

Future of Local Health Services - Pre-consultation Process

Case for Change

Solution Generation

Proposals for change

Communications and engagement plan (who, what, when and where)

Service users, carers and the public; seldom heard groups; workforce and clinical; system leaders, OSC; NHSE; political stakeholders; Healthwatch; voluntary sector

1. Launch

- Engage with stakeholders
- Communicate programme aims/vision, key decision points and milestones
- Develop initial communications and engagement plan (inc press release, website, social media and engagement event planning etc)

2. Case for Change

- Clear identification of the problem we are trying to solve
- Demographics inc. health inequalities
- Current and future demand
- clinical case for change
- Identify key service areas for change
- Finance and Estates
- Workforce

3. Issues Paper – what is the problem we are trying to solve?

- Formative ideas for potential solutions inc clinical models, covering clinical sustainability, financial delivery, public acceptability (also see Governance and assurance)

4. Pre Consultation Preparation

- Pre-consultation Mandate
- Stakeholder identification and analysis
- EIA on engagement process
- Communications and engagement plan

5. Option generation

Develop proposals based on CFC and exploring quality, cost, access (impact on travel times) and deliverability

- Identify possible solutions
- Co-produce criteria through engagement
- Apply essential criteria and identify long list of viable options
- Apply desirable criteria and identify shortlist of options
- Rank short list
- Preferred option**
 - Quality Impact Assessment
 - EIA on service change proposals unintended consequences, benefits and discrimination risks

6. Develop PCBC

- Outline the case for change and links to JSNAs, JHWS, STP, CCG and NHSE commissioning plans
- Detail stakeholder involvement and themes - how we responded to what they said. What was discounted and why
- Identify governance and decision making arrangements
- Describe the options, how they were evaluated, who by and any co-dependencies
- Include analysis of travelling times and distances
- Identify the number of people affected and benefits to them
- Describe impact in terms of outcomes
- Outline how changes will promote equality, tackle health, inequalities and PSED
- Explain how proposed changes impact on local government and response from LG
- Demonstrate how proposals meet 5 tests
- Workforce
- Describe cost, capital implications, ROI, benefits realisation and indicative implementation plan for preferred option
- Summarise IG issues identified by PIA
- Show that options are clinically viable, affordable and deliverable
- Supporting information: EIA/QIA, Consultation plan, Analysis plan
- Public facing material
- Letters of support etc

Requirements

Requirement:

- Demonstrate that patients and the public have been involved in the development and consideration of proposals for change
- Issues paper – outlines the context and tells the story; is open on assumptions; does not curtail debate to choices already made; promotes transparency, identifies who is interested; invites early participation

Consultation:

- Overview and Scrutiny Committees

Requirements

Requirement:

- Demonstrate that patients and the public have been involved in the development and consideration of proposals for change
 - Consultation with Local Authorities
- Assurance:
- Clinical Senate assurance process inc. site visits, interviews, assessment of documents, costs of preferred option, ROI and benefits realisation

Consultation:

- Overview and Scrutiny Committees

Requirements

Requirement:

- Build on the case for change.
- Demonstrate -that all options, benefits and impact on service users have been considered.
- Demonstrate - that the planned consultation will seek the views of patients and members of the public who may potentially be impacted by the proposals
- Discharge public sector equality duty (PSED)
- Check against 5 tests of service redesign

Assurance

- NHSE Service Change Assurance Process

Consultation:

- Joint Health Overview and Scrutiny Committee

Public consultation

Reaching all stakeholders and offering a range of opportunities to express views

Decision making and implementation

Informed by analysis plan, published outputs within 12 weeks post consultation. Due regard must be demonstrated in decision making

Gunning Principles must be considered throughout; i) A consultation must be at a time when proposals are still at a formative stage, ii) Must give sufficient reasons for any proposal to permit intelligent consideration and response, iii) Adequate time must be given for consideration and response, iv) The product of consultation must be conscientiously taken into account