

Improving Healthcare Together 2020 to 2030
Mid-point review on the consultation process report
March 2020

1. Introduction

This report has been written to update local people and partners on our consultation process to date. The paper sets out how Improving Healthcare Together 2020 to 2030 (IHT) in line with a best practice approach, is working with the Consultation Institute (tCI) to assure the IHT consultation which has commenced on January the 8th 2020, and will close on April the 1st 2020.

tCI is an independent organisation, recognised for setting standards for best practice in public engagement and consultation. To find out more about tCI's work, please visit their website – [here](#).

The assurance process with tCI includes 6 checkpoints at different stages of a consultation:

- a. Pre-consultation planning:
 1. Scoping and Governance (the basics of the consultation are agreed)
 2. Project plan (consultation activities are set out and organised)
 3. Documentation (all hard copy and electronic versions are fit for purpose and that questionnaires conform to best practice)
- b. During consultation:
 4. Mid-point review (assess whether all relevant views are being considered)
 5. Closing date review (to finalise plans for analysis, feedback and influencing processes)
- c. Post-consultation
 6. Final report (to confirm the tCI's endorsement of the consultation)

Half way through the delivery of the IHT consultation, on the 26th of February 2020, tCI undertook a mid-point assurance review. This process has been set out in detail within our consultation plan which is available on the IHT consultation website – [here](#).

tCI's mid-point review stage comprises of four key areas and sets out to:

- Assess our progress against our consultation plan and consider any further action which may need to be considered in relation to consultation activities
- Review the extent to which our planned engagement approaches are successfully reaching key groups and stakeholders, including those identified through the impact analyses carried out
- Provide an opportunity to present a summary of draft emerging themes and issues raised based on the consultation responses and feedback received to date; and
- Discuss any additional engagement that might be required and/or is advisable.

2. Our approach

As part of the mid-point review, we involved local stakeholders to provide feedback on our

consultation process and inform the review. This included talking to Governing Body members from Surrey Downs, Sutton and Merton Clinical Commissioning Groups. tCI also facilitated meetings with members of the Stakeholder Reference Group and Consultation Oversight Group on the 14th of February 2020.

3. Our consultation plan

Following the launch of consultation on January the 8th 2020, our consultation plan sets out 15 different ways to reach out to, inform and hear from local communities about their views on our consultation proposals.

These include:

- **9 public listening events** (3 in each CCG area) - open invite events to share information on proposed options for change, answer specific questions from the public to increase understanding of the consultation and proposals, as well as invite and listen to feedback and encourage people to respond to the consultation questionnaire
- **Community outreach work undertaken by CCG teams** - targeted engagement activities with groups such as older people and deprived communities as well as seldom heard groups such as people with learning disabilities; also responding to invites to local groups and attending local events and venues to promote the consultation
- **Funding voluntary groups (via the Community Voluntary Sector Incentive Scheme)** - to help communities with various protected characteristics and seldom heard groups engage with the consultation; working with lead voluntary and community organisation in each CCG
- **Three deliberative events (1 in each CCG area)** - informed two-way discussions over a full day with participants recruited to ensure representative sample from Trust catchment (age, gender, ethnicity and socio-economic status)
- **Eleven focus groups** - small group discussions with participants recruited from key populations identified in impact assessments (older people, pregnant women/women who have recently given birth, parents of under 16s and 16-24-year-olds)
- **1:1 interviews with hard to reach populations** – targeting hard to reach populations such as the Gypsy, Roma and Traveller community, led by independent experts at YouGov
- **Telephone surveys (c. 750)** - based on the questions within the consultation questionnaire, targeting a representative range of views from the combined geographies and neighbouring areas of those who may not otherwise contribute to the consultation
- **Mobile roadshows in busy places** – raising awareness of the consultation, share information and encourage people to ask questions and complete the consultation questionnaire
- **Clinical pop-ups** - raising awareness with patients and staff in GP surgeries, St Helier and Epsom Hospitals and other health centres to encourage people to ask questions and complete the consultation questionnaire
- **Royal Mail door to door leaflet drop** – providing more information, promoting the

consultation and the public events and encouraging local people to give their views on our proposals. This door-to-door campaign has taken place from 13th January 2020 – 18th January 2020 and has targeted all residents across Merton, Sutton and Surrey Downs as well as a number of impacted neighbouring areas

- **Distribution of consultation materials** – various printed consultation materials have been distributed to a range of local stakeholders including for example GP practices, pharmacies, citizens advice bureaus, council, dentists, job centres, opticians, leisure centres, libraries, Epsom and St Helier hospitals as well as the three lead Councils of Voluntary Services. All consultation materials, including the questionnaire, have also been made available electronically on the IHT website. The questionnaire is also available to fill in on paper with a freepost address and is promoted at all our engagement events
- **Making materials accessible to all** - we have translated the consultation questionnaire and consultation summary into three languages: Tamil, Urdu and Polish (3 main most common languages in our combined geographies). These documents are available electronically and hard copies can be provided upon request. We have also produced Easy Read versions of the consultation summary and questionnaire. The IHT also features software designed to support anyone with a visual impairment, learning disability or where English isn't their first language. Browse aloud is a support tool which reads aloud, magnifies and translates all the content (including pdfs) on our website
- **Social media** - using social media channels across South West London and Surrey targeted advertising to raise awareness of how people can access information, have their say and complete the consultation questionnaire
- **Radio advertising** - radio advertisements broadcast on local radio stations across Merton, Sutton and Surrey Downs to raise awareness of the consultation and to let people know how they can have their say
- **Print advertising** - in local newspapers raising awareness of the proposals and explaining the number of ways people can get involved to have their say

During the first two weeks of the consultation we have distributed online and hard copies of our consultation materials to key stakeholders as appropriate. **Table 1** below outlines where materials have been initially distributed and details the overall quantities shared. All consultation documentation was available on the IHT website (www.improvinghealthcaretogether.org.uk) at the launch of the consultation.

Table 1: Consultation documentation distribution during the first two weeks of consultation

Location	Consultation materials	Key stakeholders	Total number of materials distributed
Surrey Downs, Sutton and Merton CCGs	<ul style="list-style-type: none"> • Leaflet • Poster • Summary document • Questionnaire • Easy Read summary document 	<ul style="list-style-type: none"> • Local residents (via door drop, and upon request via email and phone) • 7 local councils (Merton, Sutton, 	<ul style="list-style-type: none"> • Over 700,000 leaflets (including the door drop Surrey Downs, Sutton, Merton and impacted

Location	Consultation materials	Key stakeholders	Total number of materials distributed
	<ul style="list-style-type: none"> Easy Read questionnaire 	<p>Surrey County Council, Epsom and Ewell Borough, Reigate and Banstead Borough Council, Mole Valley District Council, Elmbridge Borough Council)</p> <ul style="list-style-type: none"> 14 Parish Councils in Surrey Downs Epsom and St Helier hospitals 91 GP practices 136 Pharmacies 26 Libraries 3 Lead Community Voluntary Services (CVS) organisations Over 150 Dentists and opticians Leisure Centres 3 Job Centres 9 Citizens Advice Bureau 37 Sure Start Centres 35 Resident Associations Local residents (upon request) 	<p>neighbouring areas and distribution to key stakeholders)</p> <ul style="list-style-type: none"> Over 4,000 summary documents Over 60 paper questionnaires (upon request) 180 posters Over 300 easy read summary documents Over 400 easy read questionnaires
Impacted neighbouring areas	<ul style="list-style-type: none"> Leaflet Summary document 	<ul style="list-style-type: none"> 7 neighbouring GP practices 	<ul style="list-style-type: none"> 7 cover letters raising awareness of the consultation and ways for finding out more about the proposals and request more materials 35 leaflets 14 summary documents

Hard copy consultation materials have also been available at all public listening events, mobile pop-up events as well as meetings with stakeholders to date.

In line with the consultation plan, during the first 6 weeks of the consultation, over 50 engagement activities were held involving over 3,700 local people and staff. **Appendix 1** details the breadth of engagement activities undertaken during this consultation period.

4. What we've heard

Consultation activities are designed to encourage people to talk to us and give their views on the IHT proposals. During the first half of the consultation period, the feedback received was mainly focused on the consultation process. Various clarification questions in relation to the IHT proposals were also received at public events. **Table 2** below sets out what we've heard so far in the consultation.

Table 2: What we've heard from key stakeholders, staff and local people

What we've heard	
Feedback on the consultation process	<ul style="list-style-type: none"> • An acknowledgement of a best practice consultation plan – which is being delivered as planned • More conversations on the proposals taking place at the local level by local people (i.e. within family and friends circles) • A request to look at the visitor's journeys on the IHT website, in relation to their paths to the consultation questionnaire to identify any areas where content may need to be improved • A recommendation to contact Epsom & Ewell Council and local fire rescue services for advice on engaging with Gypsy, Roma and Traveller communities • Ensuring the Easy Read materials are available at mobile roadshows • Looking at ways to further engage with young people • Making sure the Frequently Asked Questions on the IHT website are promoted to local stakeholders. • Responding to requests for IHT attendance at external meetings arranged by our stakeholders • Ensuring we are monitoring questionnaire/telephone survey returns to engage with representative populations across the three CCG areas.
Clarification questions received at public events	<p>We also received the following clarification questions raised via our listening, mobile and clinical pop up engagement events:</p> <ul style="list-style-type: none"> • Location of specific services on the District Hospital sites • Number of beds and their location • Funding clarification • Duration of construction work for each site option

What we've heard

- Whether proposals will be able to meet projected population needs into the future
- Whether the investment is sufficient to cover the building of a new hospital and refurbish both Epsom and St Helier hospitals
- A loss of 'full A&E departments' and other services at St Helier and /or Epsom with the introduction of a single emergency care hospital
- transport and travel to the emergency care hospital and potentially between hospital sites, and parking
- Potentially longer journey times to emergency care hospital and impact of this on patient outcomes
- How the needs of different communities will be met by the various site options
- How other hospitals might be affected and their ability to cope with increased demand if it arises

5. Responding to feedback during consultation

We continue to work with our delivery partners to review and adapt our consultation plan. To maintain high levels of interest in the consultation and to listen and respond to feedback we have developed a series of additional consultation materials and organised additional activity. For example we have:

- Responded to a request from Cllr Nick McClean and Stephen Hammond MP to attend their public meeting to present our proposals and listen to the views from local meeting at a meeting on the 6th of March 2020 at the Methodist Church Hall, Buckleigh Ave, in Merton
- Responded to a request from Leatherhead Residents Association on the 3rd of February 2020 to present our proposals and listen to the views of local people
- Responded to interest expressed by community pharmacists in Sutton, organising an evening event in central Sutton to which all community pharmacists were invited
- Surrey Downs CCG engagement leads, working in collaboration with Surrey County Council have arranged to talk to representatives from the traveller community. We will also draw from the work of Central Surrey Health who are talking to members of the Gypsy, Roma, Traveller communities on wider health issues
- We have mapped visitor's journeys on the IHT consultation website and the 16 geographic areas from which the website is being accessed
- We have responded to requests for large print copies of the consultation materials by directing members of the public to our consultation website where information can be accessed in different formats including large print via the Browsealoud support tool. We have also provided hard copy large print documentation upon request
- We have responded to a request to ensure our engagement includes the views of homeless people which includes arranging a meeting with people attending the Sunshine

Recovery Café in Wimbledon Chase

- Developed an additional slide on the number of beds for each option compared to the current beds has been included in the presentation
- We have updated the slides used at listening events to clarify that it cost the CCGs £511 million to build the preferred option and explained the reasons for that
- We've produced an additional slide within the presentation used at listening events outlining the criteria used for assessing the options
- We have produced a shorter animation video (with subtitles) outlining the case for change, consultation proposals and ways to respond to the consultation. This video is available on the IHT website (www.improvinghealthcaretogether.org.uk/consultation/watch-the-videos/) and has been shared via social media
- We have developed artists' impressions of the specialist emergency care hospital site plans for each of the proposed site options. These drawings are available on the IHT website (www.improvinghealthcaretogether.org.uk/document/site-options-maps/) and have been shared at the IHT listening events
- We have produced a video on the district general hospital (with subtitles) providing examples of the services that will stay at Epsom Hospital and St Helier Hospital. This is available on the IHT website (www.improvinghealthcaretogether.org.uk/consultation/watch-the-videos/) and has been shared via social media
- We have produced a series of 'explainers' which we have shared on social media and published on the website (www.improvinghealthcaretogether.org.uk/consultation/improving-healthcare-together-explainers/); these include questions such as 'what does an urgent treatment centre do?' 'if it is already hard to recruit staff to two hospitals, why do you think that having three will be easier' and 'if surgery takes place at the specialist emergency care hospital, will you stay there to recover, or be moved to your nearest district hospital?' (see **Appendix 2** including examples of explainers shared on social media)
- We have produced three Clinical Chair animation videos (with subtitles and sign language interpreters) outlining the case for change, consultation proposals and ways to respond to the consultation. This is available on the IHT website (www.improvinghealthcaretogether.org.uk/consultation/watch-the-videos/) and YouTube
- We have printed a further 3,000 consultation questionnaires and 3,000 summary documents in Tamil at the request of local MPs in Sutton to distribute to local people

6. Next steps

We continue to monitor our consultation plan. Ongoing engagement activities include:

- A remaining focus group and deliberative event delivered by independent experts YouGov
- Engagement with hard to reach and protected characteristic groups delivered by the Community and Voluntary Sector outreach scheme; and
- Engagement plans delivered by each Clinical Commissioning Group

The final assurance checkpoint with the Consultation Institute taking place during the consultation

period will include a closing date review. This review will be undertaken in the last weeks of consultation and will involve a review of the engagement undertaken to date to check whether there are any gaps and whether important questions for consultation have been answered, as well as a review our plans for the analysis of consultation responses, feedback and influencing processes. This stage in the assurance process will also consider how the information from consultation and any other new evidence will be considered by the three CCGs in support of any decision-making.

Once consultation closes on the 1st of April 2020, independent experts Opinion Research Services (ORS) will analyse all consultation feedback and produce an independent report which we will make available on the IHT consultation website. The consultation analysis report will be shared with the Consultation Institute as part of the final review assurance checkpoint to ensure this document includes all relevant output from the consultation, and is enables.

Presentations on the consultation analysis report will be given by independent experts at ORS to various key stakeholders including the IHT Joint Health Overview and Scrutiny Sub-Committee so they can give their comments, as well as SRG and COG members.

The CCGs' will consider these comments, the report on the consultation and any other new evidence, including, for example, the final Integrated Impact Assessment, before making any recommendations and decisions.

The three CCGs' joint committee, known as the 'Improving Healthcare Together Committees in Common' is where the CCGs' leaders come together to agree proposals and make decisions about how Epsom and St Helier hospital services might change in the future. The meeting to make any decisions will be held in public and will consider all of the evidence and the consultation report.

Appendices

Appendix 1: Engagement activities undertaken during the first half of the consultation

	Engagement undertaken	Numbers reached	Key demographics reached so far	Geography	
70%	Listening events	<ul style="list-style-type: none"> • 6 listening events held (2 in each CCG area); another three planned 	<ul style="list-style-type: none"> • 935 	<ul style="list-style-type: none"> • All • Older people • Disabled people • People with long-term health conditions • Political stakeholders and interest groups 	<ul style="list-style-type: none"> • Surrey Downs, Sutton and Merton CCGs
50%	Mobile roadshows	<ul style="list-style-type: none"> • 8 mobile roadshows have taken place (up to 10 February) with another 8 being planned 	<ul style="list-style-type: none"> • 900 	<ul style="list-style-type: none"> • Deprived communities • Parents and carers • BAME populations • Seldom heard 	<ul style="list-style-type: none"> • Surrey Downs, Sutton and Merton CCGs
40%	Clinical pop-ups	<ul style="list-style-type: none"> • 8 clinical pop-ups have been held, with another 12 being planned 	<ul style="list-style-type: none"> • 130 	<ul style="list-style-type: none"> • Deprived communities • BAME populations • Maternity 	<ul style="list-style-type: none"> • Surrey Downs, Sutton and Merton CCGs
32%	Community outreach	<ul style="list-style-type: none"> • We have attended 14 sessions with patient, community and voluntary groups including tenants & residents associations; 29 further sessions (exceeding plan) 	<ul style="list-style-type: none"> • 331 	<ul style="list-style-type: none"> • Disabled people • BAME populations • Older people • Maternity • Deprived communities 	<ul style="list-style-type: none"> • Surrey Downs, Sutton and Merton CCGs
22%	Focus groups	<ul style="list-style-type: none"> • The delivery of 9 focus groups will take place between 17th February – 22nd February, with 2 focus groups completed to date 	<ul style="list-style-type: none"> • 18 	<ul style="list-style-type: none"> • All aged 65+ or 55+ with limiting long-term condition 	<ul style="list-style-type: none"> • Surrey Downs, Sutton and Merton CCGs



Improving Healthcare
Together 2020-2030

NHS Surrey Downs, Sutton and Merton CCGs



	Engagement undertaken	Numbers reached	Geography
Community Voluntary Sector Incentive Scheme	<ul style="list-style-type: none">• 2 focus groups ran by Merton Voluntary Service Council have taken place to date• Up until 16th March, the three lead Council Voluntary Services organisations (CVS) will continue to run c. 28 focus groups/ meetings with groups as identified in the impact assessments and seldom-heard groups	<ul style="list-style-type: none">• Each CVS will submit session reports	<ul style="list-style-type: none">• Surrey Downs, Sutton and Merton CCGs and Trust locations
NHS staff engagement	<ul style="list-style-type: none">• We have held over 20 sessions to inform CCG and Trust staff and wider clinical partners about the consultation and to seek and encourage feedback	<ul style="list-style-type: none">• Over 1400 staff	<ul style="list-style-type: none">• Surrey Downs, Sutton and Merton CCGs and Trust locations

Appendix 2: Examples of 'explainers'

