



In July 2013, NHS England called on the public, NHS staff and politicians to engage in an 'open and honest debate on the future shape of the NHS in order to meet rising demand, introduce new technology and meet the expectations of its patients'. In response to this national initiative, Shropshire and Telford and Wrekin Clinical Commissioning Groups agreed to undertake a joint Call To Action engagement process with local populations.

But, What Next?



The Call To Action consultation run by Shropshire and Telford and Wrekin Clinical Commissioning Groups (SCCG and T&WCCG) closed on 25th November 2013 with a conference held at the Telford International Centre.

The conference was led by Accountable Officers Dr Caron Morton, from SCCG, and David Evans, from T&WCCG. The public, voluntary groups, NHS staff and stakeholders met to discuss the challenges the NHS is facing and to debate possible ways of addressing these vital issues.

Both CCGs were delighted with the level of survey responses from across the county, with related twitter debates and with attendance at the conference. The CCGs would like to thank everyone who participated. The Call To Action conference was also attended by Jim Hawkins, BBC Radio Journalist who compered the event and by Sir David Nicholson, Chief Executive of NHS England who was the conference's keynote speaker.

In-depth survey responses have now been put together with summaries of the discussions at the conference, and the outcomes are summarised on the next page. This information will be used in two ways:

- First, to help inform plans for what services are commissioned in the next three to five years. The information will help to prioritise and design services that meet the needs of local populations in Shropshire and in Telford and Wrekin;
- Second, to help inform the NHS Future Fit work over the next six to nine months and agree the best model of care for acute and community hospital provision across Shropshire that best meets the needs of both urban and rural communities.

The Call To Action conference confirmed that there was agreement from those taking part in the consultation process on the need for radical change within the local NHS.

Our personal commitment to you:

On this basis the Accountable Officers of NHS Shropshire Clinical Commissioning Group, Dr Caron Morton and NHS Telford and Wrekin Clinical Commissioning Group, Mr David Evans committed to undertaking further work to look at how the need for change could be translated into local safe and sustainable NHS services for the next 50 years.



Call To Action Feedback



An online public and clinician survey ran from 4th October to 4th November 2013 and asked respondents which aspects of the NHS were important to them. A Call To Action conference took place on 25th November 2013 to provide an opportunity for those attending to hear the feedback from

the survey and to have further discussion and debate. The results of the survey and the issues raised in the conference in response to the question 'What is important to you?' have been collated and a series of common themes have emerged which are set out over these two pages.

Our experience

Patients want a trustworthy NHS, centred around patient needs, taking account of physical, mental and environmental wellbeing and using a holistic approach. Different solutions for service delivery should be considered, but risks should be managed, particularly for marginalised groups. It is important that the overall experience of the NHS is consistent, not only for patients, but also for their relatives, visitors, friends and carers.

Real life feedback from patients' experiences should be encouraged and welcomed and, more importantly, acted upon. Sometimes patients may not feel confident or able to provide feedback and so it is important that there is an advocate who can speak for them in these situations.

Staff morale contributes to patients' experiences and it is important that poor or variable staff morale is addressed.



Working together

There must be trust between patients and doctors. This should be supported by improved co-ordination and integration between clinical staff, health professionals, health organisations, social care and informal care in our communities.

It is important that politics; national, local and that between public organisations, is not allowed to adversely influence healthcare design and decision-making.

Finance and resources

It is important that the NHS receives a sustainable level of resources, collaborates with social care and considers joint working with other 'over the border' services. Funding should follow the patient across organisational boundaries. The current economic climate means that reduced budgets will impact on services, staffing and retention – but this should not detract from a good patient experience.

The NHS needs to focus on value for money and improve the use of its resources by:

- Tackling waste/duplication
- Bringing together health and social care budgets
- Improving number/location and quality of hospitals
- Considering restricting access to some treatments
- Making better use of technology
- Prioritising some patient groups
- Improving population health
- Considering reducing or abolishing car parking charges.

Information

Patients need information on what health services exist so they can access them more readily. This information will help support self-care and decision-making for ongoing health issues.

It is important that information is in plain English.

Communication and engagement

Communication starts with the basics and, all too often, hospital layout and signage is confusing. Communication with patients must be open and honest – with less 'hoodwinking', and clarity about what is or is not possible.

The NHS should promote itself more and highlight all the good work it does.

It is important that the NHS listens to and involves the wider community in decision-making by engaging, consulting and communicating with the local population. It should ensure more involvement of marginalised groups (with potential cultural differences) and the 'silent majority'.



The NHS must undertake meaningful clinical engagement and foster better communication between NHS organisations and within each NHS organisation.

Personal Responsibility

Everyone must take more responsibility for the management of their own health, rather than over relying on the NHS to undertake this.

The NHS should support patients by providing peer education (e.g. health champions), access to self-management education using a variety of different mechanisms and focusing resources on prevention and lifestyle choices.

Quality

Services in different parts of the NHS are variable and addressing quality in one area may have unintended consequences in other areas. Services should be seamless between different parts of the NHS and social care. There should be continuity of care from the GP with a consistent level of competency from all health professionals.

It is important to receive care, compassion and respect and be treated with dignity when in contact with the NHS. Poor staff morale needs to be addressed as this impacts on quality of care.

People

Patients must be at the heart of everything the NHS does. The NHS is about people – and so relationships and mutual respect between patients and staff matter.

Access to services

Access needs to be right for the patient, but necessarily limited to the range and scope of potentially available services. It is important to have 24 hour A&E, 7-day access to primary care and GPs who are able to spend more time with patients and less on administrative tasks. High quality social care and acceptable access to secondary care services are also needed. There is a desire for more minor injuries units, walk in centres, community and acute services available locally.



There is also awareness that more specialist services could be located on one hospital site, but this must be considered alongside geographical access to services.

Accountability

NHS decision-makers must take responsibility for the outcomes of their decisions about NHS services and be held to account. The public want to make sure that where decisions are being made, they are shaped by clinicians, stakeholders and patients. They also want politics to be kept out of the decision-making process. There is concern about what the decision-making process will be for the review of acute and community hospitals.

Design of Services

It is important that the design of services is radical and sustainable and that the NHS avoids more tweaking of services. In the past, previous NHS management and political interference have introduced unsustainable change. Questions were raised about whether A&E is being used by the public in the way it was designed to be used. Also, should A&E provide different services and should it be located on both hospital sites or in one central facility?

Redesign should be based on a joined-up 5 - 10 year, long-term plan which is clinically sensible, driven by clinicians and based on a clear understanding of demand and capacity. This redesign must provide:



- Clinical safety and the movement /transfer of services to a GP/ community setting
- A design where 'form follows

function' and integration is not compromised by current building stock or current working arrangements

- The wider use of technological solutions
- A simpler system of assessment to allow easier navigation by clinicians, NHS staff and patients.

All decisions must be based on the reality of an ageing population and different socio-economic groups.

It is important that the NHS addresses the dilemma of the location of services. Clinical quality might be improved by centralising more specialist/acute services, but patients will need more primary - and community-based care closer to their homes.

The NHS must also focus on the care of older people, children, those with long-term conditions and mental health problems and address concerns about reducing services at one or other of the hospital sites.

What makes a decision sustainable?



We are committed to using a set of principles, developed at the conference, which will make our decision making more robust:

- Patients are at the heart of everything we do
- All factors have been taken into account
- All decisions must be based on accurate or best-available information
- There is shared confidence that problems and issues will be addressed
- Decisions will be objective and rational, but also compassionate
- Processes will be transparent
- Decisions will be based on shared principles
- There must be two-way, honest and accurate communication with affected people
- Easily understandable language must be used
- Everyone affected by a decision must have an equitable opportunity to be involved in helping shape the decision
- A decision must attempt to address the problem for as many people as it can
- Any risks arising from the decision must be identified and mitigated as far as possible
- There must be access to specialist advice to help make the decision
- Ongoing monitoring must be in place to ensure the outcome of a decision is as expected.

Shropshire CCG and Telford and Wrekin CCG would like to note the invaluable input from patient representatives who took time and care to assist with the Call To Action feedback and in producing this document.

Thank you.

**The NHS
belongs to
the people**

A CALL TO
ACTION

Shropshire and Telford and Wrekin CCGs recognised the need to introduce Call To Action to local populations, and to explain the challenges the NHS is facing in order to stimulate interest and debate.

To do this quickly, the CCGs produced an engagement pack comprising website links (see <http://www.shropshireccg.nhs.uk/call-to-action> and <http://www.telfordccg.nhs.uk/call-to-action>) which included a presentation (in hard copy and on YouTube), and a leaflet and poster that set out the key challenges for the NHS. The pack aimed to identify how people could feed their views into the process. A survey was made available online and printed. The survey asked four main questions:

"I really hope that this is not a 'cosmetic' attempt to make the public feel that they have been consulted..."

- *In terms of healthcare, what is most important to you and your family and why?*
- *What might be some options for change?*
- *What do you think are the main difficulties and opportunities for the NHS over the next 5 years?*
- *Do you have any other comments you would like to make?*

The survey was conducted between 4th October and 4th November 2013 and 2906 responses were received. A report on the findings from the

public survey can be viewed online at <http://www.shropshireccg.nhs.uk/call-to-action> and at <http://www.telfordccg.nhs.uk/call-to-action>.

Some key findings included:

- 59% of respondents addressed the issue of access to healthcare services
- Of the 1,034 comments received about improving local services, 61% referred to improving access to GPs or GP out-of-hours services
- 67% lived in urban areas and 31% in a rural setting or village

Clinicians across Shropshire were asked to complete a similar survey online and 250 clinical staff responded – see the high level feedback here: <http://www.shropshireccg.nhs.uk/call-to-action> and <http://www.telfordccg.nhs.uk/call-to-action>.

The CCGs arranged a whole day conference at Telford International Centre on 25th November 2013 to provide an opportunity for the survey results to be shared and for further debate and discussion to take place. This Call To Action conference was attended by over 300 individuals. Martin Fischer, an Associate of the Centre for Innovation in Health Management at Leeds University, facilitated some of the discussion.

A short video of the conference is also available on the CCG websites or, available here: <https://www.youtube.com/watch?v=OutT80zqPOU>. Online presentations and social media were used to assist with engagement activities including live twitter feeds and interaction with the hash tag #CallToAction during the conference.

Comments from the conference included:

"...public sector partners work closely together..."

"Sustainable in the long-term..."

"We're all taxpayers..."

futurefit
Shaping healthcare together

Get involved, Stay involved!

There is a lot we can celebrate in the local NHS - but also much that can, and should improve. Future Fit builds on the work we have done so far for Call To Action, by reviewing acute and community hospital provision. Help us shape the future of your NHS by visiting: <http://www.shropshireccg.nhs.uk/nhsfuturefit> or, <http://www.telfordccg.nhs.uk/nhsfuturefit>

