

East Kent Maternity Services Review

An evaluation of the public consultation by the Centre for Nursing and Healthcare Research at the University of Greenwich



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Executive Summary

This is an evaluation of the review of the maternity services consultation in east Kent, commissioned by NHS Kent and Medway and provided by the Centre for Nursing and Healthcare Research in the School of Health and Social Care of the University of Greenwich.

This report will present an evaluation of the public consultation in both the pre-consultation engagement with the public and the formal consultation stages of the Maternity Services Review, which have been considered in other reports on the consultation.

Evidence presented by NHS Kent and Medway is compared to NHS Guidance on service reconfiguration and the four tests, the requirements under section 242 and 244 of the Public Involvement in Health Act 2007 for reporting and the HM Government Code of Practice on Consultation. The evaluation shows that the criteria have been met, although two Code of Practice criteria require further review at a later stage as they cannot be fully met at this stage.

Evidence presented by NHS Kent and Medway of the reach and range of communications about the maternity service review during the formal consultation period are described and found to be wide ranging in type and distribution as well as targeted at hard to reach groups. The consultation exercise also generated publicity in the local media. The survey questionnaire was evaluated for “lessons learned” and this exercise is also reported to inform future consultations.

This independent review of the evidence finds that the pre-processes employed in the pre-consultation and the consultation exercise met the standards recommended in current guidance and legislation that we were able to assess.

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1. Introduction

This is a report on the review of maternity services in east Kent, commissioned by NHS Kent and Medway and provided by the Centre for Nursing and Healthcare Research in the School of Health and Social Care of the University of Greenwich.

This report will present an evaluation of the public consultation in both the pre-consultation engagement with the public and the formal consultation stages of the Maternity Services Review, which have been considered in other reports on the consultation.

It will include reviewing evidence presented by NHS Kent and Medway in comparison to NHS Guidance on service reconfiguration and the four tests, the requirements under section 242 and 244 of the Public Involvement in Health Act 2007 for reporting and the HM Government Code of Practice on Consultation. The reach and range of communications during the formal consultation period will also be considered. The survey questionnaire was evaluated for “lessons learned” and this exercise is also reported. This report will be submitted to the Maternity Services Review Group.

The scope of this report includes Government and NHS regulations and guidance on consulting the public. It also includes communications in any format, via any route, from NHS Kent and Medway and East Kent Hospitals University NHS Foundation Trust, which publicised the Maternity Services Review and encouraged the public to complete a survey and express their views. Publicity attracted by the Maternity Services Review and consultation, in any format, during the pre-consultation engagement January to September 2011 and the period of the public consultation, from 14th October 2011 to 20th January 2012 will be considered.

The approach includes comparing the evidence presented by NHS Kent and Medway with the relevant government legislation, code of practice and NHS guidance, to identify if criteria have been met. Communications are catalogued, classified and analysed to explore the reach and range of the consultation and compliance with the Code of Practice. A lessons learned exercise was carried out to review the survey questionnaire.

2. Pre-consultation

The NHS Kent and Medway Commissioning brief for the independent analysis of three separate reviews of services stated that;

“The purpose [of the independent analysis] is to provide external support to three complex pieces of work, and additional independence and accountability to the processes which are governed by legislative requirements under section 242 and 244 of the Public Involvement in Health Act 2007, and the recent guidance from Sir David Nicholson on service reconfiguration and the four tests.”

Requirements under section 242 and 244 of the Public Involvement in Health Act 2007

These requirements relate primarily to:

- **Duty to involve users of health services**

“...section 242(1B) provides that relevant English bodies must involve (whether by consultation or provision of information, or in other ways) users of health services in the planning of the provision of services, the development and consideration of proposals for change in the way services are provided and decisions affecting the operation of services...”

Evaluation: Based on the evidence we have received to date, reported on earlier and below, this requirement is fully met.

- **Reports on consultation**

“This section [242] amends the 2006 Act to impose a duty on Strategic Health Authorities and Primary Care Trusts to report, at times directed by the Secretary of State on consultations they have conducted, or intend to conduct, in relation to commissioning decisions for which they are responsible.”

Evaluation: At this stage (pre-issue of any of the three reports) it is not possible to evaluate this requirement fully, as earlier reports provide the main vehicle for informing interested parties of the public view of maternity services in East Kent.

NHS Reconfiguration guidance and the four tests

There are four tests, that any service reconfiguration proposal needs to pass. These are: support from GP commissioners, strengthened public and patient engagement, clarity on the clinical evidence base and consistency with current and prospective patient choice. All four criteria need to be met in order for a public consultation to proceed. This report considers the criteria “strengthening public and patient engagement”.

Evaluation: Evidence was provided of strengthening public and patient engagement in an earlier report. The full consultation document describes the process used to solicit early views and what these were and how they informed the development of options. Based on all of this evidence the criterion has been met.

3. HM Government Code of Practice on Consultation

The code¹ sets out the approach the Government will take when it has decided to run a formal, written, public consultation exercise and may be adopted by any public sector organisation. It has seven consultation criteria. These are:

1 When to consult

Formal consultation should take place at a stage when there is scope to influence the policy outcome

Evaluation: The maternity service review timetable allows for reporting on the results from the public consultation to the Maternity Review Group, before their recommendations are made to the NHS Cluster board and the local hospital board who are the decision making organisations, hence there is sufficient time for the public viewpoint to be fed in to the decision making process.

The survey document stated that;

“No decisions have been taken yet and your views are important in helping us make the right decision”

Despite this, survey respondents questioned the transparency of the decision making process because of the temporary closures of birthing facilities at Canterbury and Dover. However, based on all of this evidence the criterion has been met.

2 Duration of the Consultation

Consultations should normally last for at least 12 weeks with consideration given to longer timescales where feasible and sensible.

Evaluation: The public consultation began on October 14th 2011 and ended on January 20th 2012, which allows a total of 14 weeks. Based on this evidence the criterion has been met.

3 Clarity of Scope and Impact

Consultation documents should be clear about the consultation process, what is being proposed, the scope to influence and the expected costs and benefits of the proposals

Evaluation: A consultation document was provided, which explained the process and proposals. It included costs and benefits for each option and gave the respondents the opportunity to comment on the advantages and disadvantages of the options proposed. Based on this evidence the criterion has been met.

¹ HM Government Code of Practice on Consultation can be found on the website:

<http://www.bis.gov.uk/files/file47158.pdf>

4 Accessibility of consultation exercises

Consultation exercises should be designed to be accessible to, and clearly targeted at, those people the exercise is intended to reach

Evaluation: This criterion is evaluated in the reach and range section of this report. See below. Based on this evidence the criterion has been met.

5 The burden of consultation

Keeping the burden of consultation to a minimum is essential if consultations are to be effective and if consultees' buy-in to the process is to be obtained.

Evaluation: The consultation document is 28 pages in length, presented in colour with photographs as well as text. Sections include choices for birth, the reasons for change, early views, what the options are, frequently asked questions and a summary. There is also an 8 page summary document. The survey was 6 pages in length with 18 closed questions and 9 open ended questions. Several respondents commented that some questions were leading.

The survey was also available online. Other ways of the public providing feedback included emailing comments or attending public meetings. There were multiple ways of accessing information and responding. Based on this evidence the criterion has been met.

6 Responsiveness of consultation exercises

Consultation responses should be analysed carefully and clear feedback should be provided to participants following the consultation.

Evaluation: Consultation responses were independently analysed and reported by the University of Greenwich Centre for Nursing and Healthcare Research, to the Maternity Review Group, who will be responsible for making recommendations to NHS Kent and Medway, taking into account the public view. Based on this evidence the criterion has been met. At this stage, we are currently unable to assess the participant feedback mechanisms as this aspect of the consultation process is still pending.

7 Capacity to consult

Officials running consultations should seek guidance in how to run an effective consultation exercise and share what they have learned from the experience.

Evaluation: The consultation exercise was instigated by the Maternity Review Group and conducted by the Assistant Director of Citizen Engagement, a role which specialises in communications with the public for the NHS Kent and Medway. The original commissioning brief was also informed by the Requirements under section 242 and 244 of the Public Involvement in Health Act 2007 suggesting national guidance had been sought and followed. The brief for the independent analysis of the consultation data included making recommendations about the questionnaire design. Based on this evidence the criterion has been met.

4. Consultation - Reach and Range

446 people completed and returned the Maternity Services Review Consultation questionnaire.

Of these 446 people, 234 completed the online survey and 212 returned the paper version of the questionnaire.

3 easy read surveys were received; these have been considered separately as the questions do not exactly match those in the main survey and they were received outside the consultation period.

Of the 446 respondents:

- 399 (93%) were women
- 29 (7%) were men (3 people preferred not to answer and 15 gave no response at all)
- 44 respondents (10%) identified themselves as having a disability of some kind
- 205 respondents (47%) identified themselves as being Christian, while 102 respondents (23%) preferred not to answer this question or the response was not applicable
- Over half of the respondents (59%) were under 35 years of age

Age profile

	Frequency	%
Under 16	1	0.2
16-24	41	9.6
25-34	212	49.4
35-44	120	28.0
45-54	29	6.8
55-64	14	3.3
65-74	7	1.6
75 and over	3	0.7
Prefer not to say	2	0.5
<i>Total</i>	<i>429</i>	<i>100</i>

17 respondents did not provide an answer

Ethnicity

	Frequency	%
English/ Welsh/ Scottish/ Northern Irish/ British	373	86.9
Bangladeshi	3	0.7
Irish	5	1.2
Chinese	1	0.2
Any other Asian Background*	3	0.7
Any other white background*	25	5.8
Caribbean	1	0.2
White and Asian	2	0.5
Any other ethnic group*	5	1.2
Indian	1	0.2
Prefer not to say	10	2.3
<i>Total</i>	<i>429</i>	<i>100</i>

17 respondents did not provide an answer

* includes Filipino, British / Australian, South African Asian, Dutch, Vietnamese, Romanian, Portuguese, English/American, Polish, British/French, Turkish/English, Hungarian, Dutch/European, European

Evidence has been provided by NHS Kent and Medway that:

Consultation documents were available in different formats

Paper versions of both the full and summary consultation documents were offered in the following languages - Polish, Czech, Chinese, Nepalese, Romanian and Slovak. Accessibility was provided with Braille, easy read paper or audio versions. All of these could be obtained by telephone or email.

3 easy to read surveys were received (outside the consultation period). No surveys were received in foreign languages, Braille or audio formats. The electronic version of the survey on the website was available in the standard format. The survey document invited responses by email.

The relevant community was engaged including seldom heard groups

Visits were made by the community engagement team to a variety of community children's facilities in locations throughout east Kent, a total of 41 different groups, including those catering for the seldom heard, were visited at 51 venues, throughout the consultation period. Views were heard and individuals were encouraged to respond to the survey.

Consultation documents and paper surveys were widely distributed

The survey and consultation document were sent to e.g. the Ethnic Minority Independent Council with 10 copies of Czech, Nepalese and Chinese documents.

Paper copies of the consultation document and surveys were posted to 454 contacts including councillors, libraries, children's centres, nursery schools, GP surgeries and health centres and Gateway plus centres. These locations also received posters advertising the consultation and inviting participation.

Posters, consultation documents and surveys were also delivered by hand.

There was wide electronic distribution of consultation documents

1,684 emails containing the e-version of the consultation document were sent out to venues that service users might visit including libraries, children's centres, and GP Surgeries as well as individuals who had expressed an interest e.g. at road shows and other interested parties such as local councillors.

Publicising the consultation and survey and encouraging the public to take part

The consultation was publicised on radio and TV and ¼ page ads were taken out in papers that cover Dover, Folkestone, Canterbury, Ashford, Faversham and Thanet, twice during the consultation period NHS Kent and Medway and/or East Kent Hospitals University Foundation NHS Trust gave 8 media releases and 13 media statements e.g. in response to questions, during the consultation period.

Taking Public Views

Public Meetings were held in all 6 council areas of east Kent, in all the main towns and city. Where attendance was likely to be higher (Canterbury and Dover) more than 1 meeting was held. Each meeting began with an explanation of the consultation and survey made by a member of the Maternity Service Review Group.

Staff meetings were held at all locations where birthing services are/have been provided including William Harvey Hospital, Dover Birthing Centre, Canterbury Birthing Centre and Queen Elizabeth the Queen Mother Hospital, and staff were updated on progress with the review and encouraged to complete a survey. There was also a meeting with the Royal College of Midwives.

All emails, letters, calls and petitions were recorded and responded to.

Other organisations

Members of the Maternity Services Review Group made presentations to organisations who are stakeholders, such as local councils to enable them to make an informed organisational response.

Organisational responses were catalogued and summarised

How the consultation was reported

The maternity service review was reported in 3 television news features and 3 radio news programs.

There were 100 press reports of the maternity review during the consultation period in the 27 different local papers covering every community in east Kent.

Learning points

A number of learning points were discovered in the process of analysing and evaluating the survey responses. These are summarised below.

Manual or Electronic Document	Finding	Learning
Electronic Survey	1 text box containing 777 words	Paper survey text boxes indicate expected length of response. Capping electronic text at a similar number of words would make the two formats consistent.
Manual and Electronic Survey	Questions ordered differently in manual and electronic versions	Increased chance of data input error. Manual and electronic versions of a questionnaire should be ordered consistently
Manual and Electronic Survey	7% of the respondents to the electronic survey commented that questions were 'leading'	Wording of questions should be neutral. Ranking or a Likert Scale may obviate bias
Consultation documents in paper and electronic formats	Well presented and user friendly format	Other consultations would benefit from using a similar format
Manual and Electronic Survey	Analysis of themes provides overview of the content of all responses for each question	Detailed analysis of one specific theme in all questions or one specific aspect of care e.g. breast feeding in all questions would provide information to inform service development on that theme/care aspect
Manual and Electronic Survey	9 open ended questions- with each successive question less is written/typed.	Less open ended questions may produce a fuller response in each one
Manual and Electronic Survey	Survey design did not always accommodate research processes that followed e.g. no data coding boxes	Survey design should facilitate processes such as data cleaning, data analysis etc.
Manual and Electronic Survey	Questionnaires were not numbered prior to distribution.	Numbering questionnaires and logging destination would allow tracking and analysis of locations that produced the highest response
Manual and Electronic Survey	"Any other comments?" is a very broad question providing many different responses	Analysis of themes of the responses to "Any other comments?" may not be meaningful, as the replies are so fragmented.

5. Summary

This report considers both the pre-consultation and consultation periods of the Maternity Services Review in east Kent.

In the pre-consultation period the requirements of NHS Guidance on service reconfiguration and the four tests, the requirements under section 242 and 244 of the Public Involvement in Health Act 2007 for reporting and the HM Government Code of Practice on Consultation are considered. The evidence from NHS Kent and Medway shows that that the criteria are met in all cases. Two Code of Practice criteria require further review at a later stage as they cannot be fully evaluated at this stage.

In the Consultation period the reach and range of communications were considered and found to be satisfactory. Given this, this independent review of the evidence finds that the pre-processes employed in the pre-consultation and the consultation exercise met the standards recommended in current guidance and legislation that we were able to assess.