

Kent Health Overview and Scrutiny Committee April 2014

Progress report on the Outpatient Consultation in east Kent on behalf of East Kent Hospital University Foundation Trust and NHS Canterbury and Coastal Clinical Commissioning Group

1. Background

1.1 East Kent Hospital University Foundation Trust (the Trust) currently provides a comprehensive range of general outpatient services from its three acute sites: the William Harvey Hospital in Ashford (WHH); Kent and Canterbury Hospital, Canterbury (KCH); and the Queen Elizabeth the Queen Mother Hospital, Margate (QEPMH). Outpatient services are those where a patient attends a hospital or clinic but does not stay overnight. These services may include a consultation with a clinician, diagnostic tests such as phlebotomy, X-ray or MRI and a treatment plan being discussed, or treatment being given. The Trust also provides a range of general outpatient and diagnostic services from the Royal Victoria Hospital Folkestone (RVH) and Buckland Hospital Dover (BHD) and a number of community hospitals which include Faversham Cottage Hospital (FH), Whitstable and Tankerton Hospital (W&T), Queen Victoria Memorial Hospital in Herne Bay (QVMH) and Victoria Hospital in Deal (VHD).

1.2 In addition to these the Trust has delivered a range of “specialty specific” outpatient services throughout the local area in various facilities owned by other Trusts and at GP surgeries. These specialty specific outpatient services include dermatology, paediatrics, obstetrics and midwifery services, renal, therapy clinics and neurological nurse-led clinics, and have grown out of various arrangements over the years.

1.3 As part of a wider clinical strategy, over the last two years, the Trust has reviewed its outpatient services with staff and patients and a wide range of stakeholders to see how the Trust could improve the quality of care and offer greater local access to services. Recognising that the NHS and all public services are being challenged to make the ‘best’ use of resources the Trusts’ proposals are to:

- reduce the number of facilities used from 15 to concentrate services on six sites offering a much wider range of outpatient services across all specialities including diagnostic support
- extend the clinical working hours from 7.30 a.m. to 7.00 p.m. to offer better access to patients, and make more effective use of staff time including offering Saturday clinics 9 a.m. to 11.30 am
- invest in the clinical environment to support high quality clinical services and offer a comfortable patient experience in a welcoming environment at all six facilities
- develop the one-stop approach across more services, this is currently offered in breast surgery, urology and dermatology and

- expand the use of technology such as telehealth and telemedicine to reduce unnecessary follow up appointments and support patients monitoring their progress at home or in a GP practice.

1.4 In response to concerns about transport the Trust is also working with bus companies on proposals to improve the local public transport network to support better access to services.

2. Early engagement in development of the Outpatient strategy

2.1 From the beginning the review has been led by the outpatient department working closely with their clinical colleagues and has involved a broad range of staff. The staff have worked hard over a two year period to engage a broad range of stakeholders including GPs, local authorities, voluntary and community sector organisations, patient and carers groups and of course the Trust's governors and members to test out ideas and develop plans based on the feedback received. Over the past two years the Trust has attended or hosted 130 meetings to discuss the plans and listened to approximately 4,000 stakeholders.

2.2 In 2011 the Trust conducted a survey of 2,000 patients to assess what patients would like to see in terms of the clinical appointments times, out of hour's services, how they currently travelled to appointments. This was to test the likelihood of patients traveling routine further if they could access more services and be offered a one-stop service. The 1,650 responses to the survey showed that respondents would appreciate a wider range of opening times than 9 – 5 p.m.

Respondents	Early	Daytime	late	Saturday Yes	Saturday No
Men	230	401	78	558	136
Female	249	591	113	763	172
Total	480	996	191	1321	308
Percentage	29%	60%	11.5%	81%	19%

The respondents also showed a strong reliance on car travel as a means of travelling to their appointments:

- 80 per cent of respondents travel by car
- 9 per cent by bus
- 1 per cent by Patient Transport Service
- 5 per cent walk
- less than 1 per cent travel by train and
- 3 per cent use another form of travel.

2.3 Seventy-nine per cent would be prepared to travel further if they could receive all their consultation with a clinician and diagnostic tests and treatment plan in one single visit.

2.4 These results were tested again on a smaller scale with 200 patients in May 2013 to check that patients' requirements and the views remained the same. The Trust also conducted a broader postcard survey (5,000 distributed) in September 2013, with 1,000 respondents who were asked an open question about what patients would like improved.

Common themes included:

- reducing waiting time for appointments
- improving the timing of clinics
- having adequate seating
- better parking
- tea/coffee facilities.

2.5 This postcard survey also showed that more than 90 per cent of the patients who responded were in favour of having their assessment, diagnostic tests and treatment plans on the same day and 80 per cent were in favour of extended outpatient clinic hours, in mornings, evenings and weekends.

2.6 Collectively the results of the patients' surveys and the discussions with stakeholders have informed the proposals for improving outpatient services.

2.7 The clinical commissioning groups (CCGs) have, throughout their shadow phase, been key stakeholders who have been part of the early engagement with the Trust discussing their plans with their membership and governing bodies as they developed. All four CCGs have helped raise awareness of the consultation process and attended the meetings which took place during the consultation process to listen to the discussions. Of the four, only NHS Canterbury and Coastal CCG (The CCG) has been actively involved in the formal consultation process and attended all of the public meetings (held in their area) to listen to peoples' views and respond to questions raised. They along with the Trust will take account of the responses received and the independent report from the University of Kent before taking a decision on the way forward.

3. Consultation

3.1 The consultation on outpatient services took place from 9 December 2013 to 17 March 2014. The consultation was extended (from the original closing date of 9 March) to allow for requests for additional meetings in Herne Bay and Faversham, which took place on 13 March 2014.

3.2 Throughout the consultation a range of methods have been used to promote the consultation process including:

- Advertisements in December and January were placed in local papers and online via the Kent Messenger newspaper group across east Kent with a combined circulation of 119,914 and an estimated readership of 395,340.

- Two BBC Radio Kent interviews (Stuart Bain CEO, MP Sir Roger Gale, MP Gordon Henderson and campaigners took part)
- News items on BBC South East and Meridian at launch and subsequently on 13 March 2014 covering the second public meeting at Herne Bay.
- Adverts or articles in Clinical Commissioning Group newsletters, HealthWatch alerts and various patient and voluntary groups' newsletters.
- 3,005 emails were sent to local councilors, MPs, health network members (local people and organisations who have registered an interest in health and working with their local clinical commissioning group), voluntary and community organisations, NHS organisations, professional committees, local authorities, patient reference groups, patient participation groups, carer organisations and HealthWatch Kent with a request to consider the information and respond as well as a request to pass the information on.
- The Trust website had a dedicated online site <http://www.ekhufft.nhs.uk/patients-and-visitors/consultation-on-outpatient-services/> with all the information available and NHS Canterbury and Coastal Clinical Commissioning Group website had suitable links to the Trust website. Social media such as Facebook and twitter was also used to promote the consultation.
- It was a standing item on NHS Canterbury and Coastal Clinical Commissioning Group governing body meetings held in public from December 2013 to March 2014.
- 500 posters on display, 3,000 full consultation documents and 14,000 summary documents were distributed to GP practices, hospital waiting areas, all outpatient clinics, libraries, community centers; gateway centers pharmacies and local councils across east Kent. They were also available at focus groups, public meetings and patient meetings or events that the Trust and engagement team were invited to attend. (Four HOSC members were given the early draft to comment upon).
- To enable access and encourage a broad response consultation documents were available in large print and an easy read version for people with communication difficulties which were available online and at every meeting.
- The Trust staff and KMCS engagement team were invited to attend six patient groups who requested more information to answer any questions and enable patients and carers to respond to the consultation. The Trust also went to Dover Adult Strategic Partnership and the Thanet District Council Scrutiny Committee.

- An online email address and telephone number has also been given so that people could request additional information, ask questions or request copies of the consultation document.

4. Public conversation

- 4.1 During the consultation there were a series of 12 public meetings held at varied times. These were advertised as part of the whole consultation detailed above.
- 4.2 Generally at these three hour public meetings Liz Shutler Director of Strategic Development and Capital Planning and Marion Clayton Divisional Director, Clinical Support Services presented information on the proposals, the reasons for it, the principles for improving services, the early engagement which influenced the strategy, the outcome expected of the proposals, the steps taken during the review, the options considered for the sixth site on the north Kent coast, potential improvements in bus transport routes and how people could contribute their views.
- 4.3 This was followed by half an hour open question and answer session, then an hour of detailed round table discussions looking at the principles for improving services, the plan for reducing sites from 15 to 6, the options for the sixth site and the criteria and findings of the Trust, and the potential for improvement via the one-stop shop approach and wider use of technology. Every part of those conversations both the question and answer session and the round table discussion were recorded and collated and have been logged and sent to the University of Kent for the independent analysis of all responses.
- 4.4 At a few of the meetings the number of people attending was so large that there wasn't enough space to safely accommodate the round table discussions. Instead, an extended question and answer session was held, followed by staff remaining to talk to individuals and answer any remaining questions. The Trust, with representatives of the CCG for public meetings in the Canterbury and Coastal area, have supported the process by ensuring a generous number of staff from the front line as well as the executive were available to listen to people and answer their questions.
- 4.5 At each meeting there were evaluation sheets to learn how the events had worked for people. The agendas allowed people to put forward written questions if they didn't want to raise them during the meeting and there were copies of both the full consultation document and summary document for people to complete to take away for friends and family.
- 4.6 Throughout the review the NHS has taken care to reach those communities of need who have expressed an interest in the review. In addition to the public meetings, the University of Kent has conducted four focus groups with people from distinct communities of need including those with learning disabilities, mental health service users, people with

physical disabilities and people for whom English is a second language, to ensure their views on outpatient clinics were included in the consultation. The University worked with four local organisations in east Kent to facilitate these focus groups and we would like to thank them for their support.

4.7 As part of the consultation there was an open offer to attend any group or organisation that would like to know more and preferred that Trust staff and the engagement team to come to their meeting rather than attend the public meeting. Seven different patient and community groups took up this offer and their views have been recorded and sent onto the University for analysis.

5. Response levels

5.1 People have been able to contribute their views in a range of ways from writing an email or letter, completing a survey either online or on paper, or attending a meeting or focus group. Two petitions have been received one from the Herne Bay Labour Party with 450 signatures and a further petition was presented at the first public meeting in Herne Bay with 326 signatures.

5.2 There have been 41 telephone enquiries, 40 emails and letters, 273 online surveys and 205 paper surveys have been received.

5.3 The numbers attending these events has varied at the early meetings few people came to the December meeting in Hythe, partly due to a clash with the busy Christmas period and consultation fatigue. But as the consultation progressed across the whole of east Kent the interest increased. Overall approximately 1,330 people attended 12 public meetings, and a further 39 took part in four focus groups, with approximately 100 at the additional meetings we attended.

5.4 As expected the attendance has been highest in the five events in Herne Bay, Deal and Faversham where a mixed audience of MPs, councilors, campaigners, patients and interested citizens have had vociferous discussions about the proposed options, and heard some of the patient concerns about the future of the community hospitals, patients positive experience of services, their praise for staff and concerns about travel issues.

5.5 The local media have also been regularly updated via press releases and news statements. Both the broadcasting media and local newspapers have featured the consultation proposals and 64 articles appeared. In the main the articles encourage people to have their say on the consultation and to attend meetings. Others include MP Charlie Elphicke's survey about Deal hospital, MP Sir Roger Gale urging people to 'rally to the defence' of the QVM, Herne Bay, or campaigners calling on people to challenge the plans particularly where they feared the impact on their local community hospital. Certain newspapers were supporting the campaign at

Herne Bay and Faversham. The Trust spokespeople were featured setting out the benefits the expanded services will bring, and the transport link plans to improve access. Some articles featured the public reaction at meetings and others the political debate between parties and 48 letters were published continuing the debate or expressing concerns.

5.6 Across these differing means of engagement 2,000 people have been directly involved in the consultation on outpatient services with a much higher number having heard about it through the media coverage and online social media.

6. Next steps

6.1 The responses have all been logged during the consultation from phone calls and email enquiries for information, to seven personal visits, four focus groups and twelve public meetings. A total of 273 online surveys have been submitted, 205 paper surveys have been received and several stakeholders have sent in written submissions. These have all been sent to independent researchers from the University of Kent who will collate and analyse all of the information and report to the East Kent Hospital University Foundation Trust and NHS Canterbury and Coastal Clinical Commissioning Group.

6.2 In April the Trust and NHS Canterbury and Coastal Clinical Commissioning Group will visit the four potential sites being considered for the sixth clinical site on the north Kent coast. They have requested up to date information from NHS Property Services so that the two organisations can look again at the options and re-appraise them with updated information. We would welcome two members of the HOSC attending to observe the process so that they are able to offer their fellow Members and the public assurance that due process has been followed.

6.3 Both organisations will return to the HOSC in June to discuss the findings and their proposals to act upon the information, before both organisations take their final decision later in June.