



MoHHS update

Joint Health Overview and Scrutiny
Committee

31 October 2023



Agenda

1. MoHHS programme – progress update

a) Pre-consultation business case update

- Progress through NHS assurance processes and next steps

b) Our approach to public consultation

- Consultation overview
- Consultation activity
- Consultation materials
- Reaching across our communities

2. Discussion and recommendations

a) To acknowledge the NHS assurance progress

b) To support the plans for consultation

c) To agree how JHOSC want to be consulted with



The case for change



We are facing a number of challenges that mean we need to change the way services are delivered in Hampshire



Our population is growing and getting older, meaning healthcare needs are changing



Duplicating services across two acute hospital sites means we can't always consistently deliver great care, because resources – particularly specialist staff - are spread too thinly. This isn't sustainable



Many of our hospital buildings are approaching the end of their usable lives



We are facing a worsening financial position. We must stay within budget

To address these challenges, we must make changes

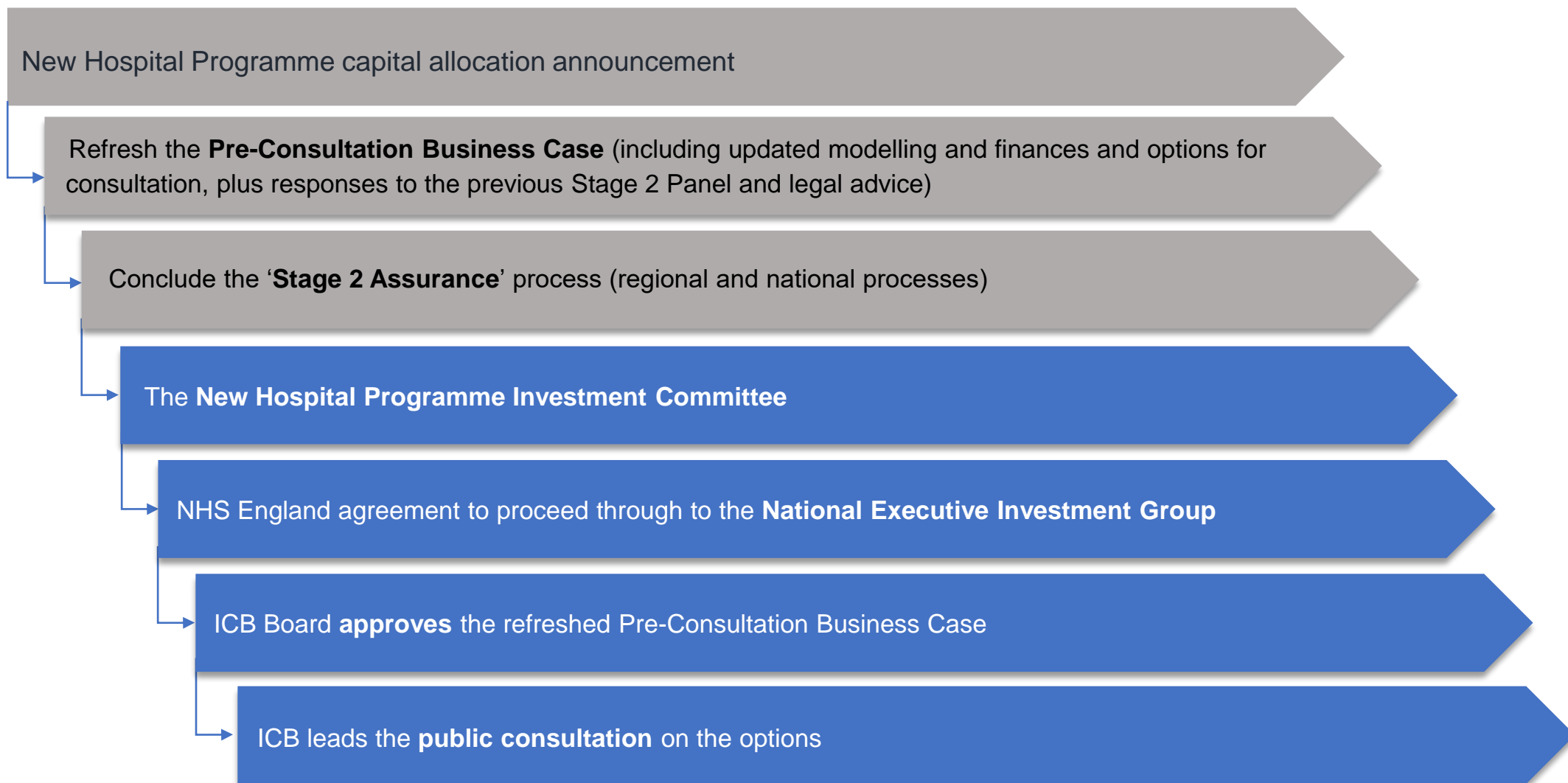
So, we have been working hard to develop some options for the future, including how we maximise the opportunity of a new hospital for Hampshire

- We have worked together with patients and local communities and health and care staff to develop plans for addressing our case for change, including what a new 'model of care' could look like
- This has been built on several years of engagement and involvement, listening to what is important to patients and local people
- We are delighted that we are part of the government's new hospital programme, and will be receiving significant investment for a new hospital for Hampshire and for our hospital in Winchester
- We plan to consult on our proposals shortly
- A 'pre-consultation business case' has been developed, setting out our proposals in detail
- This will be the basis of the consultation with JHOSC and local people
- First, the business case must go through a thorough and robust assurance process

Pre-consultation business case update

Modernising our hospitals and health services

We are making good progress through the NHS assurance process



Our approach to consultation

Modernising our hospitals and health services

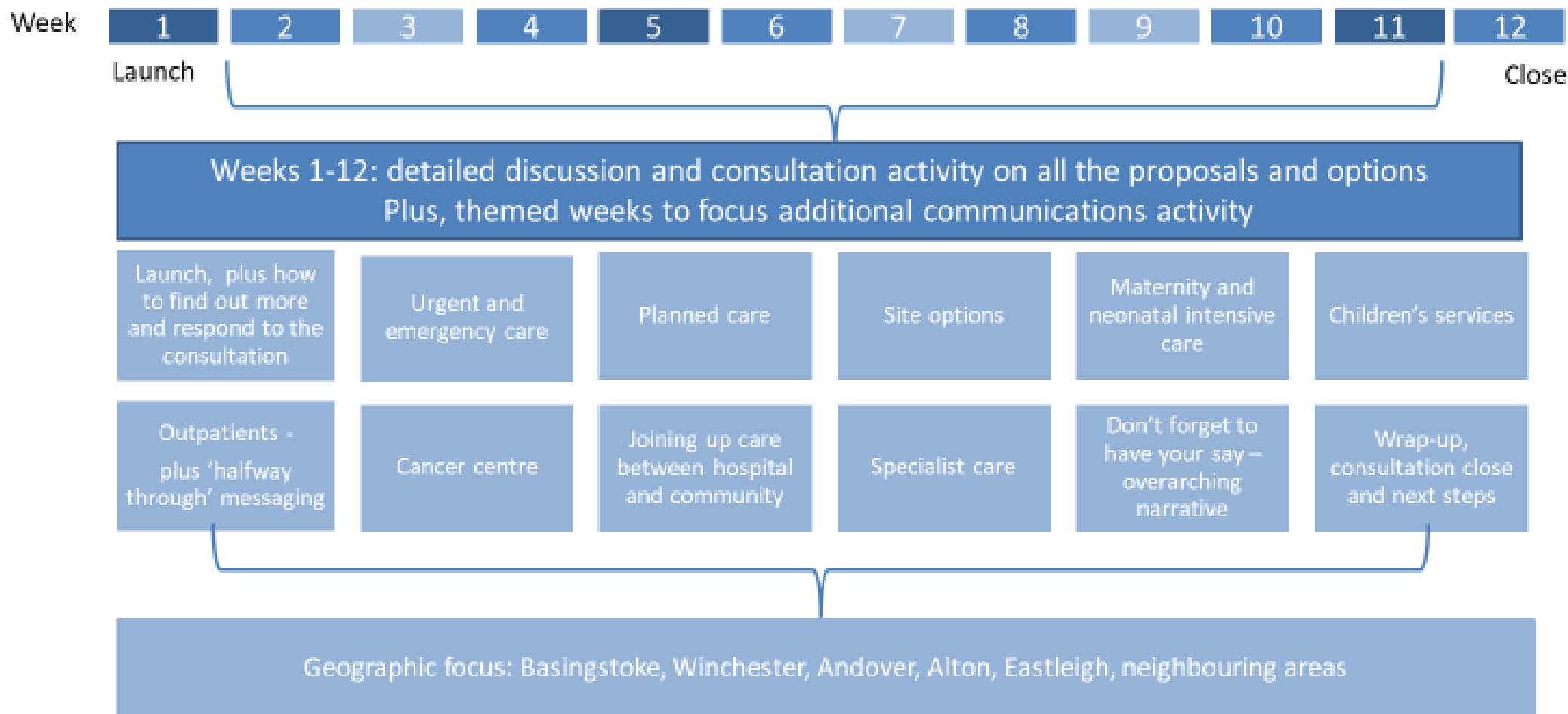


Modernising our hospitals
and health services

We have set ourselves SMART objectives for our consultation activity

| Overarching SMART objectives for reach and response: | |
|--|--|
| 1. | <p>Opportunities to see or hear about the consultation - reaching a minimum of 435,500 people (approximately 50 per cent of the population identified in the integrated impact assessment study area) about the proposals during the consultation period.</p> |
| 2. | <p>Target for active and direct engagements</p> <p>Patients, families, carers and local people – 7,000 Staff and volunteers – 8,650 Stakeholders – 50</p> <p>15,700 people (approximately 1.8 per cent of the population identified in the integrated impact assessment study area).</p> |
| 3. | <p>Target for responses</p> <p>Patients, families, carers and local people – 1,300 Staff and volunteers – 1,280 Stakeholders – 20</p> <p>2,600 separate responses to the consultation (approximately 0.3 per cent of the population identified in the integrated impact assessment study area).</p> |

We plan to consult widely for at least 12 weeks



Through a range of different consultation activities



Extensive cascade, publicity and promotion of consultation - including consultation document, summary and questionnaire; posters and flyers; targeted advertising; media coverage

Public listening events: 20 in total – 10 virtual and 10 in-person events; plenary presentation and Q&A, then breakout discussions

Staff listening events: 6 virtual sessions, plenary presentation and Q&A, then breakout discussions

Public drop-in exhibitions: 3 sessions in total, up to 4-hour long events

Ad hoc community meetings: proactive liaison with patient and community groups; responding to invitations; geographical communities and communities of interest

Pop-up market stalls: in high footfall areas to raise awareness of the consultation and answer general questions

Research-led activity: including telephone survey, independently recruited focus groups – to get a balance of views and views from protected characteristic/seldom heard groups

Briefings for key stakeholders: MPs, councillors, Joint Health Overview and Scrutiny Committee members, and others

Dedicated consultation website – repository of information; online questionnaire; FAQs, videos; animation; updates

Using a comprehensive suite of materials

We will provide a range of materials describing the case for change, the options we are consulting on – and what these would mean for people using services, and how people can share their views:

- **Consultation document**
- **Summary consultation document**
- **Summary consultation document** produced in an Easy Read format
- **Fact sheets** on key aspects of the proposals
- **Consultation questionnaire** available both online and in hard copy
- **Frequently Asked Questions** which will be regularly updated
- **Videos and animation** to help explain the options
- **Patient stories** to show what the proposals would mean for people using services

All details about the consultation will be available on a **dedicated website** with materials available in **alternative formats on request**

With plans to reach across our communities

We want to ensure we reach across our different communities. We will do this by:

- **Focusing on staff working in health and care in Hampshire Hospitals and across Hampshire** to promote the consultation and encourage responses
- **Working with partners** to promote the consultation to their staff and networks
- **Undertaking targeted focus groups** – independently recruited focus groups to ensure we hear views from across our geography, with those highlighted in our Integrated Impact Assessment, from those with protected characteristics and from seldom heard groups
- **Telephone survey** – independent research-delivered residents' telephone survey
- **Business, community and voluntary groups** – information provided so they can promote the consultation to their members and communities, with updates provided at meetings on invitation
- **Public information stands** – non-manned stands in healthcare locations
- **Targeted advertising** – including on social media, print media, local radio
- **Mid-point review** – we will review which communities are, and aren't, responding to the consultation at the mid-point to determine if we need to change our approach to broaden our reach

We are keen to understand how JHOSC wants to be consulted with over the next period

We suggest:

- Continuing to liaise with you between now and consultation launch, particularly for any additional feedback on our plans
- Providing you with our consultation materials when we launch consultation
- Continuing to meet with you at regular intervals – for example:
 - Mid-point consultation progress update – activity and emerging themes
 - Consultation close – consultation activity report
 - Post-consultation – consultation response report
 - Pre-decision-making – progress and next steps on decision-making business case
- Setting up any informal briefings or ‘deep dives’ into particular issues on request.

We welcome your views and any additional thoughts on how JHOSC would like to be consulted with over the next period.

Following consultation

- We have commissioned a specialist research agency to independently analyse and report on the responses we receive to our consultation
- That report and its findings will be thoroughly and carefully considered by members of the ICB Board
- We will produce a ‘you said, we did’ report, in response to the consultation findings
- Both reports will inform the development of the Decision-Making Business Case, along with other evidence, analysis and data we have gathered throughout this process
- The Hampshire and Isle of Wight Integrated Care Board will make a decision on which option to implement later in 2024
- We will continue to engage and involve JHOSC, our staff, patients, carers, local communities and stakeholders throughout all stages of our programme and as we move forward to implementing our chosen option.

Discussion and recommendations

Modernising our hospitals and health services

For discussion and agreement

JHOSC is asked to:

- Note the update on the progress of our pre-consultation business case through the NHS assurance process, ahead of consultation
- Support our plans for consultation
- Discuss and agree what consultation with the local authorities, via JHOSC, should look like over the next period

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