

Major Service Change

A report on NHS Dumfries and Galloway's Consultation on the Plans for Dumfries and Galloway Royal Infirmary

Summary Report

May 2012

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Executive Summary

- 1.1. NHS Boards need to work with patients and local communities when changes to a health service are being considered. The Scottish Government issued guidance in February 2010, entitled 'Informing, Engaging and Consulting People in Developing Health and Community Care Services', to assist NHS Boards in their engagement with local people on the delivery of healthcare services. When a service change is considered by the Scottish Government to be 'major', the Scottish Health Council produces a report assessing whether the relevant NHS Board has involved people in accordance with the expectations set out in the guidance.
- 1.2. This report on NHS Dumfries and Galloway's process for involving local people in the plans for a new Dumfries and Galloway Royal Infirmary outlines our approach to quality assurance, charts our communication with NHS staff in relation to the engagement and consultation process and highlights the issues raised by local people during the engagement and consultation process
- 1.3. Between October and December 2011, NHS Dumfries and Galloway carried out a public engagement and option appraisal process on its plans to build a new acute hospital to replace the existing Dumfries and Galloway Royal Infirmary. The Board's preferred option is to build the new hospital on a new site, but it agreed to proceed to formal consultation with five options, i.e. four new site options and the existing site. Formal consultation took place between 11 January 2012 and 11 April 2012.
- 1.4. The existing Dumfries and Galloway Royal Infirmary provides acute medical services for a population of 148,190 covering a catchment area of 2,400 square miles. An intermediate hospital, Galloway Community Hospital, is situated in Stranraer in the far west of the region and provides a range of services including Accident and Emergency, Maternity, Renal Service, Acute Medicine, Day Surgery and Palliative Care. There are nine cottage hospitals which are bedded units with some providing services such as minor injuries units.
- 1.5. The Cresswell Building which is a newer building situated adjacent to the existing Dumfries and Galloway Royal Infirmary, will remain on the existing site, along with the dental service currently based there. The maternity services currently provided in the Cresswell building will move to the new build. Plans on the best future use of this building are being developed with public input.
- 1.6. NHS Dumfries and Galloway has stated in its consultation and engagement materials that "All other hospitals across the region will continue to provide services as they do now¹."
- 1.7. NHS Dumfries and Galloway reviewed its services through the Clinical Workstreams work during 2008-09 when it was considering the redevelopment of Dumfries and Galloway Royal Infirmary and carrying out public engagement on 'Your NHS, Your Future Care'. In October 2011, the Scottish Government asked the Board to proceed with the production of an Outline Business Case for the proposal to develop a new build hospital facility rather than refurbishment of the existing building.

1 Plans for Dumfries and Galloway Royal Infirmary, NHS Dumfries and Galloway Consultation Document, 11 January 2012

- 1.8. A variety of methods were used to engage and consult with the population of Dumfries and Galloway including;
- display stands
 - information leaflet, map and individual topic information sheets
 - advertising via posters, press advertisements, website and Twitter
 - Participatory Appraisal which included street work, through existing Building Healthy Communities groups, which engaged with 928 people
 - 12 'drop-in' sessions were held at venues across the Board area and open to all which were attended by 203 people.
 - NHS staff attended 31 'Invite Us' sessions, which were pre-arranged meetings of a variety of groups covering older people, young people, disability groups, faith groups and community councils, where they spoke with 779 people.
- 1.9 All the methods used by NHS Dumfries and Galloway to establish the preferred site for the new build hospital resulted in 3,670 responses which indicated that two sites were preferred clearly over the remaining three options. The two most popular sites were preferred by 55% and 35% of respondents with the remaining three sites preferred by only 10% in total. The five sites included in the consultation are:
- Site A – Garroch
 - Site B – Summerfield
 - Site C – Tinwald Downs
 - Site D – Locharbriggs
 - Site E – current site.
- 1.10 The main issues raised by people during the consultation were: the need for a new hospital; the geographical location; introduction of all single rooms; sufficient and free car parking; sufficient bed numbers; no detrimental effect on the smaller hospitals.
- 1.11 The Scottish Health Council acknowledges the work undertaken by NHS staff in conducting this engagement and consultation, and the range of methods used to engage with people. The Scottish Health Council has identified the following learning points:
- The Scottish Health Council in its interim report on NHS Dumfries and Galloway's 'Your NHS, Your Future Care' public engagement advised NHS Dumfries and Galloway that improvements in the involvement of black and minority ethnic communities should be addressed, and, although we are aware of efforts to engage with this group during this consultation, this remains as a learning point.
 - It is important that consistent language is used across all documents and materials made available throughout an engagement and consultation process in order to avoid any confusion, particularly on key issues, such as site locations.
 - Consideration of the views of patients and the public at strategic level is an important aspect of an engagement and consultation process. The Scottish Health Council recommends that there is public representation directly at Project Board level to ensure that views are considered. The commercial and financial sensitivities of this project are acknowledged, however this type of representation has been demonstrated to work well

in similar situations in other NHS Boards, allowing patient and public input at all levels of the proposed service change.

- 1.12 The Scottish Health Council quality assured the process followed by NHS Dumfries and Galloway through a variety of methods by, for example:
- attending Stakeholder Reference Group meetings, 'drop-in' sessions, 'Invite Us' sessions, Public Partnership Forum meetings and talking to local people who took part in these
 - asking for people's views on the Board's engagement and consultation process via questionnaires, telephone interviews and discussions with groups
 - reviewing NHS documents relating to the service change.
- 1.13 The Scottish Health Council has assessed the consultation process and is satisfied that NHS Dumfries and Galloway has followed the Scottish Government's guidance² on involving local people in service change.
- 1.14 This report will be submitted to NHS Dumfries and Galloway prior to the Board meeting on 16 May 2012, where the Board will consider the outcome of the consultation. Following discussion and a decision, NHS Dumfries and Galloway will make a submission to the Cabinet Secretary for Health and Wellbeing for Ministerial approval. In the submission, the Board should demonstrate how they have taken into account the suggestions and concerns that arose during the consultation.

2 **Informing, Engaging and Consulting People in Developing Health and Community Care Services, CEL 4 (2010), The Scottish Government, 10 February 2010.** In this report, the phrase 'the guidance' shall refer to this Chief Executive Letter (CEL).



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