



Improving healthcare together 2020 – 2030

Photo report of discussion events





About this document

- Between 24th July and 2nd August 2018 the Improving Healthcare Together programme held 6 discussion events, 2 in each of the CCG areas it covers: Surrey Downs, Merton and Sutton. You can read more about the IHT programme here: <https://improvinghealthcaretogether.org.uk>
- The events were independently facilitated by a team from Traverse, an employee-owned business that helps organisations like the CCGs listen.
- This report contains photos of all notes captured by the Traverse team, or directly by participants, at the events. It provides transparency about what was said at each event. The events were a mix of table discussions and questions and answers, so the notes photographed are in a variety of formats. They are grouped where possible by the issues addressed in the discussion.
- As well as this record Traverse will produce an independent report which summarises what was said which will be shared with everyone who attended the events, as well as being published on the programme website.





Date	Location	CCG	Pages
23 rd July 2018, 1PM	Epsom Methodist Church	Surrey Downs	4 - 46
24 th July 2018, 1.30PM	Trinity Church	Sutton	47-72
25 th July 2018, 6PM	Trinity Church	Sutton	73-86
26 th July 2018, 2PM	Chaucer Centre	Merton	87-114
26 th July 2018, 6PM	Epsom Methodist Church	Surrey Downs	115-182
2 nd August 2018, 6.30PM	Tooting & Mitcham Community Football Club	Merton	183-207





26th July 2018, 2PM

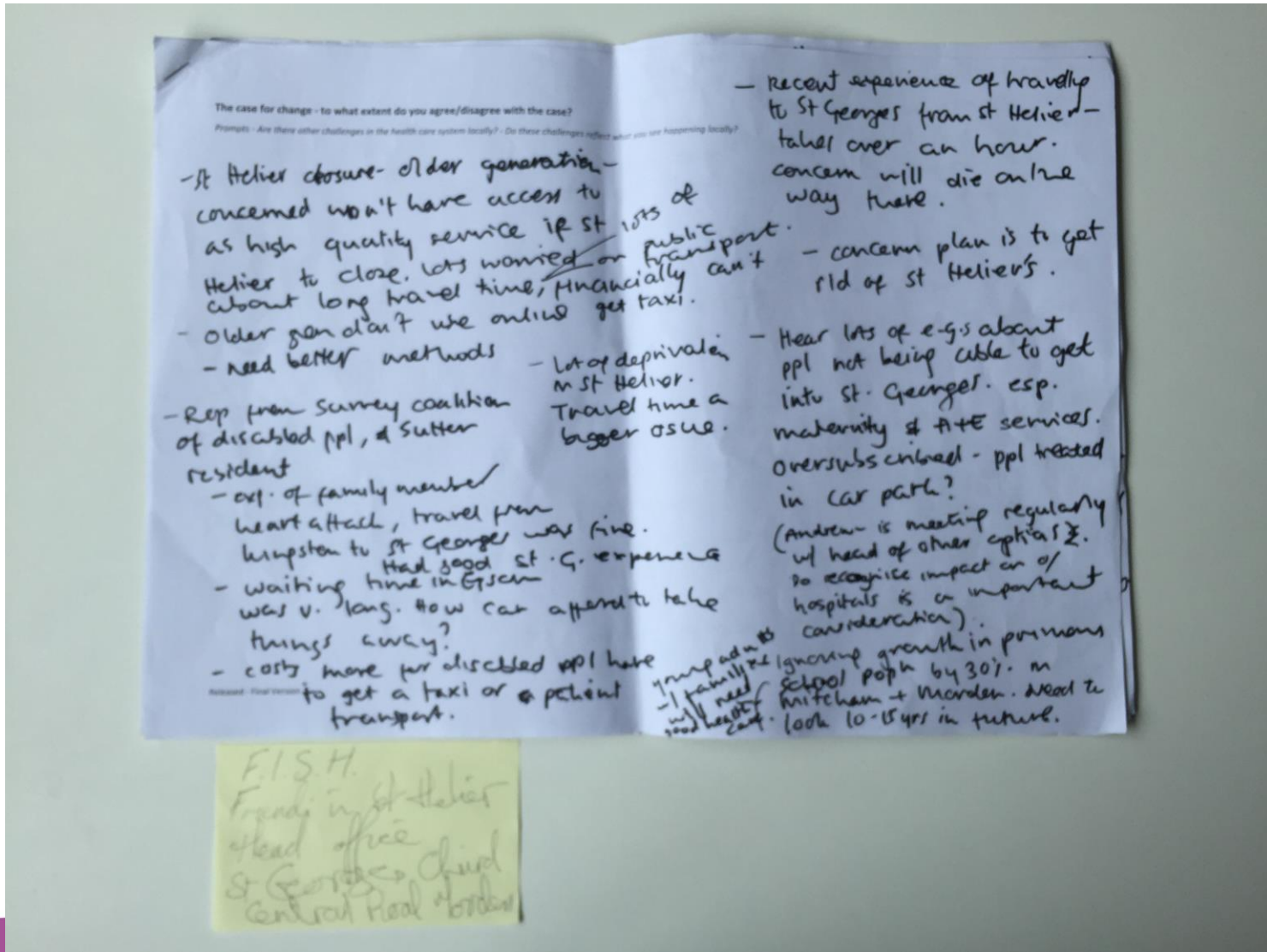
Chaucer Centre

Merton CCG



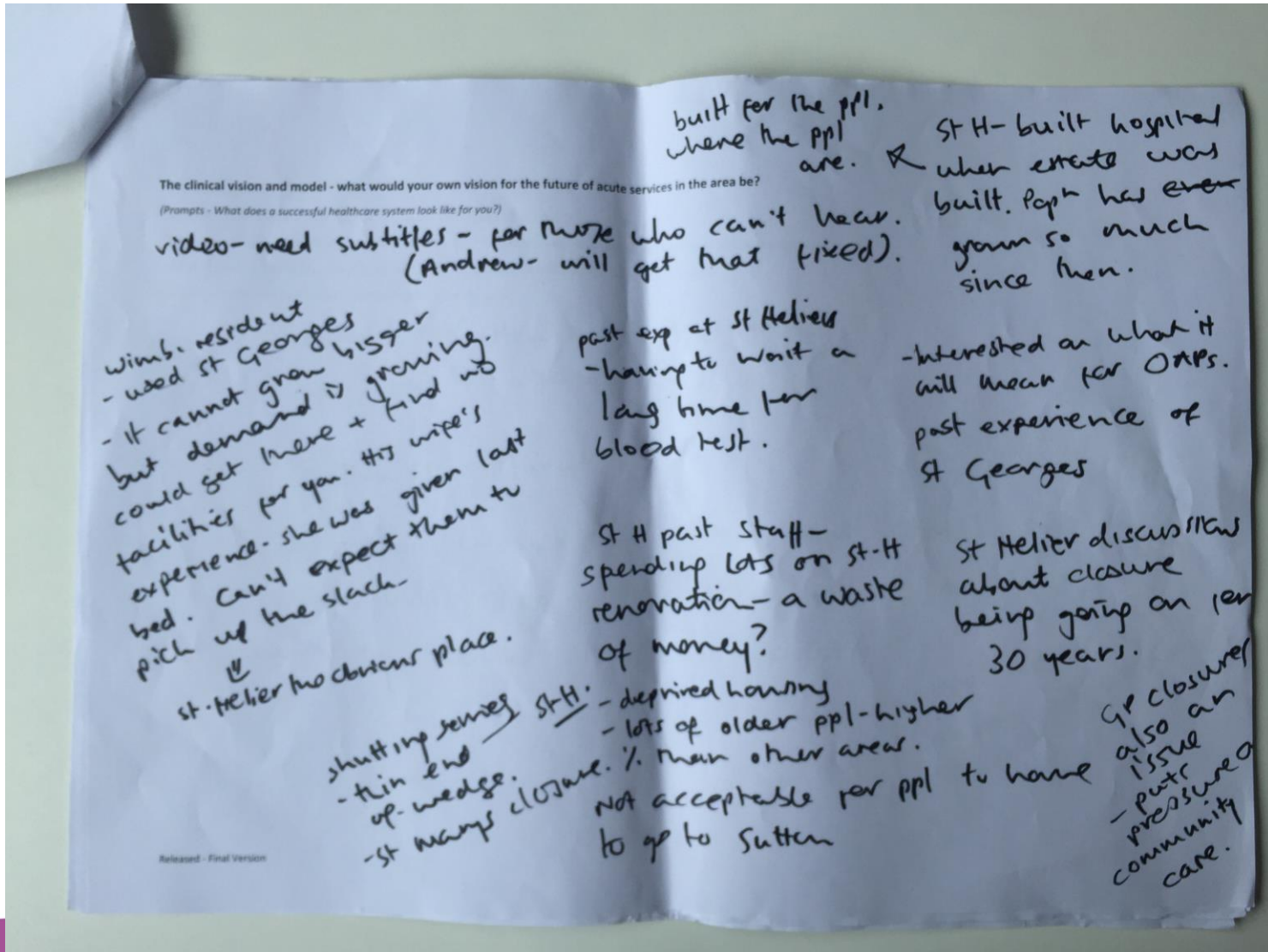


Comments on the case for change

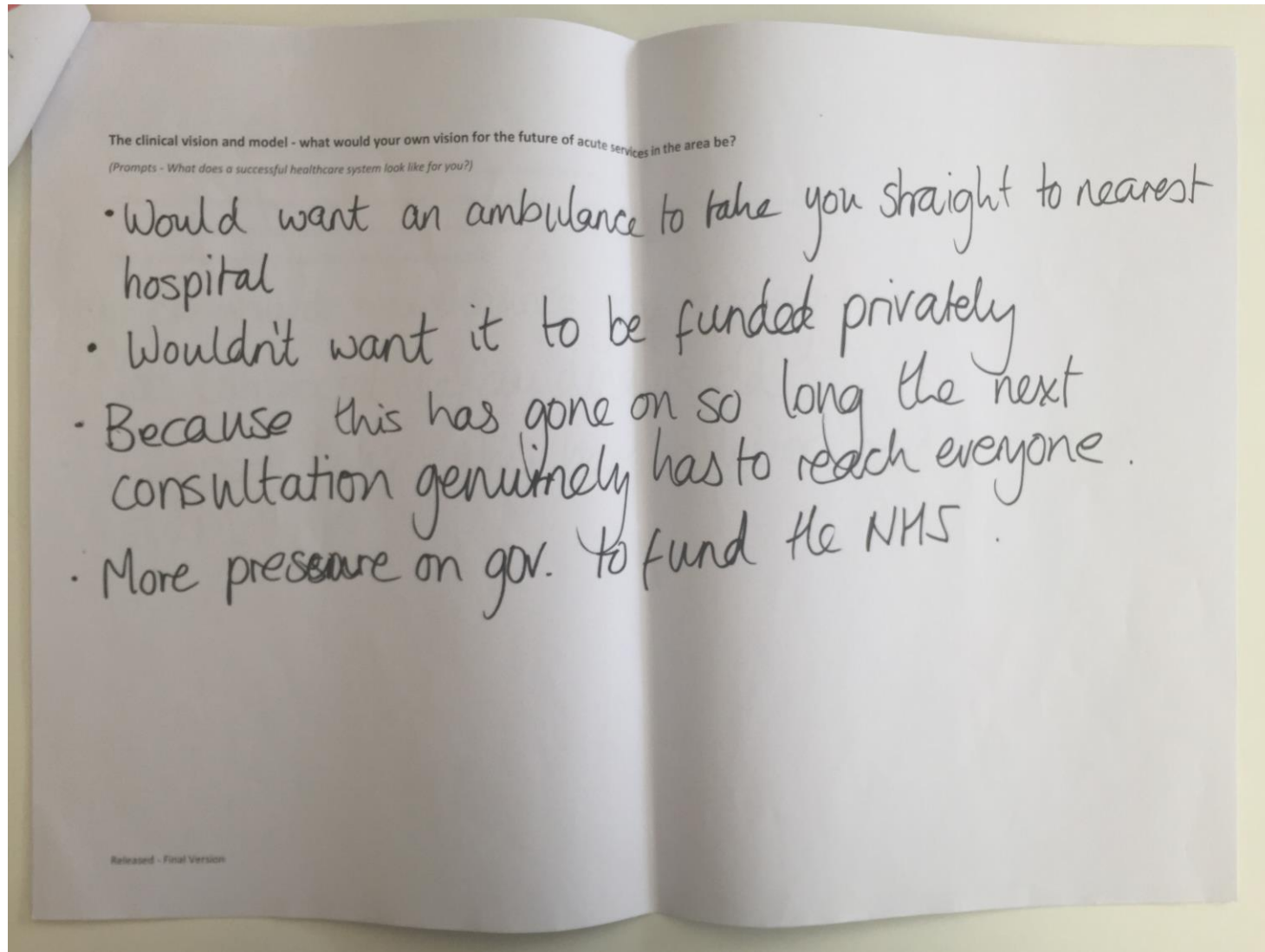




Comments on the clinical vision and model

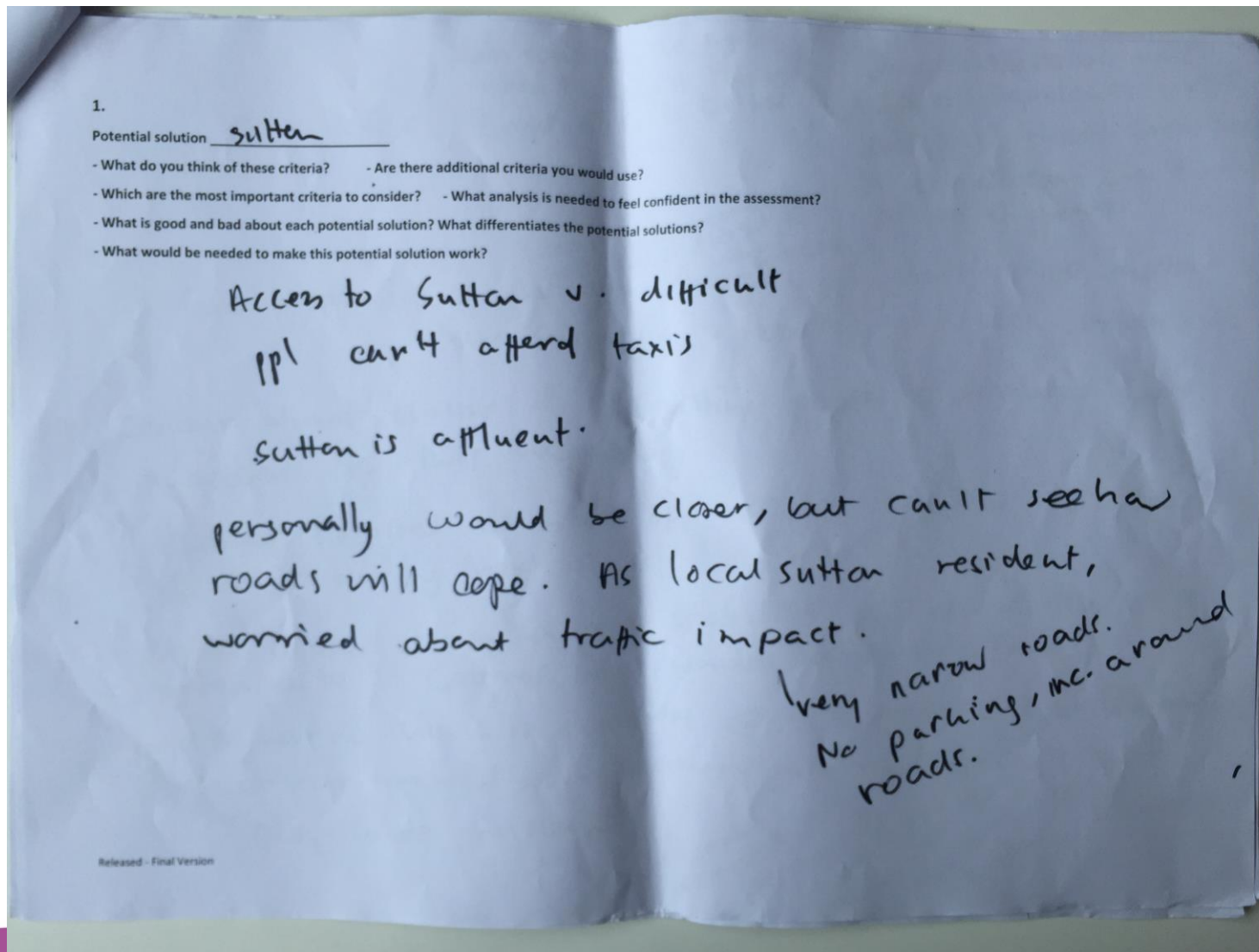


Comments on the clinical vision and model

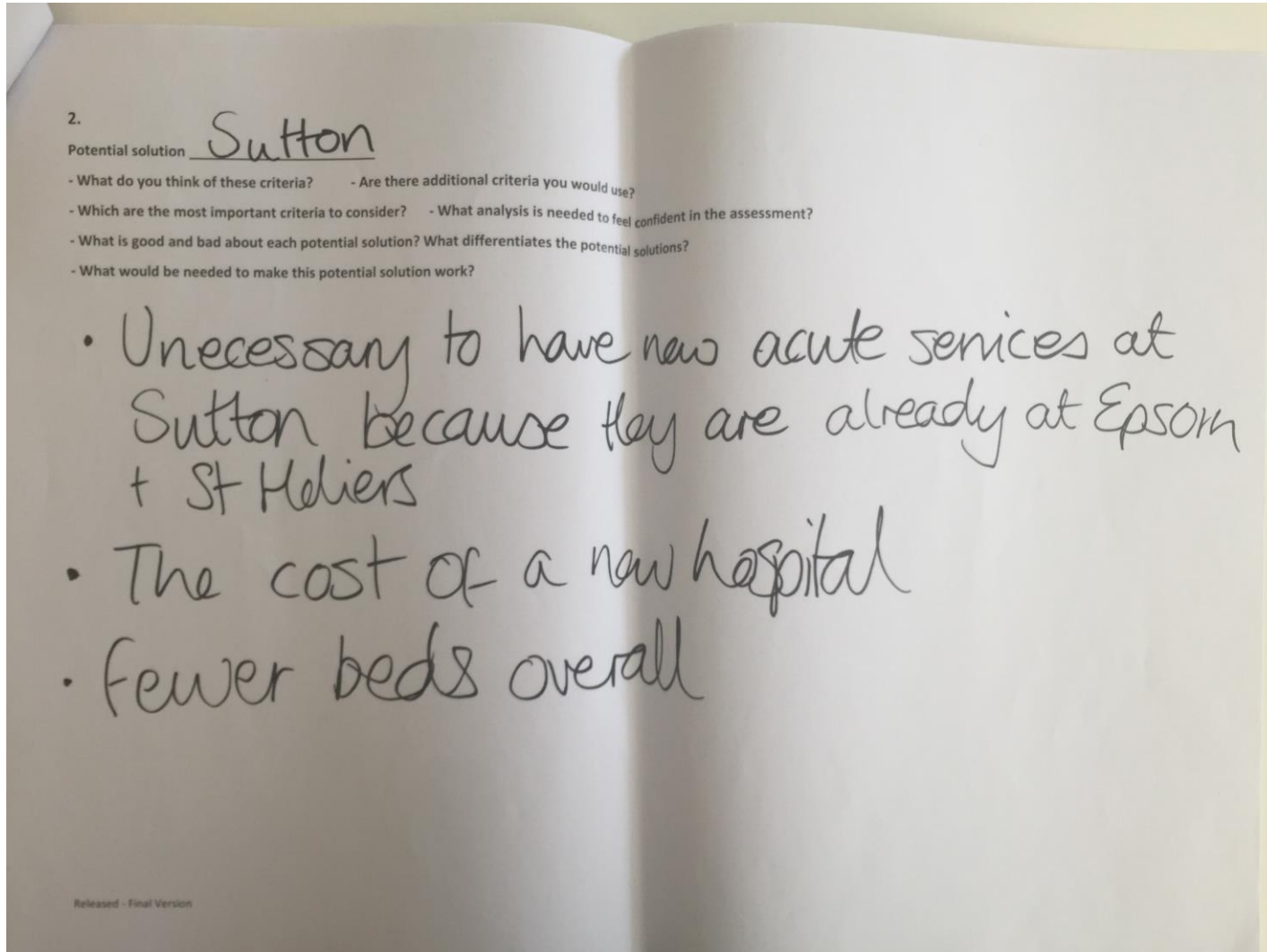




Comments on possible solution with major acute services located at SUTTON

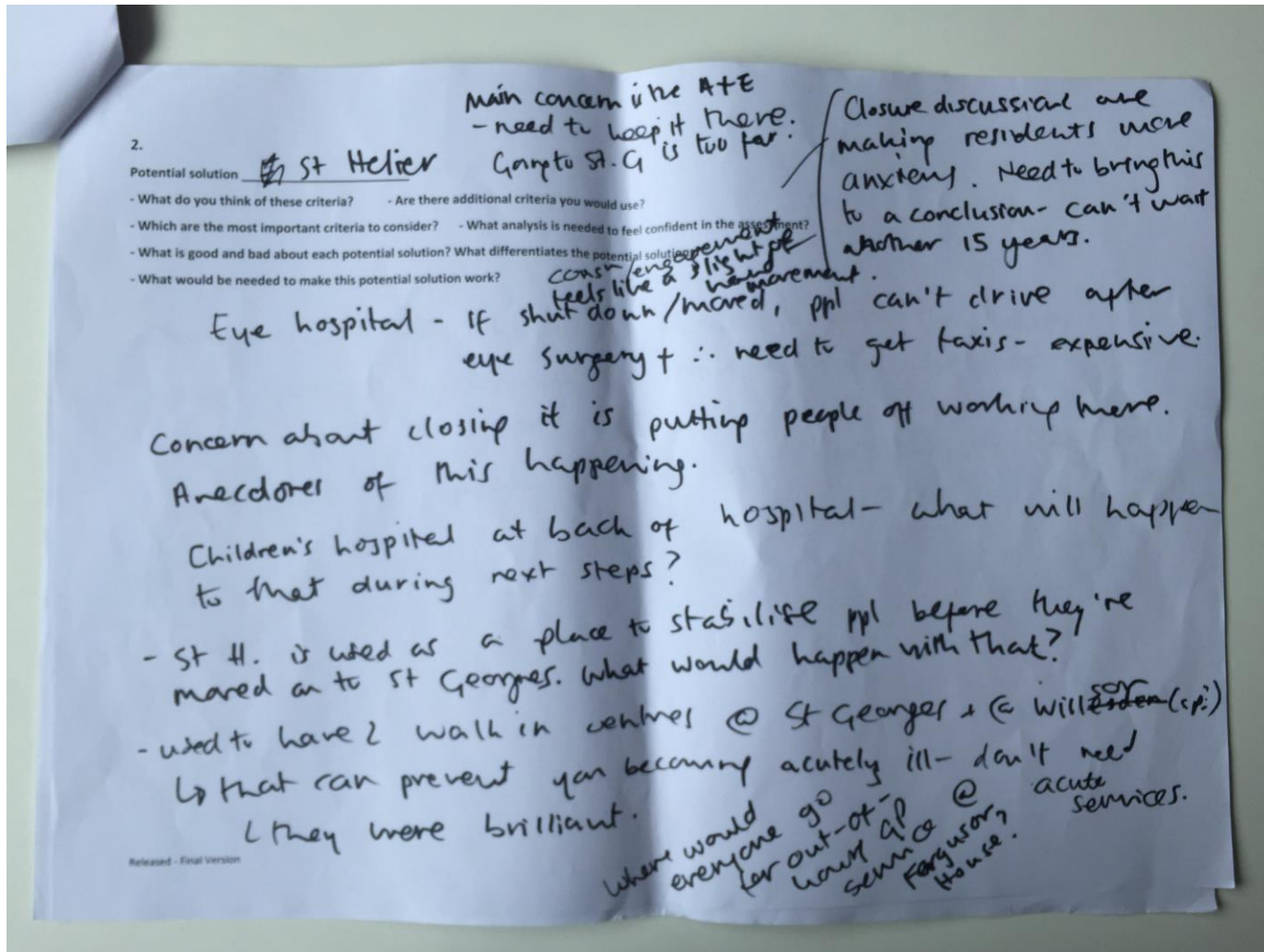


Comments on possible solution with major acute services located at SUTTON



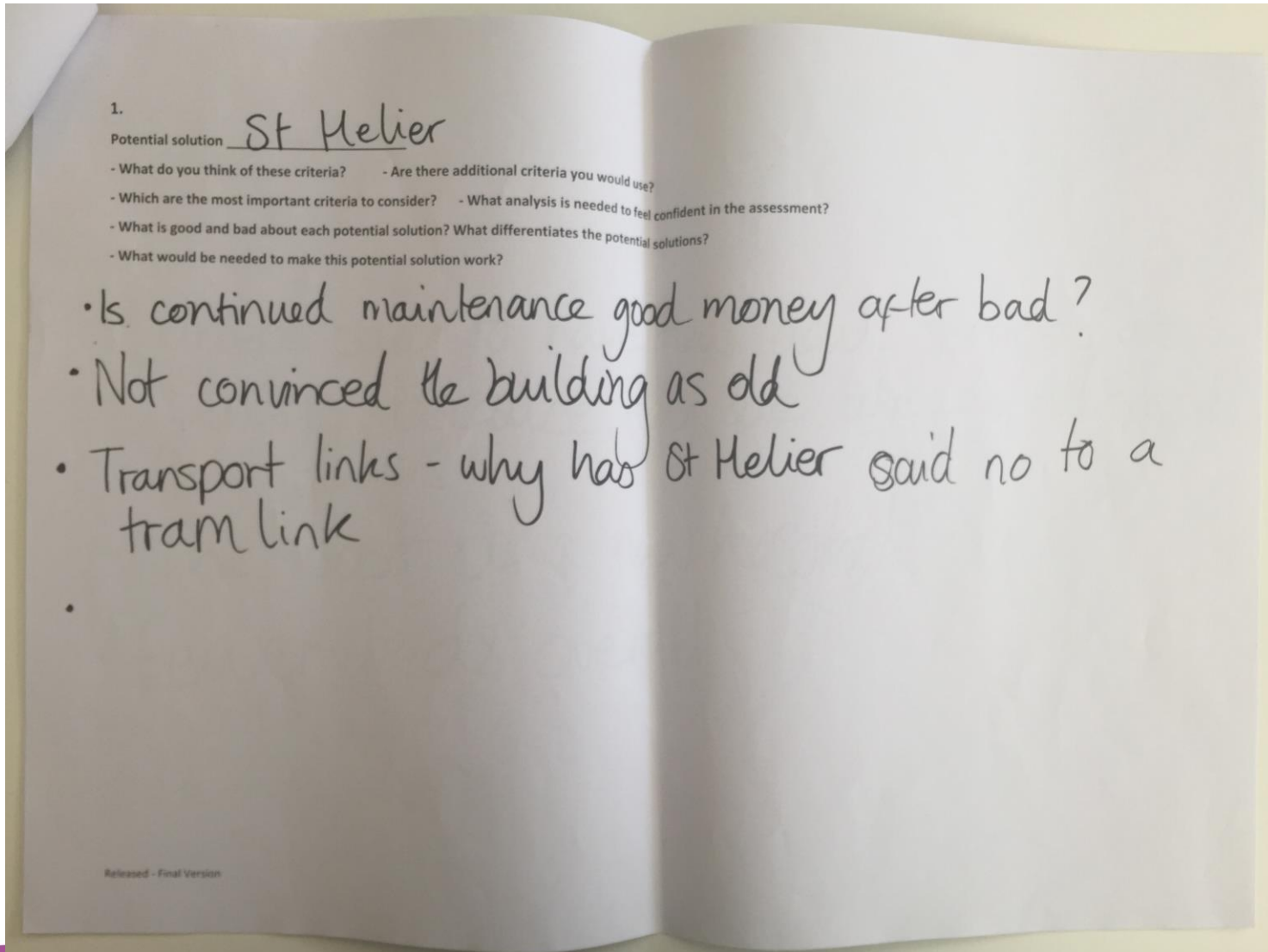


Comments on possible solution with major acute services located at ST HELIER



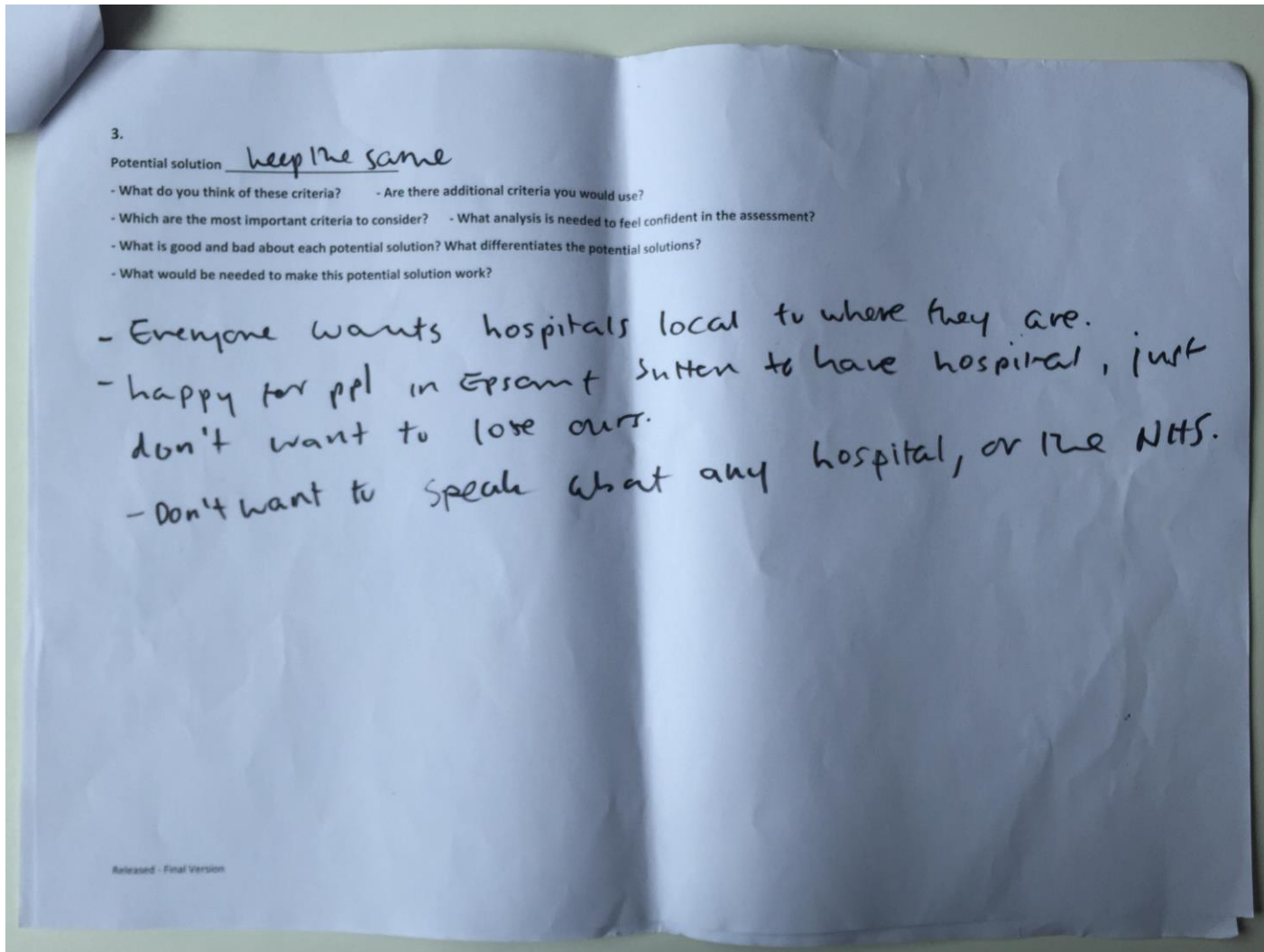


Comments on possible solution with major acute services located at ST HELIER



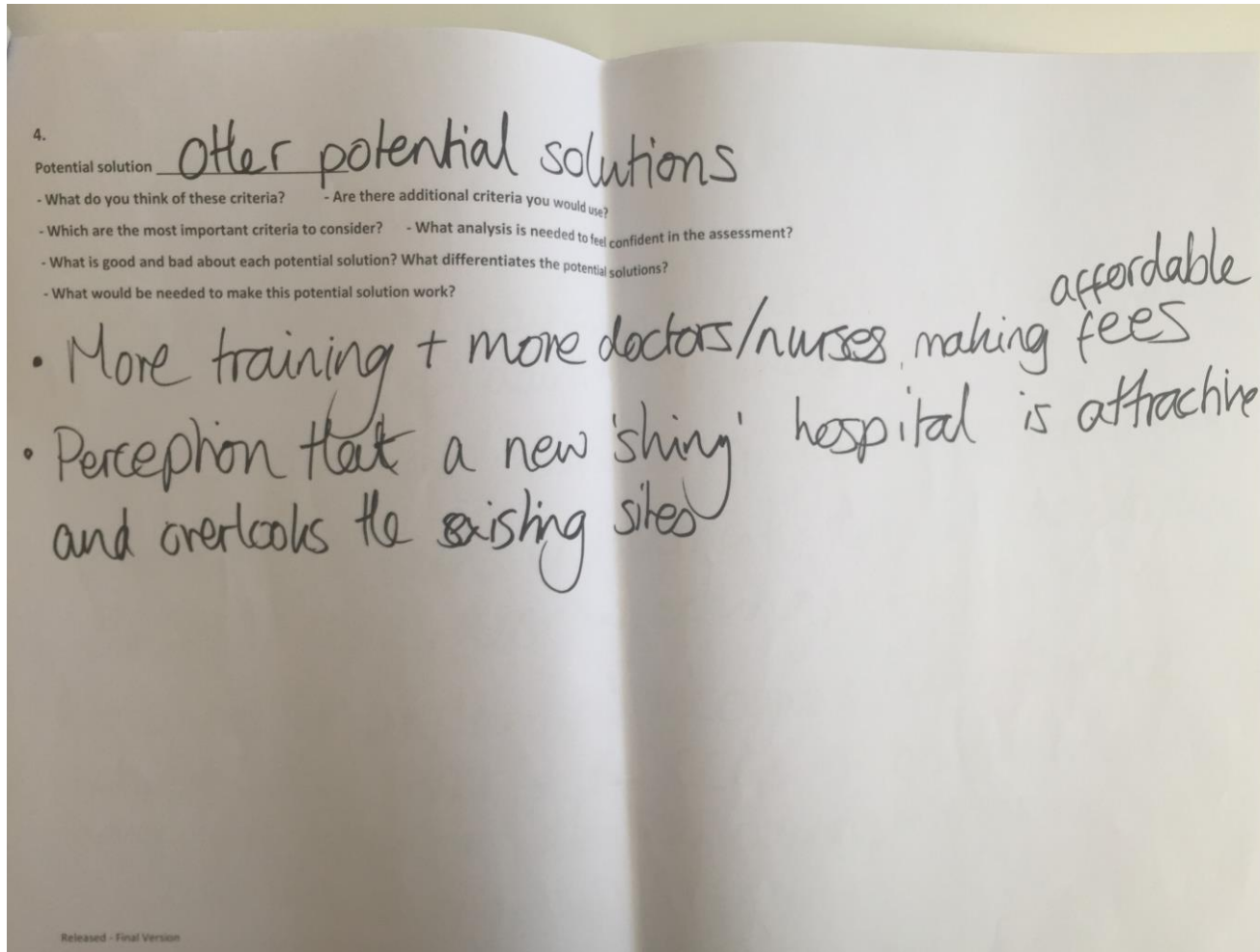


Comments on alternative possible solutions



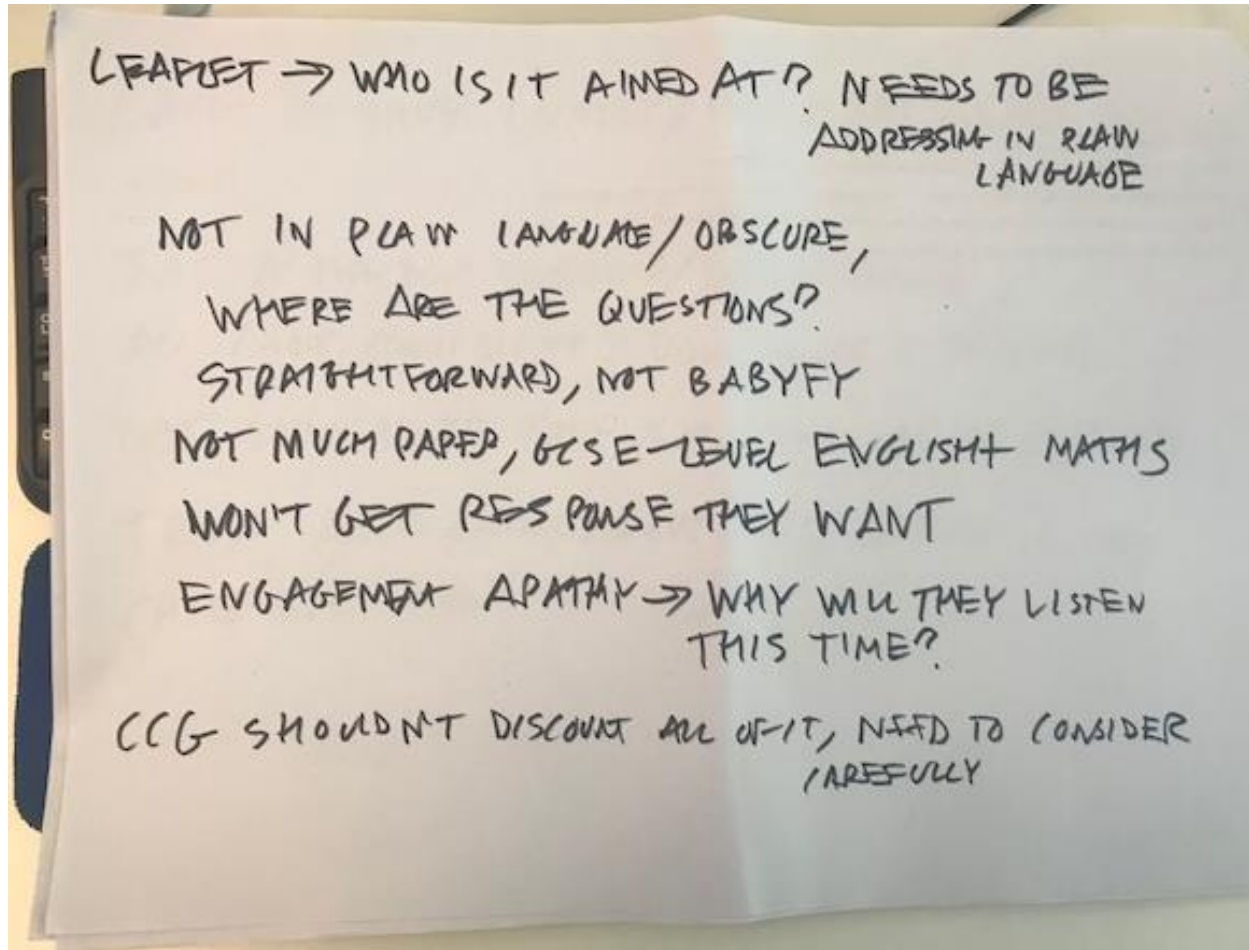


Comments on alternative possible solutions



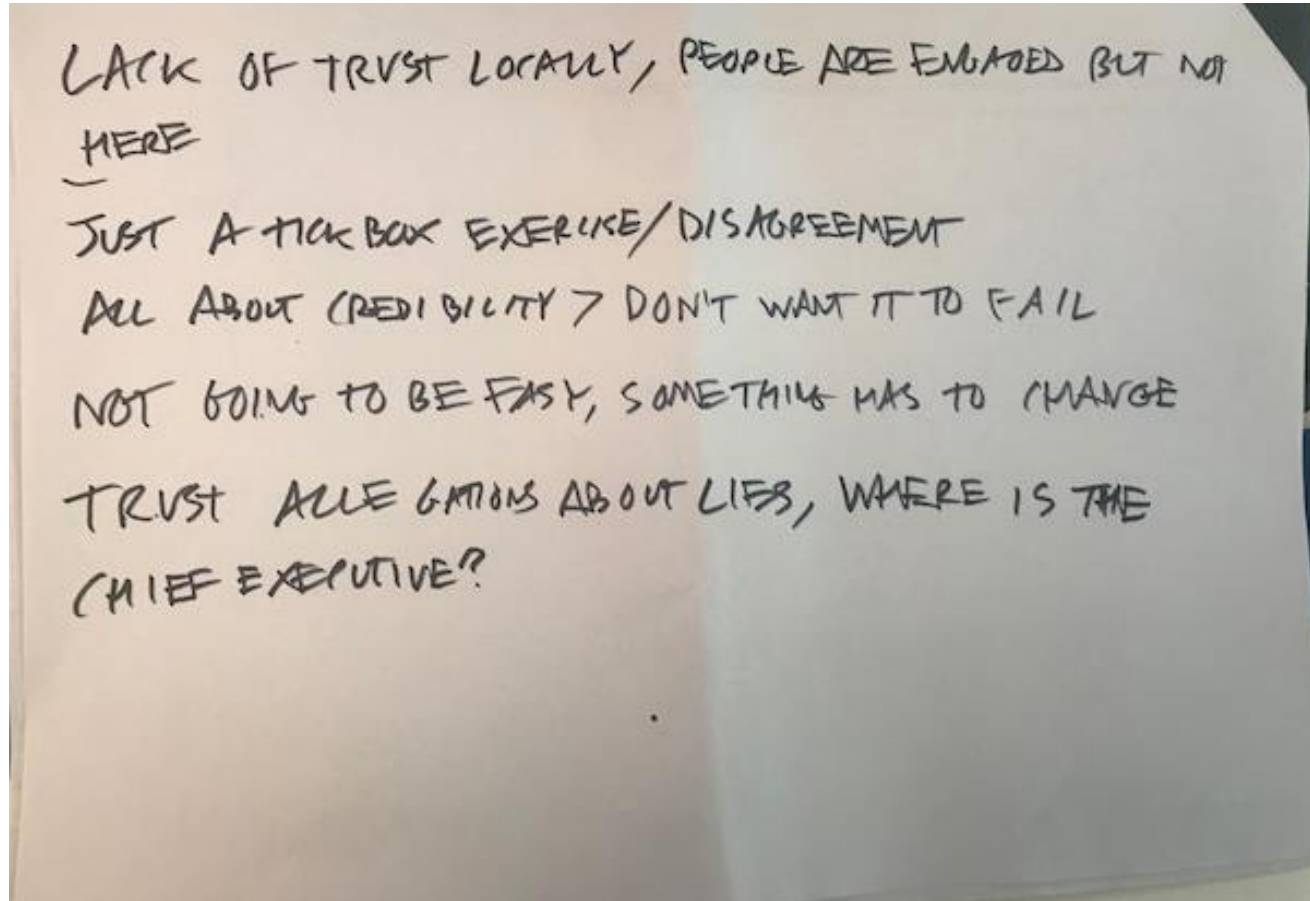


Comments on the process for developing a solution and future engagement



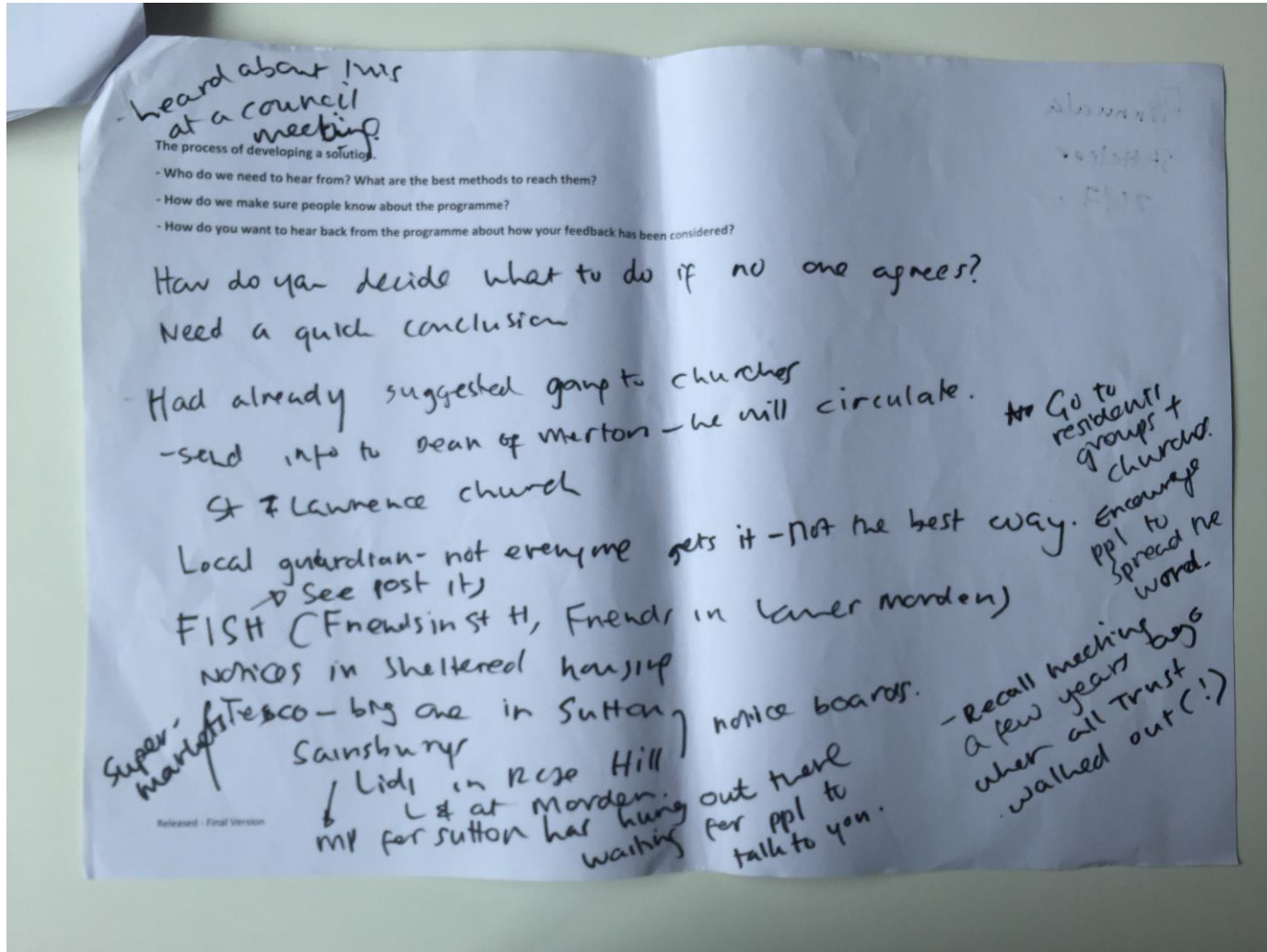


Comments on the process for developing a solution and future engagement

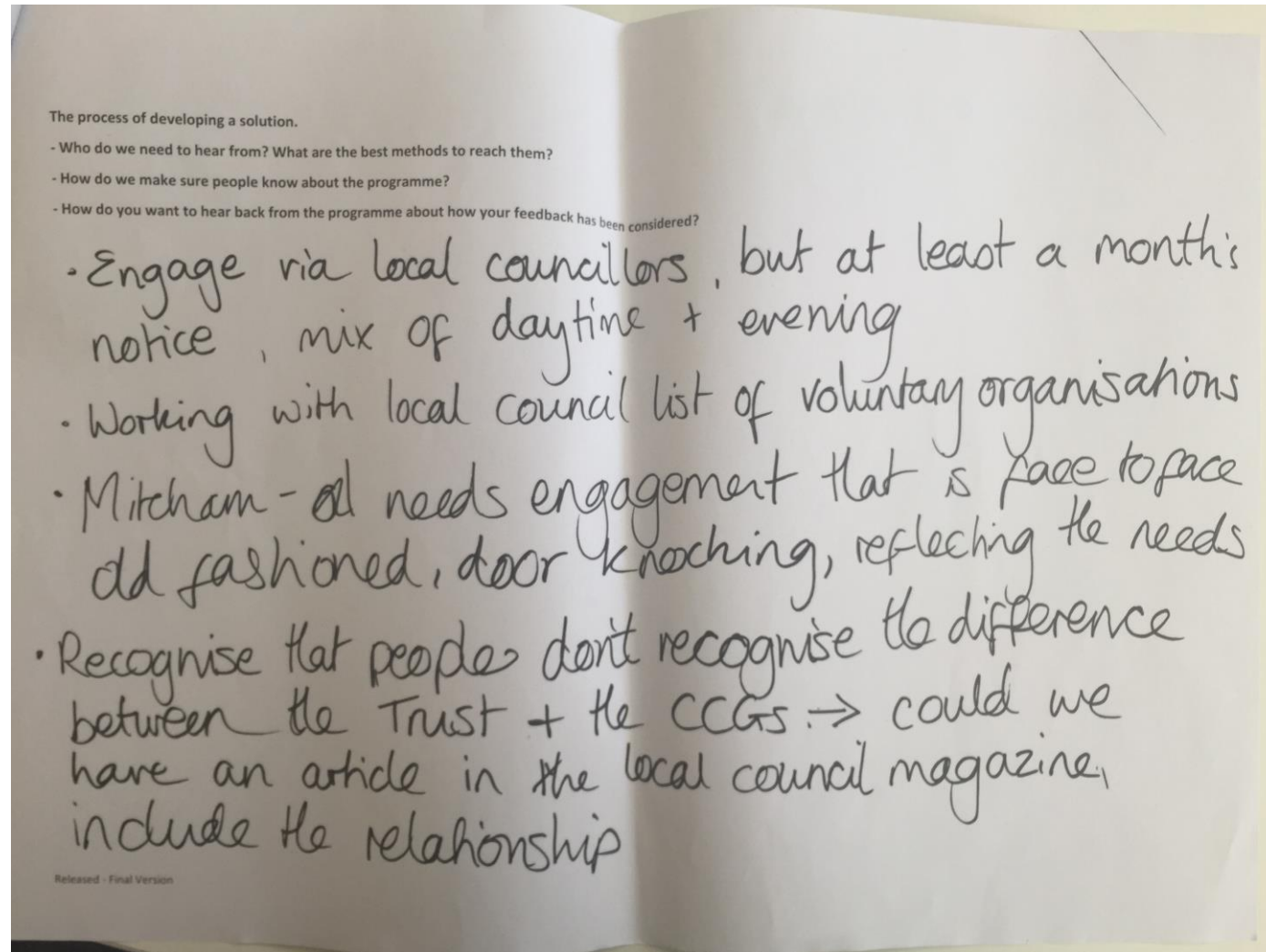




Comments on the process for developing a solution and future engagement



Comments on the process for developing a solution and future engagement





Additional comments and questions

GOV NEEDS LONG-TERM PLAN FOR NEW HOSPITAL. NO FIGURES. ARE WE WASTING MONEY ON CON/ENG? COULD BE SPENT ON SKILLED STAFF / BUILDINGS.

RESULTS OF CON/ENG IGNORED.

PUTTING ON ONE SIDE WON'T HELP WITH STAFFING ENOUGH - NATIONAL PROBLEM

DISAGREEMENT → WON'T HAVE TO MOVE BETWEEN

NEED MORE FOR MORE PATIENTS





Additional comments and questions

Q. WHY ~~NOT~~ ENGAGEMENT OVER SUMMER HOLIDAYS?

P. INVALID POINT, DOING IT IN SEPTEMBER, NEED TO FIX PROCESS IN SEPTEMBER, NEED TO BALANCE COST + REACHING MAXIMUM PEOPLE

Q. TENSION BETWEEN CCG + TRUST? OWN IDEAS? TOO FRAGMENTED?

Q. PEOPLE WHO DO NOT HAVE ACCESS TO INTERNET?

Q. NOT STARTING BLANK SLATE, WANTS TO PUT IT ON EPSOM. SECRET PLANS REVEALED FROM PHONE CONVERSATION. WE ARE NOT STUPID





Additional comments and questions

Q: DEPRIVED COMMUNITIES NOT REACHED OUT TO.

Q.



Additional comments and questions

NHS TRUST. MORE IN DEFICIT
WHAT IS THE TRUST'S BUDGET IN
COMPARISON TO THE DEFICIT?
WHAT ARE THE SOLUTIONS TO THE PROBLEM?
FRESH VIEW OF THE PROBLEMS
MONEY TO BE (WASTED)



Additional comments and questions

NEW TO ISSUE + LEARNING ABOUT
ISSUES, NEED TO LEARN

—
LAY MEMBER FOR PPI, NEED TO
FOCUS ON THE QUESTIONS IN THE ISSUES
PAPER, NOT THE ONLY SOLUTIONS,
COULD BE BEYOND THE THREE
WANT TO HEAR FROM PEOPLE
WE ALL HAVE PREFERRED SIDE BUT
NEED BALANCE, NEED TO HEAR PEOPLE'S
VOICES

Additional comments and questions

UNDERSTAND LACK OF TRUST
PEOPLE DO WANT TO GET IT RIGHT
WITHIN MILE OF ST HELOER BAD HEALTH,
WORSE THAN OTHER SITES, DON'T MOVE
AWAY FROM THERE, NEED IS MOST,
COULD PUT PRESSURE IN ST GEORGE'S
ALREADY ON KNEES
NOT FIRST CON/ENG, MILLIONS SPENT ON
THIS, WHY REPEATING? WAITING FOR ANSWER
THAT SITS THEM



Additional comments and questions

CONSISTENT MESSAGE FROM PREVIOUS ~~ENG~~
NOT LISTENING CON

WHY SELECTIVE OF LOCATIONS?

MANY IN RES. ASSOC DON'T HEAR ABOUT IT

SHOULDN'T BE IN THE MIDDLE OF THE DAY

PEOPLE MISS OR HAVE TO MISS WORK



Additional comments and questions

FOSH, AVERAGE AGE 75+, CONCERNED ABOUT REMOVING ST. H WOULD HAVE TO GET 2 BUSES TO SUTTON, AGREE WITH PPEBUDS PONS

1. WHERE'S THE MONEY? MONEY IS HUGE. NO FINANCIAL BACKING. NEED TO KNOW HOW MUCH FROM GOV.

2. IF NONE TO SUTTON, NEED TO CHANGE TRANSPORT, 15 YEARS TO CHANGE, NEED TO CHANGE NOW.

ROUTES FROM DEPRIVED AREAS WHAT'S TRANSPORT PLAN?



Additional comments and questions

3. WHAT IS THE TIMESCALE HOSPITAL
BUILT BY?



Additional comments and questions

DOCTORS WANT TO WORK IN NEW HOSPITAL + NOT WANT
TO TRAVEL INTO CENTR LONDON → IS THAT DRIVING IT?
ARE REAL NEEDS BEING ADDRESSED?
—
TRUST HAVE OWN VISION— RAILROADING THROUGH
CCG MIGHT NOT GO ALONG WITH IT
—
NOT ENOUGH STAFF TO MANAGE ACUTE, BY AMBUANCE,
NOT AS MUCH PUB TRANSPORT / OTHERS DISAGREE WITH THIS
—
ARE THESE HOSPITALS SAFE NOW? WHY NOT SAFE IN 2020,
YEARS?
FEAR → MATERNITY PUSHED INTO ST. GEORGE'S, TOO FAR





Additional comments and questions

EALING HOSP > A&E + MATERNITY MOVED OUT THEN
CLOSED

ST. M DELAPIDATED, SHINY NEW BUILDING, WHY WOULD
DOCTORS WORK IN DELAPIDATED BUILDING? CONCERN IT WILL
CLOSE.

MIXED MESSAGES > DOING UP ST.M DURING ENGAGEMENT
FOR PUBLIC CCG DISAGREE, NOT LETTING
DELAPIDATE

ENFIELD NORTH → SIMILAR SITUATION, ACUTE REMOVED THEN
(CLOSED)

NEED TO LOOK AT MONEY > A&E'S A LOT, ~~OF~~
NOT ENOUGH BUDGET



Additional comments and questions

NEED TO SUPPORT ST. M FOR COMMUNITIES, NOT TAKE
AWAY

QUEEN MARY SID CUP → ANOTHER EXAMPLE

IT'S ABOUT THE MONEY > NOTHING WILL HAPPEN UNLESS IT'LL
GET FUNDED

BETTER FOR SAME
SAME FOR LESS
MONEY WILL FOLLOW A+E

PEOPLE AREN'T STUPID

CONCERNED ST. M WILL JUST BECOME DAY CENTRE,



Additional comments and questions

CCG THINKING ABOUT WHAT'S NEEDED, HOW MEET THAT?
MAY BE OTHER OPTIONS, HAVE WE MISSED SOMETHING?

—
CONCERNED IT WILL COLLAPSE

—
HOSPITAL NEEDS TO LOOK AT ITSELF, NOT CCG'S JOB
↓
BAD MANAGEMENT

STEP BACK AND ANSWER QUESTIONS

—
ALSO - SOME ENGAGEMENT, NOT LISTENING

—
COMFORTING IT IS LEAD BY CLINICALS, HOPE THEY COME FROM
DIFFERENT PERSPECTIVE

DO THE CCG SCREEN PEOPLE? PEOPLE SHOULD JOIN TO CHANGE
LT



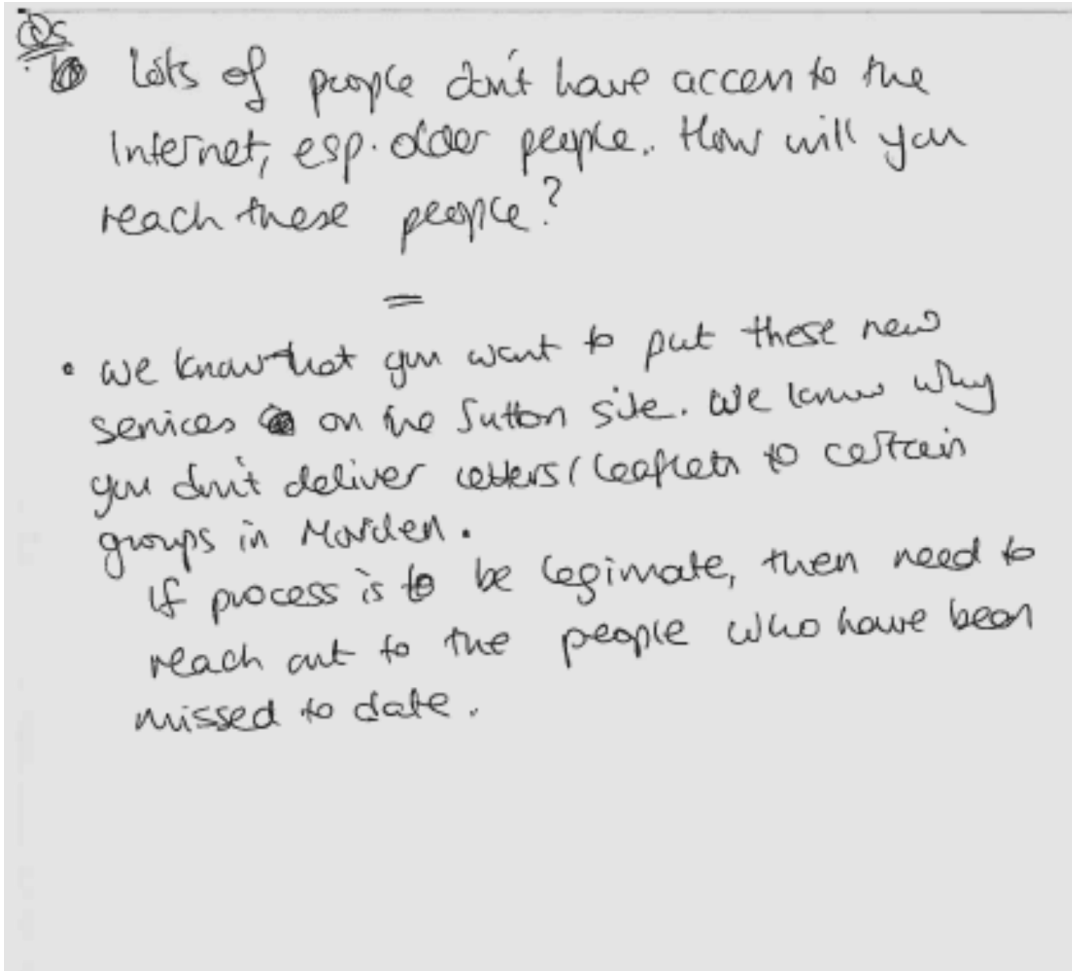


Additional comments and questions

- Merton 26/07
- Qs
 - How were ^{these} events publicised locally?
 - churches as well as mosques?
 - Mitchou & Morden ^{local people} - not aware of previous consultation or this consultation?
 - Wimbledon → it was ignored in last consultation.
 - How much money has been spent on consultation & engagement?
 - Result of last consultation?
 - Stress/anxiety growing over the # of years that consultation has been going on.
 - when will it come to an end?
 - when will a proper engagement take place?
 - complete engagement - what does this mean?
 - when will it happen? (timeframe)



Additional comments and questions



Additional comments and questions

Plenary Q+A - Merton, 26/7.

- Q - Engagement done by trust ~~area~~ last yr? Is Merton CCG really representing its residents? Brochures didn't reach some residents last year?
- A - Hard to engage everyone, will take that concern about brochures back to the Trust.
Brochures weren't given to every household - too expensive.
Went to local mosques + residents organisations. Took feedback from self-organised events.
All info from that engagement was handed over to CCG.
- Rec: Explain difference between engagement and consultation?

Plenary Q+A contd

- Q - Why were these meetings not publicised in Mitcham + Morden?
- Q - Was consⁿ carried out in churches last yr? No one said they'd heard anything.
- Q - Last yr consⁿ - never heard about it in Mitcham - is part of 2 resident associations. Why not?
- Q - (Wimbledon ward councillor) concerned that her Wimbledon ward was ignored - was upset about not being consulted.
- Q - (St George's staff member) - ppl. he worked with didn't know anything about the events here.
- Q - How much money has been spent on consⁿ/engagement that could have been spent on local health care?

Additional comments and questions

plenary @ Merton CCG
Q- What was the ~~question~~ result of the last consultation?

Q - The length of this process has created a lot of stress/anxiety. Need to hear when this process will end.

Q - Previous engagement incomplete. How will you engage from now on? What are the methods and timescales?

Q- Why is engagement over the summer holidays?

A- Also has meetings booked over ~~some~~ September. Didn't want to have a gap between issues paper being published, wanted to get out there.

may need to do Sept events on Saturdays, go to shopping centres etc.

Q- Is there tension b/w CCGs + Trust?
Trust reps at e.g. residents meetings didn't refer much to what CCGs were doing. NHS England etc - so many diff orgs w/ different agendas, no one taking responsibility?

Q- Lots of ppl not using the internet - how ~~can we~~ ^{will you} contact them?

Q- Last cons - was flawed, should be challenged.



Additional comments and questions

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Q- Lots of ppl not using the internet - how ~~can we~~ ^{will you} contact them?

Q- Last cons - was flawed, should be challenged.

P- ~~Not~~ DON'T believe starting from blank piece of paper. Think there is a preferred option. Concern it's being hidden, not being honest w/ ppl. Lots of ppl not part of any groups, hard to reach them.

Q- Change is a given. What happens if most ppl who get back to you say they just want their local hospitals upgraded?





Additional comments and questions

Plenary answer

- A - Last year's engagement - ~~was~~ that was Trust-led, CCG weren't involved. CCG has taken an independent look at issues, won't rely on the engagement they did last yr. Now running a different consultation.

A. (~~Results of the last cons.~~)

Trust (Lisa) - did a lot, but recognised didn't do as much as we could. Reviewed by Cons. Institute, looked at areas where we didn't get to. Went to a lot of churches, wrote to residents association. Where we went + what was said, who was spoken to, it documented fully online. That has been handed on to the CCGs.

A - Engagement vs consultation
Engagement is to shape
consultation is a legal process that has to happen when services ~~are~~ might change.

Engagement process this time:
(Andrew) - Consultation Institute review showed need to address gaps e.g. protected characteristics, hard to reach group. Need engagement, then consultation once all CCGs agree a way forward.

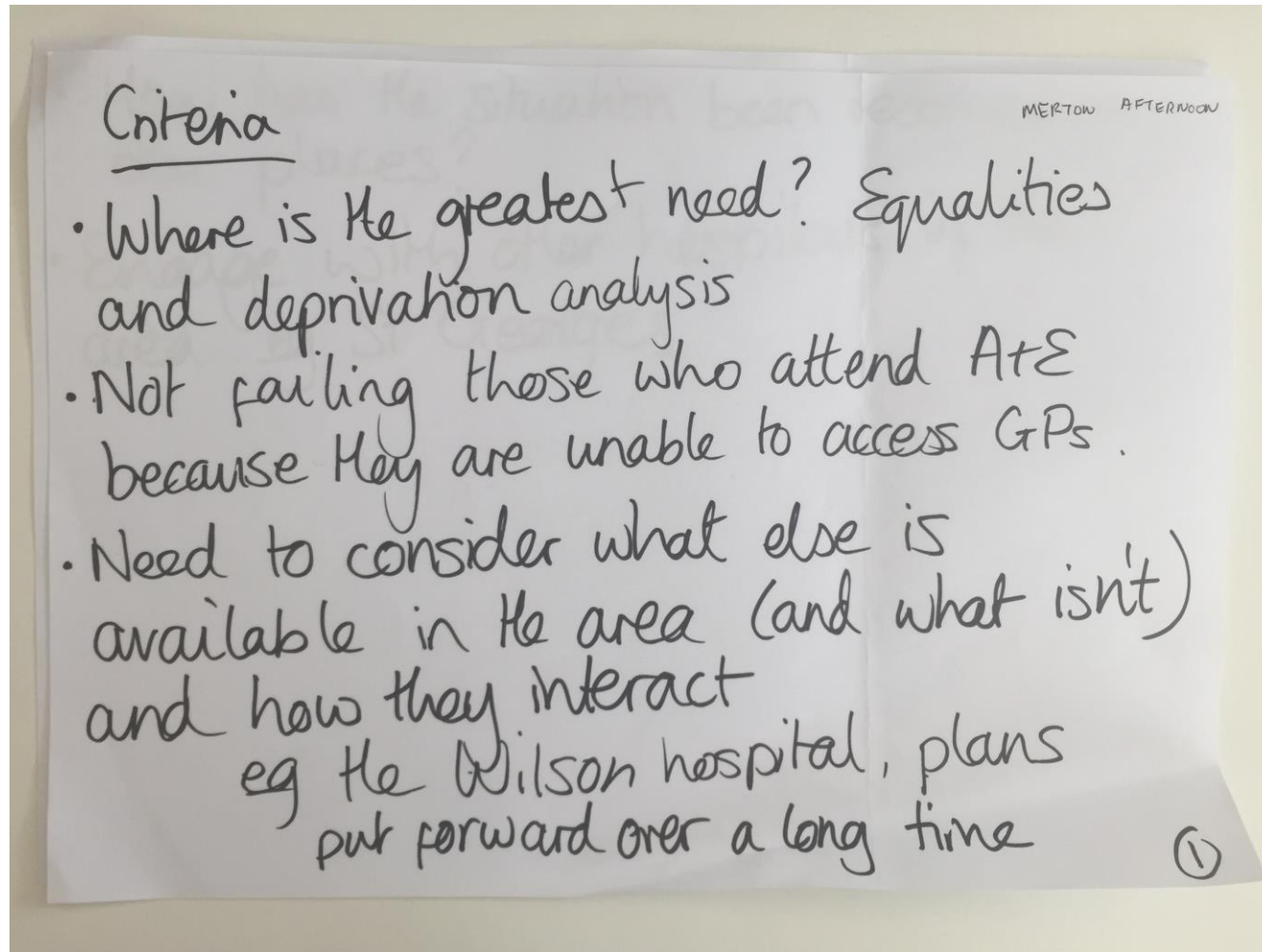
where we advertised, through ^{stakeholder} reference group
Flyer to Surgeons
Adverts in local papers
social media
knew we need other means, want to hear about other ways to engage.

Jan 19 is ambition to reach conclusion. understand anxiety about going in circles. can't go too quickly. have to follow regulatory process.

planning, assuring and delivering / const. check points. service change, NHS doc or

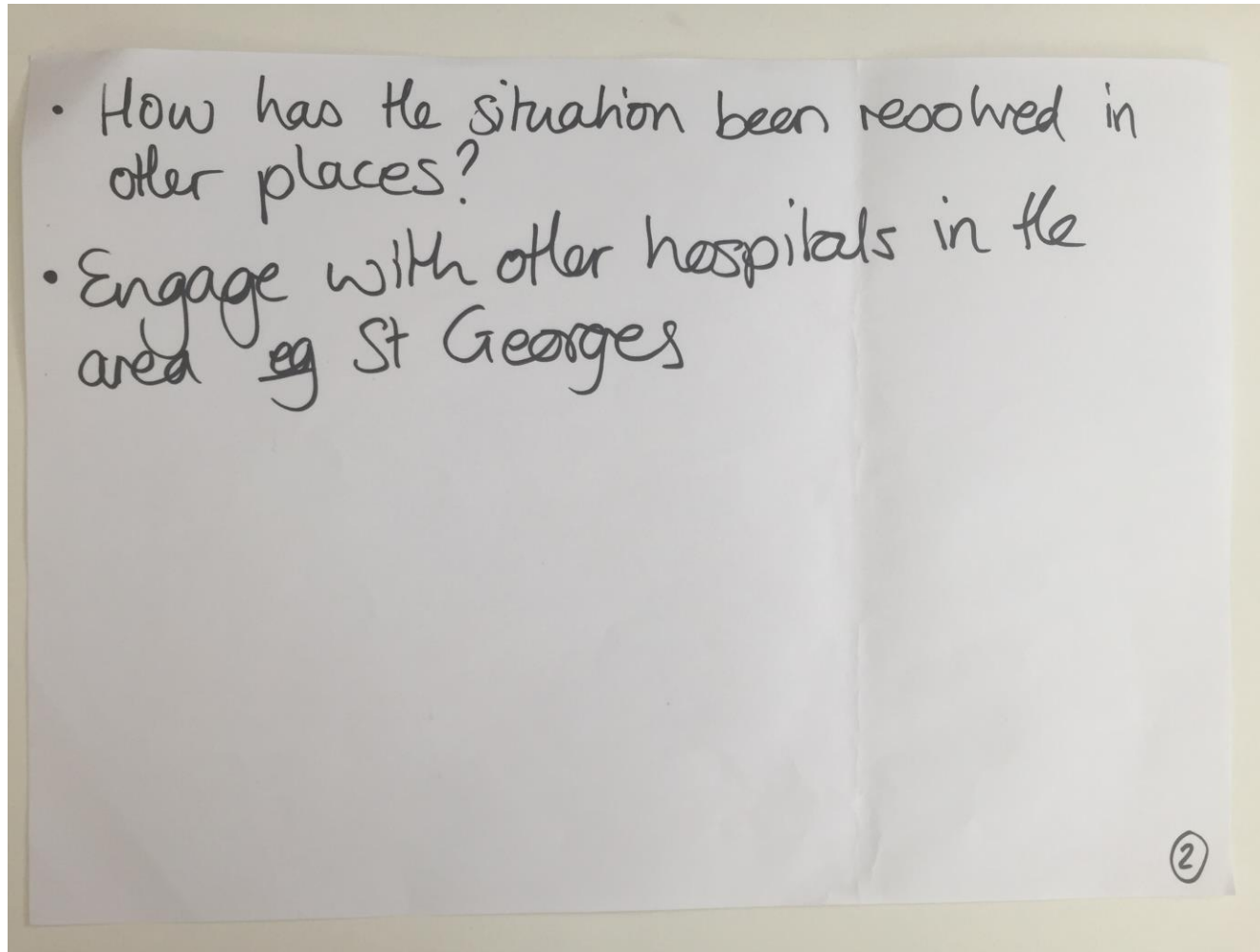


Additional comments and questions

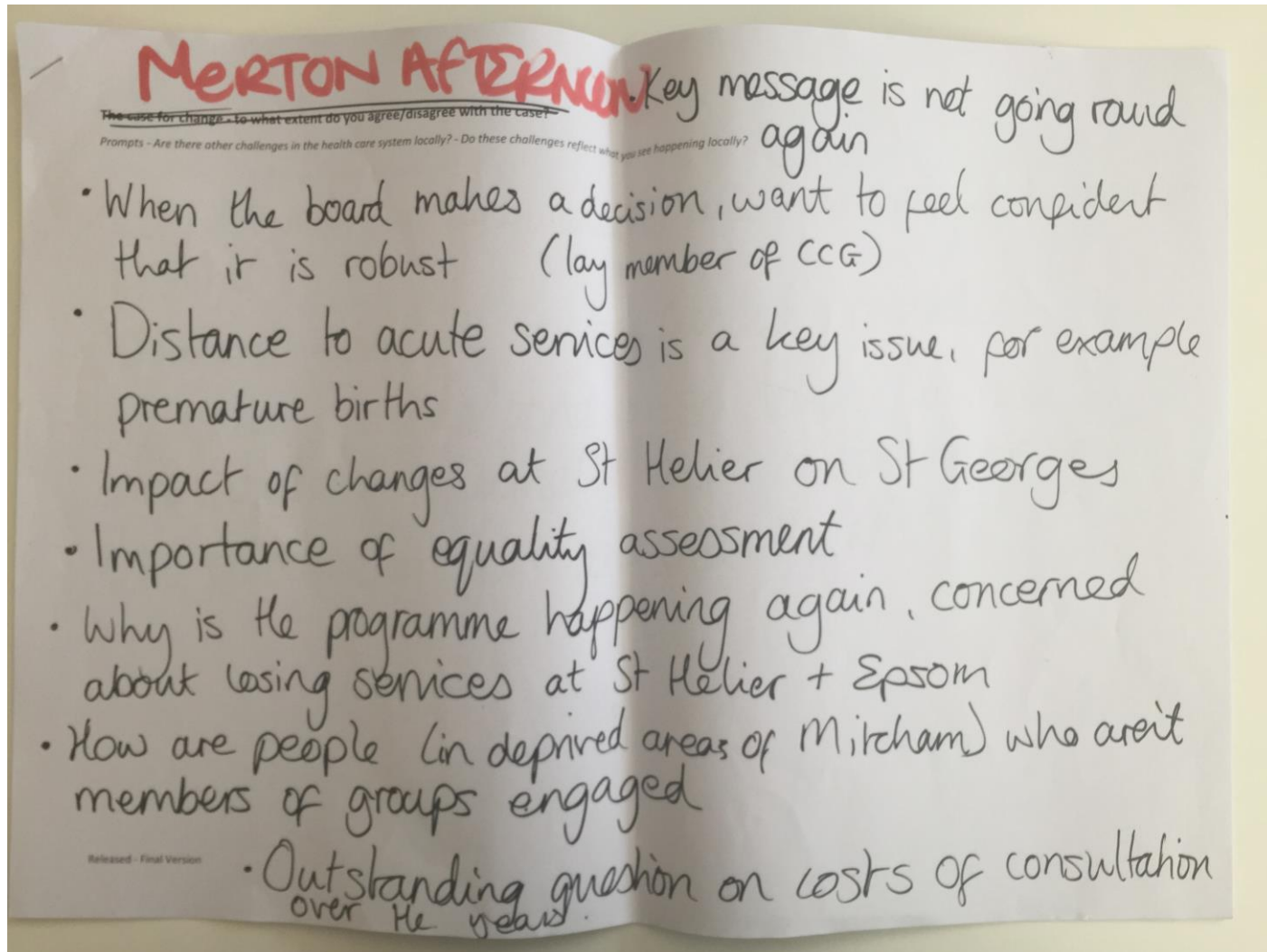




Additional comments and questions



Additional comments and questions



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