

# Pre-consultation Engagement – Final Report

## Executive summary

- This report follows on from the update reports presented at the November 2017 PPEA meeting and to the Governing Body on 19 December. It is the final report on pre-consultation engagement conducted predominantly over a 12-week period from 25 September until 15 December.
- We would like to thank all the people of Corby who shared their views and experiences with us and engaged with us online during this time. We would also like to acknowledge the support of the many partner organisations, community groups and businesses that supported this work through providing additional contacts and inviting us to visit their groups and companies.
- The purpose of the pre-consultation engagement was to have a conversation with Corby people about why some services need to change – and in doing so, to gain further insight into the issues and barriers they face when accessing healthcare (particularly primary and urgent care). We also wanted to find out what was working well and to hear experiences of good care.
- This has not been an exercise in gathering quantitative data – that is for the consultation stage. Rather, the intention has been to identify issues and to ensure that any consultation proposals have been directly informed by what people have told us.
- The key conclusions drawn from this activity are detailed further in this document. The need for change is widely recognised and what people really want to know is how change will affect/benefit them, their families and their friends.
- We also found that primary care access remains the number one issue for people. Until they believe that has been adequately addressed, support for any other service change will be limited.
- The Urgent Care Centre is popular, both for its ease of access and quality of service. Any change to it has the potential to be seen as a loss to Corby.

## 1. Introduction

In August 2017, the CCG's Governing Body approved an updated framework for engaging and consulting with patients, public and other stakeholders. The aim was to move forward the programme started earlier in the year, and in September pre-consultation engagement restarted.

As outlined in November's PPEA and December's Governing Body reports, the framework has three distinct phases:

- i. An initial period of engagement about the case for change.
- ii. Formal consultation about potential service changes.
- iii. Full analysis of all engagement evidence to inform CCG commissioning decisions, and then explaining to stakeholders how they have had influence.

After 12 weeks of activity, the first phase is now complete. This report summarises the work undertaken and details the findings from the pre-consultation engagement.

We would like to thank everybody who gave up their time to share their views, experiences and opinions of healthcare services in Corby. We would also like to thank the organisations, partners and businesses that allowed us to talk to their members and staff and provided us with information and contacts that allowed us to reach such a broad cross-section of the Corby community.

### Equalities and diversity

In putting this engagement programme together we have paid due regard to the need to gain the views, opinions and insight from members of all groups within the Corby community. This will help us understand the likely impact of any changes to local NHS services on disabled people, the elderly, racial minorities or any other group that has a protected characteristic as defined under the Equality Act 2010.

## 2. Delivery

### Timeline

Pre-consultation engagement started the week beginning 25 September and finished on Friday 15 December.

The engagement framework initially approved by the Governing Body indicated three months of consultation starting on 1 November. This has since been revised to set a provisional start for consultation of 1 February 2018. The reasons for this have been covered in previous papers. The delay has allowed us to do additional pre-consultation engagement.

## Activity

As also outlined in previous papers, a range of tactics were deployed to maximise public reach, and considerable effort was put into including seldom heard groups. The groups and venues we have visited can be found in Appendix 1. A full list of all groups contacted so far and the resulting outcomes are in Appendix 2. All contacts established at this stage will be used to enrich consultation.

The tactics were:

- **Face-to-face:** in public spaces, at community groups and through three workshops
- **Stakeholder engagement:** running in parallel and predominantly carried out by the Governing Body
- **Online:** using the CCG's website and social media channels
- **Supporting communications:** working with local media outlets

## Purpose of the engagement

Pre-consultation engagement is not an exercise in gaining quantitative data – that is what the consultation is for. In the pre-consultation engagement stage we looked for people's views, opinions and experiences of using healthcare services in Corby. This has helped to identify what issues and barriers people are facing when accessing good, quality healthcare when they need it. It has also allowed them to share what is working well.

These findings are then considered, along with the patient safety, quality, clinical and legal evidence, and used to help shape the proposals put forward for consideration at the consultation phase. It is at this point that we will collate quantitative data, which again will be considered with the other evidence, before a decision is reached on the future of primary and urgent healthcare in Corby by the CCG's Governing Body.

## Engagement reach

### Online

Engagement copy was uploaded to the NHS Corby CCG website on 2 October 2017: <http://www.corbyccg.nhs.uk/current-consultations/> The copy included a main page, a link to the 10 scenarios questionnaire and a 'Get Your Views Heard' page with details of public events. The following figures are for the period between 2 October and 18 December.

a. Content at [www.corbyccg.nhs.uk/current-consultations/](http://www.corbyccg.nhs.uk/current-consultations/):

- Page views for Current Consultations landing page: 474
- Page views for questionnaire: 197
- Page views for 'Get Your Views Heard': 106
- Total views for all engagement pages: 777  
(The website averaged 6,000 page views per month this year across ALL pages)
- '10 scenarios' questionnaire : 123 completed  
(Combined total for paper and online submissions)

## b. Social media

- Twitter:
  - Tweets posted: 40
  - Impressions: 13,535  
(@NHSCorby averaged 15,666 impressions per month this year, so we've nearly equalled our monthly average on these Tweets alone)
  - Engagement (link clicks, retweets, likes): 155
- Facebook:
  - Posts: 35
  - Reach: 8,701  
(The NHS Corby CCG Facebook account had an average reach of 9,690 per month this year so we've nearly equalled our monthly average on these posts alone)
  - Engagement (post clicks, reactions, comments, shares): 1,014

During this pre-consultation period, our total reach across our social media platforms was 22,236.

### **Face to face**

In total, we spoke to 642 people face-to-face. This figure does not include the stakeholder engagement meetings, presentations and events attended.

- Appendix 1 lists all the groups and venues we attend over the twelve week engagement period.
- Appendix 2 is a complete list of all the community groups, organisations and businesses we contacted and the outcomes.
- Appendix 3 lists the stakeholder events and meetings attended.

### **Workshops**

We held two workshops in October by invite-only for members of the Corby Patient Representative Group (PRG) and the GP practices' Patient Participation Groups (PPGs). These were designed to present the case for change in more detail. 24 people attended across the two events.

In December we held a final workshop that looked at the challenges the CCG faces, the evidence collated so far – from public engagement, independent clinical opinion and data on usage of services in Corby. We then asked the attendees to help us shape what future primary and urgent services for Corby could look like.

As well as inviting PRG and PPG members, we opened up the invitation to anyone registered with a Corby GP. This was promoted in the local media and through the CCG's online channels. Thirteen people attended in poor weather.

## **Stakeholders**

Alongside public engagement, we have been running a stakeholder engagement programme to ensure all healthcare and social care colleagues, statutory bodies and politicians have been informed and involved in the discussions.

Members of NHS Corby Clinical Commissioning Group's executive have presented to clinicians across Northamptonshire and the neighbouring counties.

On a political level we have had a number of meetings with the local MP Tom Pursglove.

We also met members of Corby Borough Council, the Health and Wellbeing Board and the Northamptonshire Overview and Scrutiny Committee.

Our NHS colleagues have been involved and we have spoken to the Chief Executive of East Midlands Ambulance Service Northamptonshire, the executive team at Nene CCG and Cambridgeshire and Peterborough CCG.

We have also met with and presented to the Local Pharmaceutical Committee, Voluntary Impact Northamptonshire and have plans to visit First for Wellbeing, Healthwatch Northamptonshire and Lakeside Healthcare.

A stakeholder newsletter has been developed with two issues produced and a third planned for January 2018.

## **4. Insights**

### **Primary care services**

- Getting an appointment at a GP surgery is generally, but not universally, seen to be difficult. There is variance across the practices, with some good experiences reported.
- Poor access has been repeatedly reported at one practice, with long telephone and reception queues and waits of several weeks for appointments. Some patients have told us they have switched practices as a result, others that they don't bother trying to get an appointment and use the Urgent Care Centre instead.
- There was also some variance in access to different types of appointments. Those who needed on-the-day or emergency appointments found it easier to get one when compared to people needing follow-up or routine appointments. Some people reported receptionists not being able to book follow-up appointments there and then but instead telling people to call at 8am to book. Many patients then used the urgent/same day appointments in primary care for routine and follow-up appointments.
- Carers are a lot happier with access to GPs for them and the people they care for.

- Many people find the 8am call to access same day appointments difficult. These included people who work and/or have children; shift workers; and people with anxiety or other mental health issues. Although some practices have additional times of the day to call for same day appointments, these were also not convenient because of the same reasons.
- The requirement to ring at particular times of day places significant pressures on telephone answering, leading to frustration among people who cannot get through easily.
- Many described how they were told they could only discuss one issue at a time and then struggled to rebook or get longer appointments.
- Some people wanted to be able to see their own GP – in the majority of cases this was because they had long term or recurring issues and didn't want to have to explain each time they saw someone different. We also found that those with mental health issues wanted to have access to the same healthcare practitioner as they also did not want to explain their history and condition at each appointment.
- Many people were happy to be seen by other healthcare practitioners within primary care.
- Most people thought that extending appointment hours at GP practices was a good idea, with particular support coming from those that work full time, either 9-5 or shift work, and working parents. Those that were retired or did not work during the day did not see the benefit for themselves but did appreciate how it would help other people.
- Many people said that as Corby has an Urgent Care Centre, there is no need to extend GP opening hours. Conversely, many also said that if their GP surgery was open at, for example, weekends, they would go there instead of the UCC.
- People understand and expect that primary care services need to change, but there were some reservations:
  - Better primary care access needs to be in place before changes are made to other services
  - The pressure on GPs and other healthcare professionals to deliver extended hours for access to primary care

### **Urgent services**

- People in general don't want to see the Urgent Care Centre close. Most of those we spoke to use it as an alternative to primary care, visiting when they are unable to get a same day appointment at their own GP surgery. In some cases people are going straight there without calling their GP. This is either because they don't expect to get an appointment or they are taken ill later in the day and believe they won't be able to get a GP appointment.
- Services at the UCC were praised by the majority of people who had used it. Waiting to be seen did not generally seem to be an issue for most people, however some did tell us they had waited too long. Concerns were raised by a couple of people following their experiences of waiting in the UCC for appointments with children.

- There was widespread anxiety about the impact on KGH if there was no UCC. There was also concern that people may not be able to get to KGH.
- When we talked about what the UCC was there for and the costs of using it, many believed it was down to the UCC to turn people away and signpost them to more appropriate services.
- A few people – most notably those with children – said that an appointments-based system at the UCC would be better as they would have to wait. This was echoed by a parent of an autistic child who struggled with crowds and bustle and the wait to be seen had added to the stress on the child and family.
- We heard cases where people went to the UCC when they should have called 999 or gone straight to A&E. These included a man with a suspected heart attack and a woman with a suspected stroke. In both cases, treatment was delayed.
- A lot of parents we spoke to told us they use the Urgent Care Centre instead of their GP practice when their children are ill, because of the practical difficulties of ringing at 8am to get an appointment. They also use it after school and in the evenings, particularly when they are working, as they cannot get GP appointments if children are ill on return from school or need to be seen in the evenings when parents return from work.
- Some people did comment on witnessing or knowing of people using the UCC inappropriately for illnesses so minor that no medical care was required. Such observations are subjective and speculative, and so we are not attaching much weight to them as evidence.
- Many people told us about their experiences of using the UCC for minor injuries such as breaks and sprains. It was evident from the day we spent in the UCC that many people are using the UCC for minor injuries.

### **Right care, first time**

- People are generally confident they can find the healthcare services most appropriate to their needs, but it is clear many do not make the right choice. When this was explored with people further, particularly in relation to use of the Urgent Care Centre as an alternative to GP care, many people said they needed more help to navigate the system.
- Everyone we spoke to supported the idea of focussing more on prevention, to keep people well and out of hospital. Some concerns were raised around people who were living alone with little support.
- Many people spoke of the problems associated with getting people out of hospital when they are in
- There is an appetite for technology to support health and wellbeing through apps, digital prompts etc. People were also generally supportive of telephone consultations, with some people preferring them.
- Across all healthcare services available to people in Corby, most people were happy with the care and treatment they received – once they had accessed it.

## Other issues raised

- Transport has been frequently raised. We spoke to a number of people who do not have their own cars and rely on family and friends or public transport to get to healthcare appointments. People are also registered and/or use the services closest to their homes so they don't need transport to get there.
- Car parking was also raised as an issue – particularly in relation to KGH, but also at the UCC and Lakeside.
- The expanding population of Corby was cited frequently as a reason why the healthcare system cannot cope.
- There is a desire for a more joined-up system with social and healthcare working closer together.
- Members of the Save Our Urgent Care Group questioned the validity of some of the data presented at the first workshop.
- People have generally been quite shocked about the cost to the NHS of attending the UCC in comparison to the GP.
- A small number of people told us Corby needs its own hospital.
- Better communication and education needed to combat confusion.
- Many people said more services should be available or co-housed with primary care. One example included providing a venue for the new mental health café at one of the practices.
- 'Customer service' was raised in relation to receptions and also GPs who, during appointments, stared at the computer and did not engage with the patient.

## December workshops: shaping the proposals

A final workshop was held in December at which Corby Patient Reference Group members and other public representatives (including members of the group campaigning for retention of the UCC) were invited to feed directly into service options, by suggesting viable ways of addressing the clinical and financial challenges facing the local NHS.

The workshop produced strong agreement around a series of key ideas/wishes for a remodelled service:

- **Retention in Corby of an urgent service:** particularly for minor injuries
- **Conversion/reallocation of UCC resources to primary care:** create a GP-led service to enhance primary care capacity, particularly for on-the-day access – a "Same Day Access Hub"
- **Introduction of a local integrated triage/navigation system:** (both by phone and at the front door) to help people get the "right care, first time"
- **The right level of training for staff doing the navigating:** so that people can have confidence in their decision-making
- **Enough phone-answering capacity:** to avoid barriers to making appointments, particularly at busy times of the day

- **Longer primary care appointments:** for those who need them, particularly those with long term conditions
- **Greater use of new technology:** to support people with busy lives (eg for GP consultations or to aid self-care)
- **Help ease the financial burden for those on the lowest incomes:** for example a “medicines bank” to help with both non- and prescription costs
- **Education:** ensure people know where to go to access care/treatment if any changes are made to the services on offer
- **Retain local services:** to address issues around transport/cost of getting to other settings

### **Key conclusions**

- While the need for change is widely recognised, people want to know how change will affect/benefit them, their families and their friends. There is nervousness about what future service options may look like. Communications during consultation and post-decision need to reflect this.
- Primary care access remains the number one issue for people. Until they believe that has been adequately addressed, support for any other service change will be limited.
- The Urgent Care Centre is popular, both for its ease of access and quality of service. Any change to it has the potential to be seen as a loss to Corby.
- Support for the idea of preventing ill health is very strong. There is a public appetite for more resources to be visibly deployed to this agenda – and to resolving the delayed discharges issue.
- The transport implications of any service change must be taken seriously. Public transport is not good for people without cars who live in surrounding villages, and there is a feeling that the voluntary car pool is over-worked and under-resourced.
- Although some in-roads were made into the Eastern European communities in Corby, more effort will need to be made in the consultation phase to ensure their views are heard and they are aware of any potential changes to services.

## Appendix 1: Engagement Calendar

### September

5	Corby Health and Wellbeing Forum
6	Northamptonshire Health Overview and Scrutiny Committee
7	Corby CCG AGM
26	Corby Support Group, Northants Association for the Blind Corby CCG PPEA Corby Borough Council (drop in for Members)
27	PPG Chairs Meeting
30	Great Oakley surgery (flu jab clinic)

### October

3	Morrison's, Corby Great and Little Oakley WI
4	Corby Cube Library
10	PRG/PPG workshop
11	Young at Heart Lunch Club, Corby Irish Centre
12	PRG/PPG workshop Lakelands Hospice
13	Corby Market
14	Corby International Swimming Pool
17	Rockingham Coffee Club Corby CCG PPEA
20	Woodsend GP Practice
23	Asda, Corby
24	West Glebe Sports Pavilion Reception Corby Carers' Group
26	Pen Green Community Centre
30	Sunrise Family HIV Testing Clinic

### November

2	Cottingham and Middleton Village Store
7	Corby Health and Wellbeing Forum Gretton Lunch Club

9	The Autumn Centre
10	Corby branch of the Stroke Association
13	Great Oakley PPG
14	Tesco, Corby
21	Swan Gardens Care Home
23	Corby Business Group
	Lakeside Surgery/Urgent Care Centre
27	U3A
28	Corby CCG PPEA
29	PPG Chairs
30	Corby Disability Sports Club

#### **December**

12	Weetabix (plant 2)
13	Studfall Medical Centre
14	Weetabix (plant 1)
	Options workshop
15	RS Components

Red text identifies activity which overlaps public and stakeholder engagement.

## APPENDIX 2: Contacts made and outcomes to date

Group	Emails	Phone calls	Outcome
Corby Business Group	1	1	Visit
Corby Irish Centre	1	1	Visit
Corby Outdoor Market	1	4	Visit
Corby International Swimming Pool	1	2	Visit
Cottingham Lunch Club	1	2	Visit
Cottingham and Middleton Village Shop and Café	2	3	Visit
Great and Little Oakley WI	4	1	Visit
Gretton / Little Stanion / Weldon / Oakley Vale WIs	3	7	Visit
Gretton Lunch Club	1	1	Visit
Lakelands Hospice	3	4	Visit
Northamptonshire Association For The Blind - Corby Support Group	2	2	Visit
Pen Green Children's Centre	7	5	Visit
Rockingham Coffee Club	2	4	Visit
Rockingham Village Hall	1	5	Visit
Singing4Breathing (group for respiratory patients)	4	0	Visit
Stroke Association	1	2	Visit
Sunrise Family Clinic	1	1	Visit
The Autumn Centre	1	3	Visit
West Glebe Sports Pavilion	1	1	Visit
The Cube Library	2	2	Visit
Asda	2	5	Visit
Morrison's	2	1	Visit
Tesco	3	7	Visit
Great Oakley Surgery	1	1	Visit
Woodnewton Supplementary Schools	3	1	Visit
Lakeside Surgery	1	1	Visit
Woodsend Surgery	1	1	Visit
Lodge Park Sports Centre (Disability Sports Club)	1	1	Visit
HART Group	1	1	Visit booked for consultation
Corby Borough Council - Traveller Department	3	5	Visit
Corby Business Academy	5	2	Visit
Kingswood Secondary Academy	5	2	Visit
Corby LGBT	4	2	Visit planned
Housing Support Intervention and Involvement (CBC)	3	3	Date of visit TBC
Latvian / Lithuanian / Polish and Serbian Saturday	2	1	Visit booked but

Supplementary Schools			postponed on the day by the school
NRG Disability Sports Club	5	2	Visit
RS Components	1	3	Visit
Studfall Medical Centre	1	1	Visit
Studfall Practice	1	1	Visit
Swan Gardens Care Home	3	1	Visit
Weetabix Plant One	2	5	Visit
Weetabix Plant Two	2	5	Visit
Corby Borough Council (officers)	0	0	Date of visit TBC (HWF request)
Urgent Care Centre	1	0	Visit
Membership Services, Corby Borough Council	1	1	Info gathered and shared
Corby Food Bank	1	1	Info gathered and shared
Corby Mind	8	10	Info gathered and shared
First for Wellbeing	2	5	Info gathered and shared
Editor of Cottingham and Middleton News	10	4	Info gathered and shared
Church of Scotland and Secretary of Churches Together in Corby and District	2	1	Info gathered and shared
S2S: Substance to Solution	1	1	Info gathered and shared
www.lovecorby.co.uk	1	1	Info gathered and shared
Great Oakley and District U3A	1	1	Visit
Tata Steel	1	1	Information shared – unable to visit due to health and safety concerns
Corby Radio	2	1	Info gathered and on-going sharing of information
Portuguese Community representative	1	2	Info gathered – waiting on suggestion on how to engage

Contact in the Hindu community	1	1	Info gathered
Blackthorn Wood Golf Complex	0	1	Info gathered
Buddhist [Vietnamese] community	1	0	Info gathered
Corby Age UK	1	2	Info gathered
Corby Borough Council - Community Engagement Team	7	3	Info gathered
Corby Borough Council - Health Protection	6	1	Info gathered
Corby Borough Council - Landlord Services	1	2	Info gathered
Corby Borough Council Sports Development Team	2	3	Info gathered
Corby Bridge	1	1	Info gathered
Corby Deaf Hub	5	2	Info gathered
Corby Rotary Club	1	0	Info shared
Corby Town Football Club	5	3	Info gathered
Corby VCS	10	5	Info gathered
Corby Walking Football Club	1	0	Info gathered
Cottingham Parish Council	1	1	Info gathered
Policy Officer - Equality and Diversity at CBC	3	1	Info gathered
Youth Officer, Healthwatch Northamptonshire	3	1	Info gathered
Euro Hub Corby - owned by Prologis	1	0	Info gathered
Gretton Parish Council	0	1	Info gathered
Gretton Village Hall	1	2	Info gathered
Helping Hands Advisory Service	0	1	Info gathered
Integrated Cancer Therapies (ICTouch Healing)	7	0	Info gathered
Kettering Borough Council - membership services	2	1	Info gathered
Kingswood Children's Centre	3	1	Info gathered
Lakelands Hospice Shop	0	7	Info shared
Middleton Parish Council	1	1	Info gathered
Migraine Action	1	0	Info gathered
Northamptonshire Disability Resource Centre	1	1	Info gathered
Northamptonshire Inter Faith Forum	1	1	Info requested but not received
Northamptonshire Police - Corby Central and Rural Team	2	1	Info gathered
Stanion Parish Council	2	1	Info gathered
Stanion Village Hall	2	1	Info gathered
Stephenson Way Community Centre	1	3	Info gathered
Teamwork Trust	0	1	Info gathered
The Samuel Lloyds Corby Deaf Pub	0	1	Info gathered
Neighbourhood Manager at CBC	5	3	Info gathered
Voluntary Impact Northamptonshire	6	1	Supplied additional contacts and info on voluntary and seldom heard groups

Walking for Health	0	1	Info gathered
Brooke Weston	1	1	No response
Corby Indoor Market	1	5	No response
Corby Mosque	3	3	No response
Danesholme Library	2	3	No response
Gretton Cricket Club	2	0	No response
Gretton Football Club - Adults	2	0	No response
Gretton Football Club - Juniors	2	0	No response
Gretton Local History Society	2	0	No response
Gretton Parish Church	0	2	No response
Oakley Vale WI	1	1	No response
Corby Polish Church	1	2	No response
Saints Together Christian Church	1	1	No response
Tresham College	1	1	No response
Weldon Parish Council	2	1	No response
Chair of Corby Muslim Association	0	3	No response

'Information gathered' means we have the contact information for a group/organisation but have not contacted them as yet and 'information shared' means we have contacted them, explained what we are doing and are working with them to decide the best way to communicate to their members. In some cases attending is not possible (eg Tata Steel) or not appropriate (eg the local cancer support group) but we have been asked to share information and web links and to keep them informed going forwards into consultation.

This is a work in progress and we are still contacting, adding and making contacts in advance of the formal consultation.

## Appendix 3 Summary of stakeholder engagement

### Clinical engagement

- Clinicians at the Medical Advisory Committee at Kettering General Hospital
- 3Sixty Care Partnership
- Nene North GPs.
- Corby GPs and practice managers at the CCG's Council of Members
- Northamptonshire Healthcare Foundation Trust
- Northamptonshire General Hospital

Contacted GP out-of-hours service and Urgent Care lead but no response as yet.

### Political

- Local MP Tom Pursglove.
- Members of Corby Borough Council on 26 September and they are satisfied they will not need a further update until the New Year.
- Northamptonshire Overview and Scrutiny Committee
- Health and Wellbeing Board

Second diary date for the Overview and Scrutiny Committee arranged for March

### NHS colleagues

- Chief Executive of East Midlands Ambulance Service Northamptonshire
- Executive team at Nene CCG
- Cambridgeshire and Peterborough CCG

East Leicestershire and Rutland CCG contacted numerous times but no meeting fixed as yet.

### Other Stakeholders

- Northamptonshire Local Pharmaceutical Committee
- Voluntary Impact Northamptonshire
- Healthwatch Northamptonshire

Booked for 10 January 2018: First for Wellbeing, Adult Social Services

Lakeside Healthcare - contacted but no response forthcoming