

Consultation Process Plan

5 November 2014

Have your say on

**NHS 111 and GP Out of Hours Services for Cambridgeshire and
Peterborough**

Proposed consultation xx December 2014 to xx February 2015.

Background

Cambridgeshire and Peterborough Clinical Commissioning group Governing Body have been considering proposals for a future procurement of the GP out of hours service and the 111 service for patients in Cambridgeshire and Peterborough.

The 111 service is currently provided by Hertfordshire Urgent Care across the whole area and Urgent Care Cambridgeshire and Cambridgeshire Community Services provide GP Out of Hours services in Cambridgeshire and Peterborough, respectively.

Currently in an urgent situation patients can ring 999 for a life threatening illness or injury and call 111 for non life threatening situations. Many of the calls to 111 need to be addressed by a GP, and although people are told to call their GP practice within 24 or 48 hours, or the call is referred to the GP out of hours service, some do not take this advice and present themselves at nearest A&E Department. Currently 111 services are staffed by trained call handlers and clinical advisors. A number of 111 services across the country have integrated services with GPs able to answer calls.

Currently around 45,000 patients per month use 'open access' services which include 111, out of hours GP service, minor injury or minor injury and illness centres, and A&E. Estimates vary but around 30% of these patients are not attending the best place for their condition, first time.

Why are we consulting now?

The CCG is looking at piloting a number of front of house support options over the winter 2014/15. The outcome of these pilots will also inform what type of front of house model we consider, if they are successful in directing people appropriately/

This would be a change to the current 111 service as an element of this would be face to face. Currently this is a telephone only service.

This face to face 111 as a reception point for A&E has been piloted in Blackpool. They ran a 24/7 service with three minute processing times for each patients and were able to divert 25% of patients away from the A&E department.

In order to effect this change the CCG is aware of the need to engagement with patients and key stakeholders in considering these options.

The CCG needs to weigh the need to consult with the need to effect these changes as quickly as possible. The CCG will prepare a comprehensive consultation process plan to describe how it intends to discharge its duty in relation to Section 14Z2 of the Health and Social Care Act. Wisbech Local Commissioning Group is also looking at working with the Norfolk CCGs who are also out to procurement at the moment and we will need to work in a targeted way with that population, alongside Norfolk.

The CCG is keen to ensure any new model is in place for winter 2015, starting on 1 November and is requesting that the Committee consider and eight week process for engaging with patients starting in December and ending by the beginning of February in order to be able to influence the service specification that is developed.

The CCG has set up a Programme Board to oversee the procurement, with the first meeting taking place on 12 November. We are pleased to say that Healthwatch organisations in Peterborough and Cambridgeshire have agreed to be on the Board and we also have patient representation from across our patch, but clearly there is a need to reach a wider group.

Process

Pre-consultation

Cambridgeshire and Peterborough CCG will:

- Prepare a full and comprehensive consultation document that explains the programme and the options for consultation in clear plain English.
- Prepare a summary of this consultation document for people who are not able, or do not want, to be able to read the full consultation document
- Translate the summary consultation documents into key community languages, explaining that more information is available if people want it.
- Prepare text rich and plain text versions of all of the consultation documents for people with sensory disabilities to download.
- Ensure that drafts of the full consultation documents and questions for consultations are shared with the following groups:
 - CCG Governing Body
 - Health Scrutiny Committees from Cambridgeshire, Peterborough, Northamptonshire, Hertfordshire and Norfolk.
 - The CCG Patient Reference Group (PRG)
 - Healthwatch organisations from Cambridgeshire, Peterborough, Northamptonshire, Hertfordshire and Norfolk.
- Ensure that the final consultation document reflects feedback from these groups.
- Plan a series of public meeting in accessible venues across the whole CCG area.
- Publicise these meetings within the consultation documents.

Consultation

Cambridgeshire and Peterborough CCG will:

- Have copies of the consultation documentation available on the website from the first day of the consultation and throughout the consultation.
- Have translations and rich text versions of the documentation on the CCG website as close to the start of the consultation as possible.
- Have photocopies of the documentation prepared for distribution on the first day of the consultation.
- Have printed copies of the full document, summary document and translations as soon as possible after the start of the consultation.
- Distribute these documents to:
 - GP practices
 - Dentists
 - Pharmacies
 - Stakeholder database
 - Councils for Voluntary Services (Peterborough and Cambridgeshire).

- Health Scrutiny Committees, Cambridgeshire, Peterborough, Hertfordshire, Northamptonshire, Norfolk.
 - Health and Wellbeing Boards, Cambridgeshire, Peterborough, Hertfordshire, Northamptonshire, Norfolk.
 - Local Health Partnerships, Fenland, S.Cambs, E.Cambs, Cambridge City, NE Northants, Hunts
 - CCG Patient Reference Group
 - Patient Forum Groups
 - Healthwatch organisations, Peterborough, Cambridgeshire, Northamptonshire, Hertfordshire, Norfolk.
 - Libraries
 - Cambridgeshire Community Services NHS Trust
 - Cambridge University Hospitals NHS Foundation Trust
 - Cambridgeshire and Peterborough NHS Foundation Trust
 - East of England Ambulance Service MNHS Trust
 - Hinchingsbrooke Health Care NHS Trust
 - Peterborough and Stamford Hospitals NHS Foundations Trust
 - Queen Elizabeth Hospital NHS Trust
 - Unions
 - NHS England Area Team
 - Police
 - Fire
 - Urgent Care Cambridgeshire
 - Herts Urgent Care
 - Lincolnshire Community Health Services NHS Trust /Peterborough Minor Illness and Injury Unit
 - North Cambridgeshire Hospital, Wisbech
 - Princess of Wales Hospital, Ely
 - Doddington Community Hospital
 - St. Neots Walk-in Centre
 - Brookfields
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- Send media release to all local media outlets at the start of the consultation and at strategic points in the consultation to ensure widespread media coverage.
 - Use Facebook and Twitter to raise awareness of the consultation
 - Ensure that translations are made available on request as well as in key community languages.
 - Ensure that all translations are available on the CCG website when requested.
 - Ensure that all responses received in other languages are translated into English and included in the response reports.
 - Log all calls received with regard to the consultation
 - Collate all letters and emails received as part of the consultation
 - Ensure that all public meetings held have full meeting notes, recording comments and questions.
 - Ensure that when we attend meetings we record a briefing note of the meeting and request full minutes when available.
 - Collate all meeting notes, briefing notes and minutes
 - Publish frequently asked questions on our website during the consultation.
 - Respond to requests for attendance at meetings to discuss the consultation.
 - Attend meetings with the following key stakeholder groups during consultation:

- Health Scrutiny Committees in Cambridgeshire, Peterborough
- Health Scrutiny Committees in Northamptonshire, Hertfordshire and Norfolk on request.
- Healthwatch organisations in Cambridgeshire and Peterborough. Attend in Northamptonshire, Hertfordshire and Norfolk on request.
- CCG Patient Reference Group
- Health and Wellbeing Boards in Cambridgeshire, Peterborough, Northamptonshire, Hertfordshire and Norfolk (on request).
- Local health Partnerships in Cambridge City, South Cambs, East Cambs, Fenland, Hunts, East Northants.

Post Consultation

A report to be produced on the consultation responses

Cambridgeshire and Peterborough CCG Governing Body will review report and findings before making its decision.

Press release on the outcome of the consultation, emphasising the changes made to the procurement following consultation feedback

Communications to be sent via email/letter to stakeholders/and consultation respondents with link to consultation report and outcomes.

Feedback to staff via email, staff briefings and Connect

Feedback to members via, Members news and Members email

Continued communication as procurement process progresses.

Legal requirements

The consultation documents will be drawn up in accordance with following legal requirements and guidance:

Cabinet Office Consultation Principles July 2012

This guidance sets out the principles that Government departments and other public bodies should adopt for engaging stakeholders when developing policy and legislation. It replaces the Code of Practice on Consultation issued in July 2008. The governing principle is proportionality of the type and scale of consultation to the potential impacts of the proposal or decision being taken, and thought should be given to achieving real engagement rather than merely following bureaucratic process. Consultation forms part of wider engagement and decisions on whether and how to consult should in part depend on the wider scheme of engagement.

Policy makers should bear in mind the Civil Service Reform principles of open policy making throughout the process and not just at set points of consultation, and should use real discussion with affected parties and experts as well as the expertise of civil service learning to make well informed decisions. Modern communications technologies enable policy makers to engage in such discussions more quickly and in a more targeted way than before, and mean that the traditional written consultation is not always the best way of getting those who know most and care most about a particular issue to engage in fruitful dialogue.

The full consultation principles document can be accessed via the Cabinet Office website at:

<https://www.gov.uk/government/publications/consultation-principles-guidance>

Section 14Z2 Health and Social Care Act 2012

14Z2 Public involvement and consultation by clinical commissioning groups

(1) This section applies in relation to any health services which are, or are to be, provided pursuant to arrangements made by a clinical commissioning group in the exercise of its functions ("commissioning arrangements").

(2) The clinical commissioning group must make arrangements to secure that individuals to whom the services are being or may be provided are involved (whether by being consulted or provided with information or in other ways)—

(a) in the planning of the commissioning arrangements by the group,

(b) in the development and consideration of proposals by the group for changes in the commissioning arrangements where the implementation of the proposals would have an impact on the manner in which the services are delivered to the individuals or the range of health services available to them, and

(c) in decisions of the group affecting the operation of the commissioning arrangements where the implementation of the decisions would (if made) have such an impact.

(3) The clinical commissioning group must include in its constitution—

(a) a description of the arrangements made by it under subsection (2), and

(b) a statement of the principles which it will follow in implementing those arrangements.

(4) The Board may publish guidance for clinical commissioning groups on the discharge of their functions under this section.

(5) A clinical commissioning group must have regard to any guidance published by the Board under subsection (4).

(6) The reference in subsection (2) (b) to the delivery of services is a reference to their delivery at the point when they are received by users.

For more on the Section 14Z2 Health and Social Care Act 2012 see <http://www.legislation.gov.uk/ukpga/2012/7/section/26/enacted>

Lansley Criteria for Significant Service Change

In May 2010, the Secretary of State for Health, Andrew Lansley, set four new tests that must be met before there can be any major changes to NHS Services:

1. Support from GP commissioners
2. Strengthened public and patient engagement
3. Clarity on the clinical evidence base
4. Consistency with current and prospective patient choice