

TRANSCRIPT

Episode 5 – Case study – choosing a new hospital site



Paul Parsons - This is Not a Consultation. I'm Paul Parsons...

Caroline Latta - and I'm Caroline Latta.

Paul Parsons - Welcome to Not a Consultation.

Caroline Latta - Our podcast on all things patient and public involvement and NHS service change.

Paul Parsons - Today we're taking you on a trip to the West Country to find out how one health system talked to local communities about the need to replace some aging hospitals and choosing a location to build a replacement.

Caroline Latta - It's a challenge lots of health systems are considering at the moment. News of funding for a new hospital under the Prime Minister's health infrastructure, or HIP2 programme was well received in communities across England, but the warmth of that welcome is ebbing as individuals, activists and whole communities begin to understand the impact of those announcements on their cherished local services.

Paul Parsons - In autumn 2020, NHS partners in Gloucestershire consulted on proposals for services to be provided at a new community hospital in the Forest of Dean. The

consultation documents specifically stated that this was not a consultation on the decision to move to a single community hospital, nor was it a consultation on the location of that new hospital. The document told us those decisions have been taken back in 2018, so naturally we wanted to take a look at the process behind those earlier decisions and see what learning could be in there for other programmes.

Caroline Latta - We invited the programme's engagement and communications leaders to talk to us about involving patients and engaging communities in the process. And as always, we started by asking them to introduce themselves.

Caroline Smith - Hello, I'm Caroline Smith. I'm the senior manager for engagement and inclusion at NHS Gloucestershire CCG, the clinical commissioning group. And I've worked for the NHS for about 15 years, all in the field of engagement, and I've been doing some particular work in the Forest of Dean since 2015.

Becky Parish - Hello, my name is Becky Parish. I work for NHS Gloucestershire Clinical Commissioning Group. I've worked for the NHS for, goodness gracious me, over 30 years. I started off in communications and then I moved into patient and community engagement, probably around about 2000.

Paul Parsons - Caroline, let's cast back five or six years. Tell us about the Forest of Dean, if you can describe the area for us and what the service offer was when the programme started.

Caroline Smith - The Forest of Dean is quite a large geographical area, actually covers about 200 square miles on the western side of Gloucestershire, and it's bordered really by Wales to the west and by the River Severn to the east. That area is very rural, it's predominantly served by four market towns, and it's infrastructure, road infrastructures aren't particularly great, so it's quite an insular area, with many of the residents, myself included, having lived there for a significant number of years. So as quite a tight knit

community, really, engagement with the local population is both quite challenging at times, but also crucial if you're going to do any service redevelopment. Back in 2015, we began with a broad review of the community services that we provide for that area. And that very quickly brought into focus the two community hospitals that we had serve in that area, the Dilke Memorial Hospital and Lydney and District Hospital, both relatively small community hospitals between them, just to give you an idea, they've got 47 beds in them, but offer a range of outpatient services. Two minor injury units, one in each hospital, X-ray facilities the usual kind of community hospital set up, but much loved by their local communities.

Caroline Smith - Two very strong leagues of friends who support both of those hospitals and do significant amount of fundraising. So held in very high esteem by the local community. Both of them predate the NHS, and the Dilke Hospital in particular has a particular affinity with the community in that it was funded by the mining community back in the early 1900s and they used to contribute money from their wages to provide the hospital and the upkeep and running of it. So not unusual for community hospitals, I know in that they're often held in very high esteem by their local community, but it was against that backdrop really, that we started to think about actually looking to the future. Were those two hospitals able to provide the best possible service.

Caroline Latta - So against that backdrop, Caroline, how did you start to go about having these conversations with local people?

Caroline Smith - As with most communities, there are some quite obvious movers and shakers that we felt it was really important to ensure that we gave those particular people a voice. And a lot of those organisations and groups were already well known to us. So some obvious candidates in the two leagues of friends from the hospital, but wider community groups, huge amounts of charitable organisations providing support to those local communities who are very knowledgeable and have the ability to represent people's views, but actually to reach out into those communities and share information with those communities too. We did a little bit of stakeholder mapping to see who actually was out there. Some obvious candidates in the local council, volunteer sector. They have an

umbrella organisation there who does a lot of that communication but has lots of links with some of the smaller community organisations that we might not be familiar with. Those were kind of a starting place. And right back in September of 2015, actually, we invited a group of about 30 to 40 people to work through some of the challenges with us and start to develop a group which quickly became known, it's not a very snappy title I guess, but as the Forest of Dean Locality Reference Group. And I'm pleased to say that six years on we've got many of those people still involved and working with us on the project.

Paul Parsons - What do you, as an organisation, get out of those relationships and what do the people on the reference group get out of it?

Caroline Smith - Most of the people that we talk to are very passionate about their local area. They want the best for their communities, and obviously most of them live there too. That knowledge that they bring of their local areas is what we're looking for. We also involved lots of their staff too, and people who are providing the services and their GPs have been involved. If we're coming up with those solutions jointly together, then you would hope that they would be able to spread that kind of support for our proposals.

Caroline Latta - Thanks, Caroline. How did Forest of Dean get clinical staff and NHS staff involved in developing ideas for change?

Caroline Smith - The two hospitals are both supported by staff and Gloucestershire Health and Care NHS Trust, and they've put on specific staff engagement events. But we also have representatives from the staff who were part of that locality reference group. Clearly, when we're looking at the two hospital sites, it's really important here from people who are actually working in those buildings. And I think we knew fairly early on that a lot of the challenges that we faced in delivering some of the services in the Forest related to the healthcare infrastructure that we had. And those two hospitals, much loved as they are, are very old, not necessarily fit for purpose when it comes to delivering high

quality, high tech healthcare. And we really need to hear about that from the staff, what their experiences are working in those buildings.

Paul Parsons - So lots of really rich early conversations going on with patients, local residents, community leaders, GP service staff, everybody who wants to be involved. At some point, the possibility of not continuing services from separate hospitals must have raised its head. So when did the possibility of having just one hospital in the future rather than the two existing ones first come up? And how did you start to discuss that?

Becky Parish - In Gloucestershire, we have quite an unusual distribution of community hospitals, so if you went back to, say, 2000, we had quite a lot of community hospitals that were serving the different communities across our districts, and we have over the last 20 years, we have been replacing those hospitals with new builds and we had experience particularly, I'm thinking about the Cotswolds. We had two community hospitals that were very close together similar scenario to the Forest of Dean, and we had some really similar conversations that we've been talking with Caroline about talking to the communities in those areas. And we made a decision, following engagement and consultation, to replace the two hospitals in the Cotswolds with one brand new one to serve that district with a satellite providing some of the more outreach services in another location in that area. So we were starting to think about when you've got two hospitals that are relatively close together serving the same population, should we be thinking about doing something similar in the Forest of Dean? And so very early on in our conversations with the local community, that was something that we were testing with them and we were trying to explain the rationale for that.

Becky Parish - So the opportunities of bringing specialist teams together, maximising the use of expensive high tech equipment in one place and not really being able to do that in two places. We were able to use lots of case studies from other parts of the county to start those conversations with the public. Very early days, it wasn't a late decision to be starting to talk to people about the idea of having one. With a network of community services around it we were trying to get away from the focus on beds and get into the focus of a system response to health needs of a particular population.

Caroline Smith - So once we, as Becky said, started to think about the two hospitals and what might be possible going forward, we felt like we needed to do some formal consultation around that. Very quickly I think through the work that we did, we looked at a range of options for the future. One new hospital, replacing two, or reinvesting in the two existing ones, or actually not having a hospital in the Forest of Dean at all, being more reliant on our community services, and those were going through an option for appraisal process. That piece of work led us to the conclusion that there was really only one sustainable option going forward. And so our consultation focused on a preferred option of one new hospital.

Caroline Latta - So when was the concept of a citizen's jury first considered?

Caroline Smith - I think at that point, we recognised that if we were going to go down that route of one new hospital, because of the logistics and the community that we were working with, one of the biggest challenges for us would then be to find out where that one hospital would sit. That was really when the idea of a citizens' jury started to emerge as a way of exploring that particular question. When we did the consultation around one hospital, we actually asked people as part of that consultation, how should we involve local people in helping us decide the next steps? And we didn't call it a citizens' jury, but I guess we suggested to people that some sort of deliberative forum that would review all of the evidence and come together with healthcare professionals to make that decision could be a way that we could do that, and that received huge support through the consultation. So I think that was something that came out very loud and clear was that people wanted to be involved. They wanted to have the opportunity to have a voice and a really key voice in that decision-making process.

Paul Parsons - So what is a citizens' jury? Tell us about the process that you went through?

Caroline Smith - Yes, Citizen's Jury. It's often referred to as a deliberative engagement process. The idea is that people are presented with information that would enable them to really delve down deeply into that information, hear from experts and consider that information. I think some of the traditional tools that we use for engagement often rely on us being able to come and tell a story and then asking people a series of questions that they respond to in quite a tight way. And I think the real benefits of the citizens' jury approach is that it enables people to really gain a deep understanding of the issues. So we present them with quite detailed information, which they are then able to deliberate amongst themselves and consider some of the sort of the pros and cons of some of the information that's been presented to them before coming to a recommendation. It's clearly quite a skill. And I think we took the decision quite early on that we would need to get some external support into enable us to facilitate that process. The whole idea with the citizens' jury is it's almost about providing transparency and sort of at a level of independence to the decision-making process that we often go through in healthcare organisations. And part of that sort of transparency is about bringing in independent people to facilitate that for you.

So we all have sometimes some natural bias to the way that we might say things, the way that we present information. And I think for us, one of the real benefits of the jury has been to be able to, wherever possible, eliminate some of that bias. So we quickly decided that we needed to bring in some experts, and we drew up a short specification which kind of focused on the outcome that we wanted rather than the nitty gritty of how it should be done. And we really put that in the hands of the professionals to be able to tell us how they felt it needed to be developed. So Citizens' Juries CIC, the company that we brought in to facilitate our citizens' jury, they work very closely with the Jefferson Center whose founder kind of came up with the whole principle and ideas of a citizens' jury, and they really shaped, they worked with us very closely - Becky and myself and some representatives from our Community Trust. They worked with us over a period of, I think it's fair to say, good couple of months to kind of shape the jury process.

Caroline Smith - So while there are some underlying principles to a jury, it is really about them looking at the question that you want to pose to the jury and what citizens' juries

CIC were able to do then was tell us the information that we would need to present in order to enable people to consider that question and come up with some recommendations for us.

Caroline Latta - What were the practical actions after you decided that you're going to have a citizens' jury community interest company help you with that project? What were the steps that happened then from a participation and from a citizen point of view?

Caroline Smith - So we had a small working group who worked and met very regularly with Citizens' Juries CIC to develop the format for the jury. And on their recommendation, really, they were able to tell us that actually to consider the question fully, we'd need an extensive range of evidence that should be provided by what they call expert witnesses. And they basically told us what evidence they needed and we made suggestions for who would be best placed to provide that. So whether that was somebody within our own organisations or actually whether it was representative from the community, people from the local council who would be able to talk to them about population and transport, all of those kind of broad issues. So we kind of helped them identify those people, but they kind of then drafted a programme and talked about sort of ideal numbers for the jury. And on their recommendation, it resulted in a jury which sat for four and a half days. We did that in one block in a week and we had 18 jury members who were recruited from our local community.

The recruitment was all done by Malcolm Oswald, who's the chief executive of Citizens' Juries CIC. He put out advertisements through our local media. He did some interviews with some of our local radio stations, articles in our local newspapers. We used our networks to promote the idea of a Citizen's Jury and invite people to put themselves forward. And on their recommendation, he also advertised through Indeed, the job seeking website. It was quite a big ask to put to people really to give up four and a half days of their time and so we paid them actually for their attendance. We felt that that was really crucial part to enable everybody to be able to put themselves forward and we wanted a good cross section of the population. So he looked at a demographic for the Forest of Dean and tried to match the demographic of his jury to the demographic of the

local community. And I guess because we were looking at the location of the hospital, that was a really crucial aspect. When we were looking at the makeup of the jury, we felt it was really important that we had people from across the whole of the district who could come together and recognise that some people would already have, when they start the jury process, would already have some idea about where they personally wanted the hospital to be and recognising that bias that would be naturally within people.

So actually, Malcolm did some really good demographic information for us. He looked at key characteristics of the Forest of Dean and then he sort of overlaid those characteristics of the jury on that model. I think we were all surprised at how closely a match he managed to get in terms of gender, age range, educational attainment, and that crucial question of location. He did get a very representative jury.

Caroline Latta - Caroline, it sounds very much like a jury process that you would go to if you were called into jury service. What were the benefits for doing this and how did it aid your decision-making process?

Caroline Smith - Yes, you're right, Caroline. It is in some ways like the jury process that we're all familiar with through the courts in that you have a group of independent people who are brought together and they're presented with evidence and asked her to reach a recommendation. I think for us, the real benefits of this was the transparency that process offered. We were able to share a lot of very detailed information, not only with the jury's, but actually the whole process was open to members of the public, so you could kind of observe what was happening, and quite a lot of people did. In fact, there were a few people who stayed with us for the whole four and a half days and viewed everything, and then there are other people who just came along and were particularly interested in one session, whether that was something about community transport or the population demographic. So some people just came for a short period of time, but actually enabled us to share a lot of very detailed information that you can't just do through producing written publications, sometimes in an engaging way. So the whole process was broken down into very manageable pieces.

You didn't have somebody talking to you for two hours at a time. They were very short, snappy presentations that really got some key information across in a very unbiased and factual way. So all of the information that was presented by the jury was checked for bias by an independent panel, and all of the presentations had to be submitted beforehand. So that process could be adhered to. So I think it really did give that sort of transparent, open and honest perspective and an opportunity for people with diverse range of experiences and views to consider information, debate it, and deliberate on it amongst themselves and come up with a recommendation. And I think it's fair to say if one of the jury members is here today, they'll probably tell you that they expected there to be a really obvious solution, and that actually this was a bit of a tick box exercise and we already knew what answer we wanted to get, but what the jury process demonstrated to them was that actually we didn't already have the answer. It really was open for discussion, and they were, I think, surprised. They were expecting to be there and be persuaded, and that didn't happen. They were presented with lots of information and then it was very much up to them to make a recommendation that they could all agree on. So that was kind of the aim and the real benefit for us.

Paul Parsons - Thank you very much. Becky. What was the learning that you took forward from that exercise and how have you applied it to other conversations that you've had with the public about services?

Becky Parish - There's so much learning. I think the most important thing for us is the letting go of some of the responsibility. So when you commission somebody like Citizens' Juries CIC, you are commissioning the experts in running citizens' juries. We are by no means experts, myself and Caroline, they work with us to develop a question that 18 people who've never met each other before will come together to deliberate and make some recommendations at the end of that. The process between them, hearing the first thing about the question in hand and getting to a decision is really a detailed, well thought through methodology for allowing people to weigh up, pros and cons of whatever the question might be. And myself and Caroline and other colleagues, we naturally want to join in, help offer our advice about how best to do it. But actually they

are the experts and I think we were both quite reticent at the beginning, but what we've learned to do over the couple of other times we've worked with the Citizens' Juries CIC on juries, we have learnt more and more how to back off and when it's useful for us to have some input.

So the Forest of Dean Citizen's Jury about the location of the hospital is the first jury we've done in Gloucestershire, but we've subsequently done another two about a different subject, about the reconfiguration of some specialist hospital services. Different question, more complicated question, perhaps, rather than just where would you build something? But they approach it in a methodical way to enable the jurors to really cleverly come to a, not consensus always because they're allowed to disagree with each other, but they reach some majority views and it's all presented completely openly. People can watch it, they can read the jury reports, they can see how they voted. Everything is completely out there in the open and we make sure that we publicise that as well as part of our decision-making process.

This is a real sort of gold standard piece of engagement sort of methodology that we use as part of our processes now. We won't do it every time because we haven't really talked about the resources required for this. It's not a cheap option, there is a cost involved. You're getting the experts in, so you need to be committed to the project to want to make that investment, but it's paid dividends for us in terms of getting some really well thought through substantial decisions. And I'm pleased to say to date, our governing bodies have concurred with the recommendations of the juries that we have commissioned in Gloucestershire.

Paul Parsons - So give us an idea of budget. How much did you need to bring Citizens' Juries CIC into the frame and also to provide the support that you needed to make the exercise a success.

Caroline Smith - The cost of the citizens' jury in the Forest, I think was around about £45,000. That's the amount of we paid to Citizens' Juries CIC, but that included within

that the hire for the venue for the week, feeding them. We paid each jury member £100 a day, or rather Citizens' Juries CIC did. Obviously that had to come out of that budget. So 18 people, four and a half days, and they had a couple of reserves on day one too, in case of no shows. So that wasn't an unsubstantial amount of the budget. So with the venue cost and the cost to the jury as well, traveling expenses, that kind of thing that had to come out of that budget. But yeah, it's not an insignificant amount of money. There's an awful lot of work that obviously goes on behind the scenes in the lead up to the jury. So that covered all of the recruitment costs as well. And then obviously the reporting stage, I think we all agreed at the end of the day, it was money well spent.

Paul Parsons - Thank you very much and thank you both very much for joining us today. Only one more thing to do, and that's your top tips for patient and public participation in options development and citizens' juries. So Becky, would you go first?

Becky Parish - Top tips, not just focusing on the jury. So just generally, in terms of getting people involved at an early stage, take some time, get to know the local community, have some people that you're in regular contact with before you even want to do the project. So maintain good, long lasting relationships with key people in all types of different communities. In terms of a jury, use the experts. We're not experts in this, they are. Get the question right. Don't overcomplicate it if you possibly can. So take the advice of the experts around what is the right question to ask a jury? And then the third thing I would probably say is allow yourself enough time to do this really properly. Don't try and rush it. It's really important. The planning stage, it sounds like it's just a week of a jury, it's not. It's at least three months in the preparation and be open to letting go and allowing the experts to guide you through it. Take their advice. It's well meant, it's well intentioned, and it's good advice.

Paul Parsons - Thank you, and Caroline?

Caroline Smith - That's a hard act to follow, actually, Becky. The continuity of the conversation is really important. So maintaining those links. We've had people involved,

as I said, with the locality reference group for the whole six years. That doesn't happen naturally. You do have to work at it and you have to work hard to maintain those good relationships. The one take-away for me right at the beginning of this, we said it's been a long process and I think it's needed to be quite a long process, and there are various stages of the process that we have gone through. But equally, I think as that time has gone on I think part of me would have liked to have moved a little quicker than we have.

Paul Parsons - A brilliant opportunity to learn from people who have actually been there and done it, or rather still are doing it because these programmes can take some time. And I really felt for Caroline at the end there when she said she would have liked to have moved just a little faster. Wouldn't we all like our programmes to make progress more quickly than they tend to? There were three really clear parts to the process Caroline and Becky described, early involvement in developing the proposals, public consultation on those proposals for changes to the community hospital model in the area, then a citizens' jury to recommend a location for the new hospital. Let's start with the early involvement, Caroline, what were your thoughts on the approach?

Caroline Latta - Reconfiguration of community hospitals can be a very contentious thing, so it was good to hear how their approaches really resonated with the local community. People wanted to be involved and they wanted to have a voice in the decision-making process. The description of that pre-consultation process, of developing options and involving people in that process I thought was really helpful. All too often, the very first time local communities hear about big change proposals is when we get to the public consultation phase. But it's clear that Caroline and Becky have that continuous involvement requirements at the heart of their practice.

Paul Parsons - Yes, they really set out on the right foot. Inviting staff and community leaders to be part of that local reference group and being transparent with them from the outset. Everyone wants access to the best possible local services, and everyone likes to have a community hospital nearby, but most people don't ever see that those two ideas might conflict in certain ways. So by being open about the issues and involving staff, GPs and others, everyone involved could explore the compromises and contribute their views.

The consultation happened and the decision was made to have one community hospital, so they then had to answer the question of where it should be built, and they chose a citizens' jury. What did you think of that?

Caroline Latta - Even the best involvement can be criticised by those who ultimately don't like the outcome. And for the Forest of Dean citizens' jury, that doesn't seem to have been the case, and I think that really speaks to how legitimate people felt that process was. And I loved how honest Caroline and Becky were about getting experts to help, and as involvement practitioners themselves, they had to hold back and let the citizens' juries experts lead the process. I smiled because I would be exactly the same.

Paul Parsons - Wouldn't we all? We should also mention the process overall. Each phase isolating an issue and resolving it before moving on to the next. It was like a series of one directional gateways that they've built on at each stage. It's a really strategic approach that they've continued to build on with the latest consultation. And from this distance, the simplicity of the process seems to really have aided that approach. Strategy something we should take a look at some time.

Caroline Latta - I think we need to find out more about citizens' juries. I'd love to know more about the technical aspects. I can't decide what I'd like to do more. Either be involved in commissioning a jury or actually take part in one. So definitely a focus for a future episode. Huge thanks to Caroline Smith and Becky Parish for joining us to share their learning and insights.

Paul Parsons - There's loads more learning in our other episodes. All available on our website at notaconsultation.com.

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