning is taking place for a formal public consultation with key partners including the Stakeholder Reference Group.



Gunning Principles 2, 3 and 4

Gunning 2 - . There is sufficient information to give '*intelligent consideration*' The information provided must relate to the consultation and must be available, accessible, and easily interpretable for consultees to provide an informed response

- This will form a key part of all consultation documents to comply with Gunning 2. The Stakeholder Reference Group will inform and influence the content

Gunning 3 - there is adequate time for consideration and response There must be sufficient opportunity for consultees to participate in the consultation.

- An 8 week consultation is planned - mid point analysis will be built in to review responses, geography, demographics and amend our approach as required

Gunning 4 - '*conscientious consideration*' must be given to the consultation responses before a decision is made Decision-makers should be able to provide evidence that they took consultation responses into account

- This will be evidenced and demonstrated in decision making and public feedback documents



Considerations.....



1

Do you feel fully informed on the current position? If not, what else can we provide to you prior to the next meeting?

2

Are there any members of the programme team HASC would like to attend future meetings to broaden out the discussion?

3

How can we strengthen our comms and engagement with HASC as we progress to the next phase of the programme?

**Thank you and
questions**

