



Major Service Change

A report on NHS Highland's Consultation on the proposed modernisation of community and hospital services in Badenoch and Strathspey

September 2014

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1. Executive Summary

Background

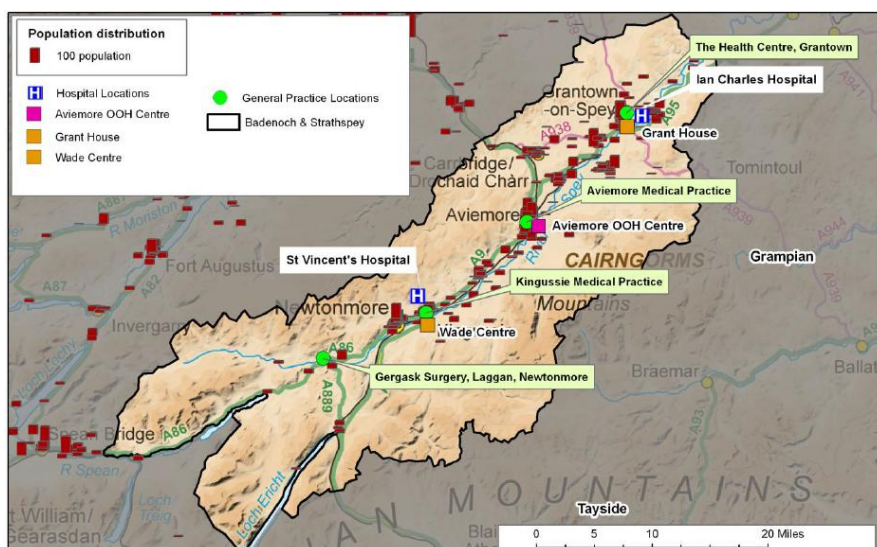
NHS Boards are required to work with people¹ when they are considering making changes to a service. The guidance, 'Informing, Engaging and Consulting People in Developing Health and Community Care Services'², outlines the process NHS Boards should follow to involve people in decisions about local services.

When the Scottish Government considers a service change to be 'major' the Scottish Health Council has a quality assurance role and reviews the process. This report shares our findings on how NHS Highland involved people in the proposed modernisation of community and hospital services in Badenoch and Strathspey. It also identifies good practice and suggests learning points for the future.

This report will be considered by NHS Highland when the Board reaches a decision on its proposals for change. It will subsequently be submitted by NHS Highland to the Scottish Government along with the Board's proposals which require to be approved by the Cabinet Secretary for Health and Wellbeing.

Proposal

Badenoch and Strathspey has a population of approximately 14,000 with the main centres being Aviemore, Granttown-on-Spey, Kingussie, Newtonmore and Nethy Bridge, pictured below.



¹ "people" refers to health service users, patients, staff, members of the public, carers, volunteers and voluntary organisations

² www.sehd.scot.nhs.uk/mels/CEL2010_04.pdf

NHS Highland's review of hospital and community services in Badenoch and Strathspey began in 2012. During 2013, a steering group, with a range of representatives, helped to develop proposals for future services in the area. In January 2014 the group identified a preferred option for consultation.

Consultation

The preferred option includes proposals to close both Ian Charles Community Hospital in Grantown-on-Spey and St Vincent's Community Hospital in Kingussie and replace them with a single hospital, based in Aviemore. The preferred option also includes:

- improved access to community-based services
- relocation of Aviemore Health Centre and The Glen Day Centre in Aviemore onto the new hospital/hub, and
- relocation of some community-based staff into the new hospital/hub.

A three month public consultation took place between 21st April and 21st July 2014. NHS Highland used a range of methods to provide local people with opportunities to give their views and ask questions about the proposed changes. In total, they received 176 responses to their survey and approximately 30 letters or emails from individuals during the consultation. Around 500 members of the public, patients, carers and staff took part in the consultation.

The main issues raised by people through the consultation included the following.

- Feedback, particularly from the Grantown-on-Spey area, indicated some resistance to the proposed withdrawal of services from their community.
- Concern was raised about transport arrangements from villages across the area to the proposed new hospital in Aviemore.
- A number of responses from people in Grantown-on-Spey supported the proposed hospital in Aviemore but also keeping Ian Charles Community Hospital in Grantown-on-Spey or keeping a few beds in the area.
- Several people questioned if the plans were 'future proof', and if the bed numbers will accommodate future population need.
- A proportion of responses requested more information on services that are likely to be available at the proposed hospital including X-ray and consultant outpatient clinics.
- There was a general feeling that the consultation focused on the proposed hospital, but some further detail was needed on how community and care at home services will be delivered and funded

Findings

Based on our review and feedback from local people, we are satisfied that NHS Highland has followed the Scottish Government's guidance on involving local people in the consultation about the 'Proposed modernisation of community and hospital services in Badenoch and Strathspey'.

Overall, feedback received indicated that the majority of people had understood the reasons for change, how the proposals had been developed, and felt listened to and that there had been sufficient opportunity to take part in the consultation.

Areas of good practice identified by the Scottish Health Council

- Early meetings and discussion with communities, groups and the public developed an understanding within the community on the need for change.
- The mail drop of the summary consultation paper to every household and local business allowed a wide exposure of the proposals and consultation process, and methods for participating.
- Ongoing review of the approach taken during the process, and in particular the midway review, allowed for a responsive and proactive approach during the consultation.
- Responding to requests for meetings or further information during the consultation demonstrated an active consultation process.
- The 'walkabouts' undertaken in local communities allowed for more targeted engagement and awareness raising in small community settings.
- Use of social media including YouTube, Facebook and Twitter (including the hash tag #strathchat as part of the engagement and consultation process).
- The way in which steering group members were encouraged to share information and get feedback from local groups and networks during the option appraisal allowed for a more open and transparent process

Learning points identified by the Scottish Health Council

- If NHS Highland plans to carry out mail drops in future consultations we would suggest carrying it out earlier in the process. Feedback suggested that people who attended the earlier meetings during the consultation had not had the opportunity to review the consultation materials.
- Consideration should be given to include public meetings dates in the summary consultation paper. Our feedback indicated the summary paper was the document most respondents had read.
- Consideration should be given to including the survey with the summary document. This may encourage people who would rather respond by post to do so more easily.
- For future consultations, NHS Highland may wish to include the findings of the initial transport assessment work. Feedback and points raised highlighted transport and access as a key area of interest for local people during the consultation.
- Consider sharing the options discounted during the option appraisal and the reasons for this at the public meetings. This will enable those attending to see that all practical options have been considered

NHS Highland plans to discuss its final proposal at the October 2014 Board meeting. If the proposal is supported by the Board it will then go to Scottish Government for a final decision by the Cabinet Secretary for Health and Wellbeing.

2. Introduction

The Scottish Government provides guidance for NHS Boards to follow when considering changes to health services. The guidance, 'Informing, Engaging and Consulting People in Developing Health and Community Care Services'³, outlines the process NHS Boards should follow when involving people in decisions about local services. (See Appendix 1).

This report on NHS Highland's process for involving people on the proposed changes to hospital services in Badenoch and Strathspey provides our assessment of how NHS Highland has involved people in line with guidance and highlights areas of good practice and suggested learning points for future activity. The report also outlines our approach to quality assurance, communication with NHS Highland, and feedback provided by local people during this process.

The Scottish Government has indicated that it views the proposed change to the hospitals and community services in Badenoch and Strathspey as major service change and as such the Board will submit its proposal to the Cabinet Secretary for Health and Wellbeing for final decision after its Board meeting in October 2014.

Our findings

Based on our review and feedback from local people we are satisfied that NHS Highland has followed the Scottish Government's guidance on involving local people in the consultation about the 'Proposed Modernisation of Health and Social Care Services in Badenoch and Strathspey'.

Our Approach

We have based our conclusions and suggestions in this report on the following:

- communication and meetings with NHS Highland
- observations and attendance at events and public meetings
- attendance at steering group meetings to provide advice based on the guidance and our experience of similar changes and engagement elsewhere in Scotland
- attendance at the option development and appraisal meetings held during 2013 and 2014
- review of the option development and appraisal process with the public representatives who took part
- review of the consultation documents, papers and information
- discussions with people after NHS Highland's meetings during the consultation period
- attendance at drop-in events and community council meetings

³ www.sehd.scot.nhs.uk/mels/CEL2010_04.pdf

- a focus group and telephone interviews with steering group members
- feedback received from our evaluation with those that participated in the process
- NHS Highland's midway review meeting with the steering group, and
- news articles, media and social media coverage of the consultation process.

Review of NHS Highland's engagement process

3. Planning

As soon as a Board is aware of a need to consider a change to a service, it should develop an involvement and communication plan.

The plan should ensure that potentially affected people and communities are provided with the information and support they need to play a full part in the process.

Informing, Engaging and Consulting People in Developing Health and Community Care Services

What NHS Highland did to meet the guidance

In 2012, NHS Highland attended a meeting with local MSPs, councillors, community council members, 'Friends of Ian Charles' and 'Friends of St Vincent's' hospital group members, public and staff to discuss the challenges with the current services provided in the area and shared information on the condition of the two community hospitals (Ian Charles Community Hospital, Grantown-on-Spey, and St Vincent's Community Hospital, Kingussie).

Following this, a steering group was set up in November 2012. NHS Highland used existing networks and contacts to invite people to take part in this steering group which represented a wide range of people and groups from across the area, including:

- patients and members of the community
- Friends of Ian Charles Community Hospital
- Friends of St Vincent's Community Hospital
- community and voluntary groups
- NHS staff, clinicians and managers
- doctors and GP practice staff
- community councils and local councillors, and
- other partners such as Highland Council and Cairngorms National Park.

NHS Highland has a responsibility to ensure the engagement process and proposals are subject to an equality and diversity impact assessment. This helps to identify potential impacts on different equality groups and ensures that the engagement process is accessible to everyone⁴.

The impact assessment identified the people and communities who may be affected by the proposals and considered the most appropriate methods to engage with people. For example, home visits were offered to people who were unable to attend meetings and

⁴ <http://www.healthscotland.com/equalities/hiaa/index.aspx>

Information was made available in alternatives formats (including audio versions) and languages throughout the process and support was offered to people who needed it to take part.

Our findings

We conducted early discussions with NHS Highland about the engagement process and they sought our advice on the development of their communications and engagement plan. In February 2013, we provided a presentation to steering group members on the guidance on involving the public in developing health and community care services. We subsequently attended the steering group meetings during the process.

We are satisfied that the steering group involves a range of the people and communities who could potentially be affected by changes in the Badenoch and Strathspey area.

Steering group members felt there had been good representation from across the area and they had the opportunity to comment on the plans for communication and engagement.

NHS Highland asked us to share examples of how other NHS Boards involved the public in similar reviews and were responsive to our suggestions on their engagement activity (for example, producing an audio version of the document).

The communication and engagement plan was reviewed and agreed with the steering group at key stages in the process. The plan demonstrates how NHS Highland used the impact assessment to inform their methods to engage with affected groups.

4. Informing

People and communities who may be affected by a proposed change should receive appropriate information on:

- clinical, financial and other reasons why change is needed
- benefits that are expected to flow from the proposed change
- processes which will be put in place to assess the impact of the proposal

Informing, Engaging and Consulting People in Developing Health and Community Care Services

What NHS Highland did to meet the guidance

NHS Highland used a range of methods to inform the public and communities of the challenges with current local services and why services need to change. It also explained the potential benefits of changing the way services are delivered and what impact this could have on communities and staff. Some of the methods used to inform the public included the following.

Meetings

- Meetings with local community groups, community councils and other forums about the condition of the current hospital.
- discussions at the bi-monthly NHS Highland public Board meetings.

Information

- Media releases and information on the NHS Highland website at key stages of the review.
- Features in two editions of the NHS Highland newspaper, which is delivered to every home in Badenoch and Strathspey
 - October 2013 (front page story on the review and work underway on options)
 - February 2014 (front page story on outcome of option appraisal and upcoming consultation).
- Regular articles in the Badenoch and Strathspey Herald.
- Articles in local community newsletters and papers.

Social Media

- Posts on NHS Highland's Facebook and Twitter accounts.
- Two videos uploaded to YouTube in November 2013; one with a local GP and one featuring local people involved in the review.⁵

District Partnership

NHS Highland discussed the redesign and engagement process with the Badenoch, Strathspey, Ardersier and Nairn partnership at key stages throughout the process.⁶

Transport issues were raised from discussions with the local communities and a travel survey was developed and used during the consultation for further understanding of the issues. Paper copies were available at Aviemore Health Centre and Glen Day Centre (Aviemore), St Vincent's Community Hospital (Kingussie) and Ian Charles Community Hospital (Grantown-on-Spey) and on NHS Highland's website.

The results of the survey, along with the feedback from the consultation, should be used to inform the work of the transport and access group. The group will consider how access and transport to the proposed new hospital in Aviemore could be improved.

Our Findings

We are satisfied that NHS Highland met the requirements of the guidance in informing people of the reason why change was needed in the process it followed.

Feedback from participants

In July 2014, six of the 11 patient and public representatives of the steering group attended our focus group. We asked about their experience and involvement in the earlier stages of the process. We also carried out two telephone interviews with people who were unable to attend. Those that took part felt:

- everyone contributed to the steering group and there was a good mix of people
- more groups were invited to join the steering group as the process developed

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<http://www.youtube.com/watch?v=HhQmLP32wGM&list=PL1KAR34UG74b852TDslajwkmmgQel1FwX>

<http://www.youtube.com/watch?v=BDJOVCltnE0&list=PL1KAR34UG74b852TDslajwkmmgQel1FwX>

⁶ Community Health Partnerships were replaced with District Partnerships when NHS Highland took on responsibility for adult health and social care services in 2013. Highland Council, Police Scotland, Scottish Fire & Rescue services, NHS Highland, and Highland third sector partnership are represented on the forum. There is no Public Partnership Forum in the area

- the initial meeting in Kingussie in 2012 was an objective look at the two hospital buildings in Kingussie and Grantown-on-Spey and created an understanding on the need for change.
- the corresponding meeting in Grantown-on-Spey (in 2012) could have benefited from the same level of detail on the current buildings. It was suggested it would have been useful for the people of Grantown-on-Spey to have that same understanding on the need for change at that stage.

5. Engaging

NHS Boards should develop options through a process that is open, transparent and accessible and in which potentially affected people and communities are proactively engaged.

Informing, Engaging and Consulting People in Developing Health and Community Care Services

What NHS Highland did to meet the guidance

NHS Highland undertook work to explore possible options for delivering change. This involved a process of option development and appraisal. An independent consultant led the steering group through an option appraisal⁷. The option appraisal⁸ involves a group of people who represent all of the interested parties, including those who are directly affected by the proposals, and those who are responsible for its delivery to be actively involved in the development of new services. NHS Highland involved patients and public representatives alongside NHS staff in developing options.

The flowchart in Appendix 1 helps to explain the different stages of the process and how it fits with wider engagement process.

Process

Three meetings were held in 2013 to develop a long list of options and to agree a shortlist of three options. At the December 2013 meeting the option appraisal scoring process was explained. The shortlisted options were:

Option 1 – Everything would stay the same but with some investment to address health and safety requirements around both hospitals ('Do minimum' option)

Option 2 - Community hospital and resource centre in one town 'hub' and scaled-down services in the other 'spoke', based on existing hospital sites

Option 3 - Community hospital and resource centre hub

The steering group scoring of options took place using agreed criteria in January 2014. Option 3; the development of a new 'Community hospital and resource centre hub' was identified as the preferred option. Potential sites were identified through several

⁷ www.scim.scot.nhs.uk > [Supporting Guidance](#)

⁸ www.scottishhealthcouncil.org/idoc.ashx?docid=91057819-dec4.

mechanisms including an advert in the local paper, inviting suggestions, and encouraging the steering group members to use contacts and networks.

A copy of the option appraisal report is available on the NHS Highland website.⁹

In April 2014, the steering group identified four potential locations in Aviemore from a long list, using the same approach as option appraisal. These were identified as:

- Site A:** Grainish Farm
- Site B:** Milton
- Site C:** Technology Park
- Site D:** Pony Field

It was agreed by the steering group that one of the criteria for selection was 'public preference'. The consultation survey asked people to indicate their preferred option and, if the proposals were approved, what their preferred site within Aviemore would be. NHS Highland will use this information to decide on the weighting of the 'public preference' criteria to complete the option appraisal on the site.

Our findings

The preferred option, a new hospital and health and social care resource centre in Aviemore, if approved, would lead to the closure of Ian Charles Community Hospital, Grantown-on-Spey, and St Vincent's Community Hospital, Kingussie. The engagement process showed that people value the quality of care delivered and there is a strong attachment to the hospitals in both local communities. However, there was a general understanding that change was required for future healthcare provision.

The approach NHS Highland took to involving the public was in accordance with guidance. In April 2014, the Scottish Health Council confirmed this and NHS Highland moved towards public consultation.

Feedback from participants

The feedback at the focus group in July from those that participated indicated that community and public representatives were happy with the information provided, and opportunity for involvement in the process. They also felt that views were listened to and generally felt their involvement had made a difference.

They felt the option appraisal process was complex but had been worthwhile. In particular, they felt the process for shortlisting the sites, advertising for sites, and the way the group set the criteria was approached well.

⁹ <http://www.nhshighland.scot.nhs.uk/News/PublicConsultation/BadenochStrathspey/Pages/Welcome.aspx>

Feedback received from participants on engagement process

- “.... the process was very inclusive with equal opportunity to express a viewpoint. It was very well thought out, managed and conducted.”
- “Fully explained and views listened to.”
- “Did not need nor asked for support - if I needed support I would have asked - I am sure that it would have been there.”
- “Pleased to be involved and engaged.”
- “The meetings were well conducted as you would expect from a professional body.”
- “I attended working group meetings on 6th Feb and 17th April and I found these much more productive than the open meetings.”

6. Consulting

When an NHS Board consults on a major service change, it should:

- produce a balanced and accessible consultation document that enables people to come to an informed view
- explore innovative and creative methodologies and approaches to ensure the process is inclusive
- where a preferred option is indicated by the Board, be clear that all responses to the consultation will be considered, including alternative suggestions that are put forward
- ensure the consultation lasts for a minimum of three months.

Informing, Engaging and Consulting People in Developing Health and Community Care Services

Context and history

Discussions about the future of the community hospitals in the area go back a number of years. Feedback indicates that this may have had an influence on how some people viewed the consultation and process.

It was suggested during the focus group, and in some of the survey responses, that there could be different perceptions in the two most affected communities (Kingussie and Grantown-on-Spey) about the state of the current hospitals buildings. Ian Charles Community Hospital (Grantown-on-Spey) may look newer; therefore it could be harder for people to accept the suggestion that it is no longer 'fit for purpose'.

What NHS Highland did to meet the guidance

NHS Highland undertook a three month public consultation between 21 April and 21 July 2014, to seek the views of patients and the public throughout Badenoch and Strathspey about the preferred option: to close both Ian Charles Community Hospital and St Vincent's Community Hospital and develop a community hospital and resource centre hub, based in Aviemore.

Publicising the consultation

A copy of the summary consultation paper was delivered to every home and business in the area in May which totalled 7,703 homes and 502 businesses. Prior to this, NHS Highland also shared the consultation information through its contacts and networks with the following groups and places:

- St Vincent's Community Hospital (Kingussie) and Ian Charles Community Hospital (Grantown-on-Spey)
- GP Surgeries and Health Centres, local care homes and Glen Day Care Centre in Aviemore
- pharmacies in Aviemore, Grantown-on-Spey and Kingussie
- dental units in Aviemore, Grantown-on-Spey and Kingussie
- Highland Council service points in Aviemore, Kingussie and Grantown-on-Spey
- the outpatient department in Raigmore Hospital, Inverness, and
- Citizens Advice Bureaux, libraries, post office and local groups.

NHS Highland also sought to make people aware of the consultation by issuing press releases, posters with meeting details, and adverts in the local press before the public meetings. Throughout the process they also communicated directly with others groups directly including all community councils, council, Friends of Ian Charles and Friends of St Vincent's.

NHS Highland put a link on the main page of their website to a dedicated webpage with background information on the review and the consultation, a calendar with the dates of meetings, consultation documents and guidance on how to provide views. They also put links on a number of community websites. NHS Highland used Facebook and Twitter to promote meetings and encourage people to get involved. A 'hash tag' was created (#strathchat) to allow people to further participate in discussion via Twitter.

Information about the consultation and meetings was shared through Facebook and Twitter by NHS staff, local groups, councillors and MSPs. There were a number of adverts and articles in the local newspaper about the consultation and meetings, in particular the Grantown-on-Spey public meeting. One article focused on the improvements that would be required to transport links should the proposals be approved.

There were also articles focusing on NHS Highland's proposals with the local MP and MSP encouraging people to take part in the consultation.

Methods

NHS Highland attended over 50 events and used a range of methods to engage with people and to gather views during the consultation. This included:

- ten community council meetings which were open to the wider public
- nine drop-in events
- three public meetings in Kingussie, Aviemore and Grantown-on-Spey
- a survey (online and paper based)
- attendance at local groups, voluntary groups and clubs
- meetings with MSP and local councillors
- meetings with partner agencies, including the Scottish Ambulance Service, the Local Authority, Cairngorm National Park, Transport Scotland and Access Panels
- attendance and information stand at the public exhibition about the A9 road, and

- meetings with NHS Highland staff and GP practice staff

A full list of NHS Highland's activity during the consultation period is available on the NHS Highland website.¹⁰

Walkabout

In May 2014, a member of the NHS Highland Communications team conducted 'walkabouts' in Newtonmore, Kingussie, Aviemore and Grantown-on-Spey. They spoke to people in local shops, cafes, village halls and libraries and asked people if they had heard about the consultation and asked them to display posters with meeting dates. This was followed up by a second 'walkabout' in Grantown-on-Spey. This aimed to increase awareness of the consultation among local people and as part of this activity NHS Highland spoke to around 50 people.

Midway review

NHS Highland undertook a midway review with the steering group halfway through the consultation period in May 2014. Feedback from steering group indicated that this midway review was useful and allowed NHS Highland to address issues raised about the process by targeting their engagement and encouraging people to respond.

Our findings

Based on feedback received and our attendance and observations at meetings, we are satisfied that NHS Highland has met the requirements of the guidance during consultation.

We are satisfied that a wide range of methods were used to promote the consultation and provided opportunities to reach all members of the community. NHS Highland reviewed its process throughout the three month consultation and used suggestions from the public and the Scottish Health Council to adapt where appropriate.

Meetings

We attended some of the public meetings, community councils and drop-ins during the consultation. Responding to the numbers in attendance, NHS Highland provided presentations in formal and informal styles on the background, process to date, options and proposals. NHS Highland allowed sufficient time at these meetings for questions and offered to speak to people after the meetings on a one-to-one basis where more detailed responses were required. Copies of the consultation document, relevant reports, supporting information, maps and surveys were available at the meetings.

At the public meetings there were a number of questions about the proposals and how the preferred location of Aviemore had been reached. At the public meeting in Grantown-

¹⁰

<http://www.nhshighland.scot.nhs.uk/News/PublicConsultation/BadenochStrathspey/Pages/Welcome.aspx>

on-Spey people also made statements about the history of the hospital and the quality of care which was acknowledged by NHS Highland.

From our observations, the discussion at this meeting may have benefited from sharing more information about the options that had been discounted during the option appraisal and the reasons for this.

A summary of the main issues and discussion points recorded by the Scottish Health Council during public meetings, community councils and drop-ins are listed below:

Summary of the main issues and discussion points

Transport	Access to the new hospital in Aviemore, ambulance availability and the issues with local transport
Palliative care and respite care	Current provision and future provision in the new proposals
Future proofing, bed numbers	There was concern as to whether the proposed hospital would be big enough, given the increasing elderly population
Care at home and Carers	How care could be provided in the community if there was a shortage of paid carers
Future services	Questions about potential increase in local outpatient service and clinical outreach, use of telemedicine

Consultation survey

We undertook a survey during the consultation to gain people's views on the process. We received 91 responses from people that had taken part in these activities with the majority identifying themselves as individuals, community council members or voluntary organisation representatives.

The responses indicated that the majority of people felt that there had been sufficient opportunity for people to take part, and the reasons for change, and how proposals were developed was clear.

Summary of survey feedback:

- **92%** of respondents found the reasons for the proposed changes to be clear
- **89%** felt it was clear how the proposals were developed
- **90%** felt they had the opportunity to give views about the proposals
- **93%** felt they had the opportunity to ask questions

- **83%** felt their views were listened to
- **91%** felt question asked were answered
- **89%** felt they understood how the decision will be taken on the proposed changes

Comments on the process were generally positive and commended the efforts by NHS Highland to involve people. However, some suggestions indicated that there could have been earlier and wider publicity of the consultation and the meetings.

Comments on the proposals were broadly supportive of existing facilities and staff. Concerns were raised and relating to transport and access, however several comments acknowledged the need to change. This was similar to the observations made by Scottish Health Council staff attending public meetings, in particular at the Grantown-on-Spey public meeting.

Information

The majority of people (82%) who responded to the survey had seen a copy of the consultation paper and felt it had provided them with enough information. It was suggested that further information in the summary paper, and at the meetings, on the following topics would have been helpful:

- transport
- sites
- existing buildings, services and staff
- national policy- building standards
- cost of refurbishing existing community hospitals and overall costs, and
- services that could be delivered in the community and at the hospital in the future.

It was also suggested a brief summary of the options that did not make the short list would have been useful.

Most of this information was available in the full consultation paper and there was signposting to further information on the website and on request. The detailed information on sites and what will happen to the building should be shared with the wider public after NHS Highland and the Cabinet Secretary for Health and Wellbeing make a final decision.

NHS Highland undertook a transport survey as part of the public consultation and set up a transport and access group in July to look at the feedback from the consultation. NHS Highland should share this information with the wider community when available.

Proposals

The comments we received mainly focused on issues around transport, finance, and the single room policy. Feedback, particularly from the Grantown-on-Spey area, indicated a resistance to the proposed withdrawal of services from their community. Other comments received are summarised in the following points.

- Concern was raised about transport arrangements from villages across the area to the proposed new hospital in Aviemore.
- A number of responses from people in Grantown-on-Spey supported the proposed hospital in Aviemore but also keeping Ian Charles Community Hospital in Grantown-on-Spey or keeping a few beds in the area.
- Several people questioned if the plans were 'future proof', and if the bed numbers will accommodate future population need.
- A proportion of responses requested more information on services that are likely to be available at the proposed hospital including X-ray and consultant outpatient clinics.
- There was a general feeling that the consultation focused on the proposed hospital, but some further detail was needed on how community and care at home services will be delivered and funded.

Focus Group

Feedback at the focus group in July 2014 from those that participated in the process indicated that people felt that NHS Highland has improved how it works with communities over the last 10 years.

People felt that NHS staff had been approachable, honest, upfront and logical. Comments were very positive in general about all of the NHS Highland staff that had been involved in this work and it was felt that it was particularly helpful to have a GP providing information at meetings and involved in the process.

Feedback received from participants on consultation:

"It is always difficult to consult and you seem to have done as good (a job) as any."

"There is a view that no matter what local people say it won't be listened to, but that comes up in most consultations!"

"Leave our hospital at Grantown, go ahead with new hospital at Aviemore."

"Not sure that the general public realised their views were important."

"Have been impressed how determined NHS Highland officers have been to ensure the community voice was heard."

"Whilst I support the proposal, I am convinced everyone would be happier if some provision could be retained locally."

"It seems people in general talk amongst themselves instead of going to a meeting to voice their opinions."

"I feel a decision has been made and will take little regard for what public thinks."

"The decision on the new health centre/hospital seems to precede the completion of the transport and community care plans, which is a worry."

7. Next steps in meeting the guidance

The feedback stage is of vital importance in maintaining public confidence and trust in the integrity of the involvement process and Boards should provide feedback to the stakeholders who took part in a consultation to:

- inform them of the outcome of the consultation process and the final agreed development or change
- provide a full and open explanation of how views were taken into account in arriving at the final decision
- provide reasons for not accepting any widely expressed views
- outline how people can be involved in the implementation of the agreed change, and explain how communities can contribute to the implementation plan.

Informing, Engaging and Consulting People in Developing Health and Community Care Services

This report has been shared with NHS Highland and is due to be considered at its Board meeting in October 2014, where it will consider the outcome of the consultation process.

Following discussion, the NHS Highland's final proposal will be submitted to the Cabinet Secretary for Health and Wellbeing for Ministerial approval. In this submission, the Board should demonstrate how it has taken into account the suggestions and concerns during the consultation period and how these have been addressed in its decision.

Before NHS Highland's Board meeting

There will be a period of time between the consultation ending and the Board of NHS Highland taking a decision on the final proposal. Several actions have been identified and agreed by NHS Highland in taking this work forward. This includes:

- review the results and feedback from the consultation to inform the final proposals
- analyse the results of the transport surveys
 - share this information with the transport and access group so they can consider how issues relating to access and transport to the proposed new hospital could be addressed¹¹
- share the consultation results and other relevant information with the steering group to agree the weighting for the criteria on the 'public preference'
 - complete the option appraisal on the site of the proposed hospital

¹¹ We are aware that this is wider than a NHS issue and solutions will be developed over time. Will be important to continue to share information on the work of the group and solutions to transport and car parking as the project develops

We would also suggest using a wide range of communication methods and networks it developed during the consultation to share the outcome of this further work and explain how the final proposal was developed

After a decision has been taken

It will be important to feedback to people what the decision of NHS Highland's Board and the Cabinet Secretary for Health and Wellbeing is and to advise on any opportunities for further involvement in this process.

As NHS Highland moves to the next stage of the process, we feel communities would benefit from the further discussions on specific topics. These come from our own observations, experience and suggestions made from the public during the process. These include the following

- **Home care and community services**

During the consultation, it was acknowledged there are currently issues with services in the area. It was suggested NHS Highland explain how services work and get people's ideas on how these can be improved. Respite and Palliative Care beds were mentioned and people felt it needed further discussion on how these services will be delivered locally in the future.

- **Bed numbers and single rooms**

As the business case develops, it may be helpful to share plans and designs with the wider community to help people understand what the hospital will look like, including single rooms and how they can be used.

8. Areas of good practice and learning points

The Scottish Health Council acknowledges the extensive work undertaken by NHS Highland in this engagement and consultation and the range of methods used to engage people.

NHS Highland engaged with the Scottish Health Council at an early stage, resulting in positive, constructive communication throughout the process.

NHS Highland has agreed to take part in an 'after action review' with the Scottish Health Council to explore any improvements in how we work together in future.

As the NHS looks to deliver continual improvements in the quality of its public involvement activities, it is appropriate to identify areas of good practice and learning points.

NHS Highland was proactive in its approach to engaging with communities and groups by going 'to them', for example offering to meet people in their own settings whether at home or going along to lunch clubs. It also offered the opportunity for people to talk in a smaller group through the drop-in sessions as well as the larger public meetings.

We feel the following areas of good practice helped to enhance the engagement process undertaken by NHS Highland and highlight some of the more innovative approaches it used.

These are drawn from comments received from the public during the process and our own observations.

Areas of good practice

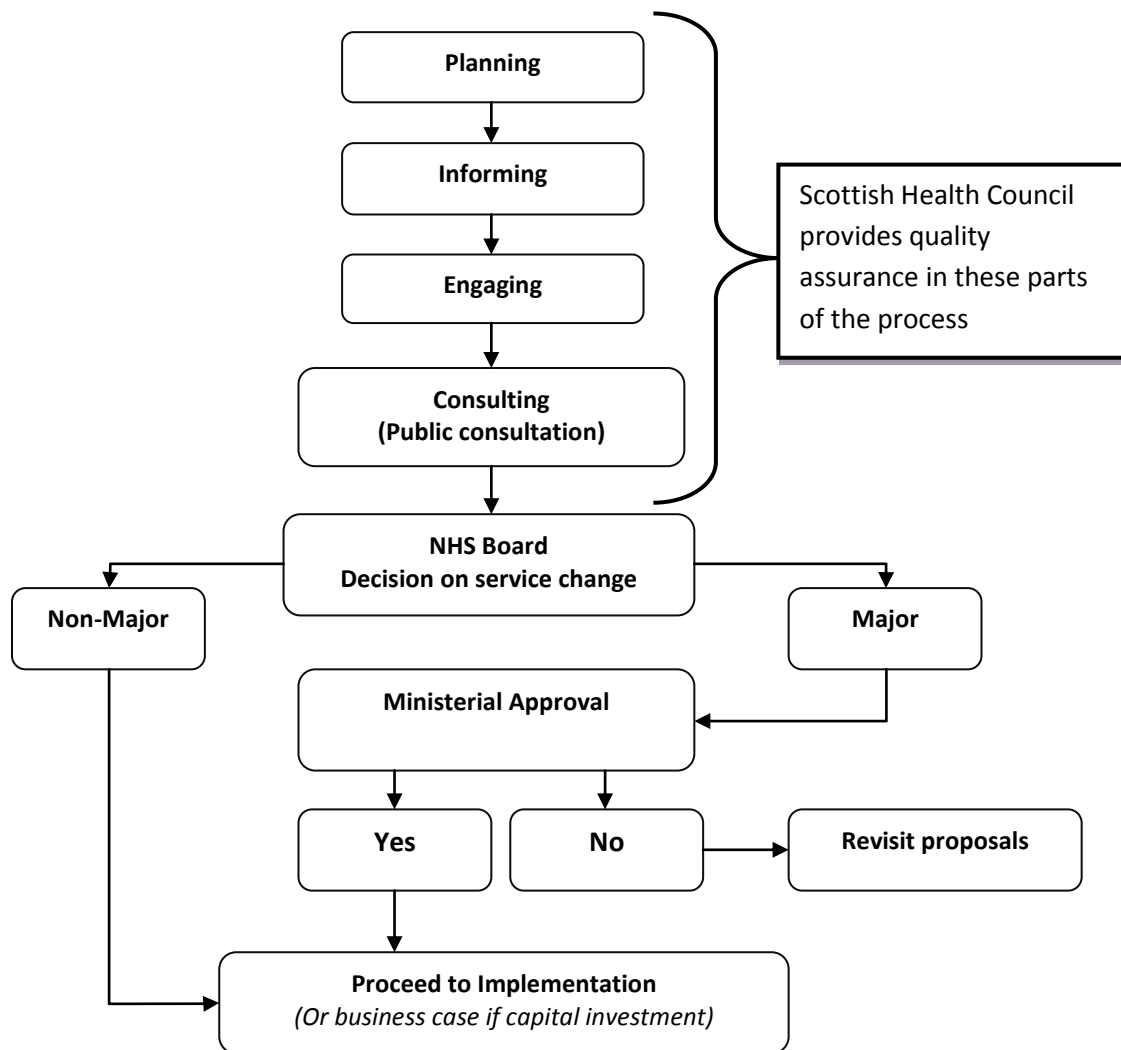
- Early meetings and discussion with communities, groups and the public developed an understanding within the community on the need for change.
- The mail drop of the summary consultation paper to every household and local business allowed a wide exposure of the proposals and consultation process, and methods for participating.
- Ongoing review of the approach taken during the process and in particular the midway review allowed for a responsive and proactive approach during the consultation.
- Responding to requests for meetings or further information during the consultation demonstrated an active consultation process.
- The 'walkabouts' undertaken in local communities allowed for more targeted engagement and awareness raising in small community settings.
- Use of social media including YouTube, Facebook and Twitter (including the hash tag #strathchat as part of the engagement and consultation process.
- The way in which steering group members were encouraged to share information and get feedback from local groups and networks during the option appraisal allowed for a more open and transparent process.

Learning points

- If NHS Highland plans to carry out mail drops in future consultations we would suggest carrying it out earlier in the process. Feedback suggested that people who attended the earlier meetings during the consultation had not had the opportunity to review the consultation materials.
- Consideration should be given to include public meetings dates in the summary consultation paper. Our feedback indicated the summary paper was the document most respondents had read.
- Consideration should be given to including the survey with the summary document. This may encourage people would rather respond by post to do so more easily.
- For future consultations, NHS Highland may wish to include the findings of the initial transport assessment work. Feedback and points raised highlighted transport and access as a key area of interest for local people during the consultation.
- Consider sharing the options discounted during the option appraisal and the reasons for this at the public meetings. This will enable those attending to see that all practical options have been considered.

Further information on NHS Highland can be found at www.nhshighland.scot.nhs.uk

9. Appendix 1- Informing, Engaging and Consulting People in developing Health and Community Care services



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- অন্যান্য ভাষাতেও জানাতে পারি

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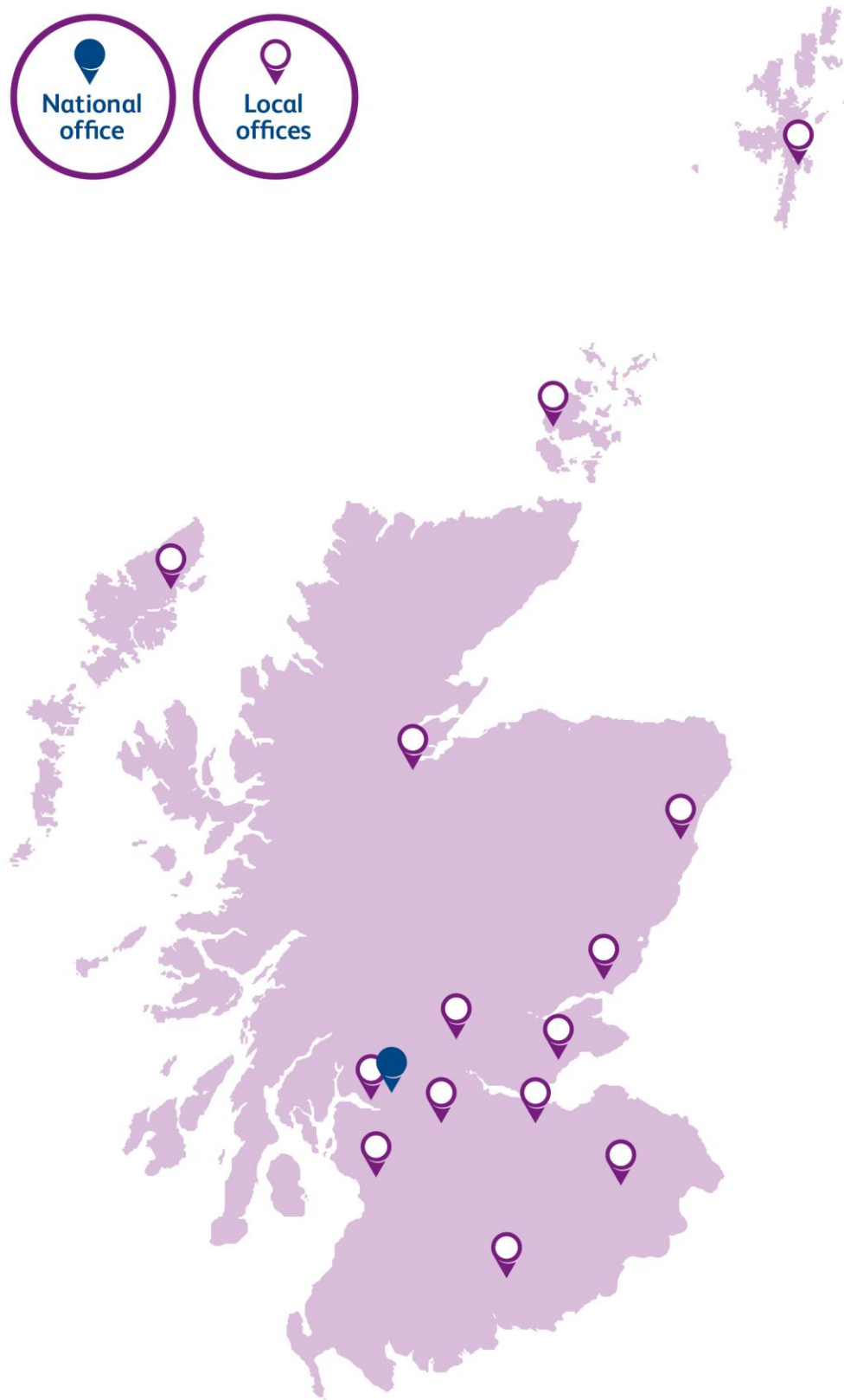
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