

REGIONAL CHILDREN'S HOSPITAL COMMUNICATION AND ENGAGEMENT PLAN

To: **HEALTH COMMITTEE**

Meeting Date: **14th March 2019**

From: **NHS ENGLAND**

Electoral division(s): **ALL**

Purpose: The purpose of this report is to formally brief the Committee about the developments with regard to the proposed new Children's Hospital in Cambridge and seek feedback from the committee about the approach proposed to ensure that patients, families and the public are involved in co-developing the plans.

Recommendation: The Health Committee is asked to **NOTE** the report and **FEEDBACK** its view on the approach to engagement outlined in section 2.

1. BACKGROUND

- 1.1 In December 2018, the Government announced that it would invest £100 million of capital over five years to build a children's hospital in Cambridge for the East of England region. This allocation was part of a process in which Cambridgeshire and Peterborough as a region attracted over £140 million to include refurbishment schemes at Hinchingbrooke Hospital and Addenbrooke's Hospital.

The Cambridgeshire and Peterborough STP submitted its bids for capital based on its own assessment of the priorities for the area. The allocation to this region is one of the highest awarded nationally.

2. MAIN ISSUES

- 2.1 The vision for a children's hospital for the east of England region

The vision is to create a fully integrated mental and physical health hospital designed for children and young people. It will be co-located with research and developed and delivered through an innovative joint proposal between University of Cambridge (UoC), Cambridgeshire and Peterborough NHSFT (CPFT) and Cambridge University Hospitals NHSFT (CUH), together with our staff, patients and service users, and the public.

This innovative new model of integrated physical and mental health care underpinned by world leading genomic research has the potential to be a model of care that can be rolled out nationally to benefit the whole NHS and as well as enabling CPFT and CUH to be a more effective and efficient regional hub, providing our East of England partners with the support they need to ensure the sustainability of local services for patients close to home.

It is testament to our strong partnership working across the system and to the credibility that we have built with national bodies as an STP that we were successful in securing capital through the STP Capital Allocation Process in December 2018.

Meaningful collaboration, engagement and co-production with staff, patients and the public, well as STP members, commissioners and other NHS providers, will be essential at each phase of the project.

The NHS faces a number of **key challenges** to improve children and young people's health, nationally, regionally and locally. These include the:

- Effectiveness and sustainability of children's services in the east of England region
- Provision of high-quality mental and physical health paediatric services in Cambridge
- Relatively poor UK child health outcomes

To help address these challenges CPFT, CUH and the UoC have developed an exciting and

innovative proposition for an EoECH which will deliver five **key opportunities** that will improve children and young people's health. The EoECH will:

1. Provide the east of England with an essential children and young people's services hub, which will be able to effectively and efficiently support GPs, community services and district general hospitals across the region, significantly strengthening existing clinical and research networks to keep care close to home and support the development of a sustainable regional paediatric workforce.
2. Develop fully integrated paediatric mental and physical health care across primary, secondary and tertiary care, supported by world-class research and digital networks, in a model which can be rolled out throughout the UK.
3. Partner with academia and industry using genome technology for early detection and prevention of serious mental and physical health conditions in children and young people. Shifting the curve from reactive to preventive medicine starting before birth, this will result in an increase in quality-adjusted life years (QALYs) and reduce the costs of treatment.
4. Address local challenges by creating critical medium term capacity for Cambridgeshire and Peterborough STP, particularly in adult services, supporting the system to improve clinical outcomes, unlock significant multi-source capital investment from philanthropy and other partners, address key estate and capacity issues, and help reduce the system financial deficit.
5. Address national gaps by contributing lifespan health datasets for digital solutions to improve health and life outcomes.

The new hospital will replace the existing children's facilities at Addenbrooke's Hospital, and the CPFT CAMHS facilities at Fulbourn (which are no longer able to use their current site from 2023), creating modern, age-appropriate facilities and clinical pathways.

To develop this proposition further CPFT, CUH and UoC are working together with our staff, patients and service users, and the public, to develop the necessary business cases required by the Government's capital investment approvals process.

The first stage of this is a strategic outline case (SOC), which focuses on making the case for change (i.e. the challenges and opportunities set out above) and identifying the preferred way forward (i.e. that there should be a EoECH). Thereafter the project is required to develop an outline business case (OBC) which is focused on identifying the preferred option for delivering the EoECH (i.e. the potential scope and design of the building) and a full business case (FBC) which focuses on setting out the most economically advantageous method of procuring the preferred option and also confirms the final scope and design of the building.

2.2 Involvement of patients, families and the public

The patient voice is a critical component that has informed and continues to shape the partnership's joint strategic priorities. Co-production and engagement with young people and their families is central to the development of our integrated clinical model and we will be working closely with patients from CPFT and CUH to co-design the new hospital.

2.2.1 Engagement to date

At CPFT there is a strong commitment, expertise and history of involving service users and carers in service design. Within children's services, there is an established engagement programme with young people and carers. This is led by the directorate's head of participation and involvement, with a range of activities including 'have your say groups' and parent groups for each service.

Feedback from the initial work that is underway to hear from young people and families about the EoECH, has identified a range of benefits they see to the new hospital, but also some concerns. We will need to partner with young people and families in designing the hospital to ensure their concerns are resolved.

Opportunities	Concerns
<ul style="list-style-type: none">• Better integrated care• Physical health links• Purpose built• Access to services• Public transport links• Facilities for families	<ul style="list-style-type: none">• Homely, non-institutional therapeutic environment• Need for privacy, worry about being judged• Importance of green outdoor space• Noise• Intimidating hospital environment

CUH are supported by a group of children, many of them previous patients, in the form of a young supporters group called 'ACTIVE'. This group meets several times a year with support from staff to help focus on adding value to areas and services used by children and young people across CUH. This will be one of the key groups involved in developing the plans.

Several initiatives have taken place to test patient, local and national support for the vision of EoECH and CPFT and CUH will develop and use their network of patient groups to ensure children, young people, families and carers are fully involved. This will form part of the comprehensive patient and public engagement strategy that is now being planned.

2.2.2 Future patient and public engagement

The patient and public engagement strategy will use a multi-layered approach to ensure the involvement of young people, families and the local population across Cambridgeshire,

Peterborough and the whole of the eastern region. This will include qualitative and quantitative methods such as face to face engagement, as well as traditional media and digital activities, websites and a dedicated microsite. Our values and core principles for engagement will follow best practice.

The strategy has three objectives:

- Collect evidence and insight from patients, service users, their families and carers and the communities served by the hospital
- Joint decision making by adopting a co-production approach so that patients, service users, their families and carers have both a voice in developing the plans and are part of the governance arrangements for the development and delivery of the engagement plan
- Achieving collective ownership by the people of the east of England to create a sense of pride in their hospital and create a social movement for fundraising to support the development of plans.

The strategy will contain a range of methods bespoke to the needs of the different audiences:

- Patients, service users, their families and carers
- NHS and social care staff – workforce, trade unions and professional bodies
- Health partners – CCGs, acute trusts, community services, mental health providers, Department of Health and Social Care, NHS England
- Local authorities – overview and scrutiny, unitary and district councils, safeguarding teams, children's services
- Academia – schools, colleges and universities
- Charity and voluntary sector – patient groups, community advocates and people with lived experiences
- Opinion formers – politicians (local, regional and national) and community leaders including religious and faith based
- 'Seldom heard' – socially excluded, marginalised and diverse
- The public / community – place based and communities of interest, including digital
- The media – traditional press / broadcast, digital and social influencers

To ensure we learn from past experiences and take the best approach to patient and public involvement, links are being made with other schemes and projects that saw the wholesale redesign and redevelopment of children's services, including Alder Hey Hospital in Liverpool and the Evelina Hospital in London. We are also seeking peer support from other children and young people's participative groups such as the NHS Youth Forum and the local young people's Citizens' Senates.

The co-production approach will ensure complete transparency in reporting the findings of the various engagement activities and enable participants to see and share the evidence collected. Regular updates and reports will go to the various local authorities and will be reviewed by HealthWatch and NHS England.

The engagement plan will follow the INVOLVE national standards for patient and public involvement, including a strong commitment to industry standard evaluation of the contribution of patients and the public in the design and development of the children's hospital.

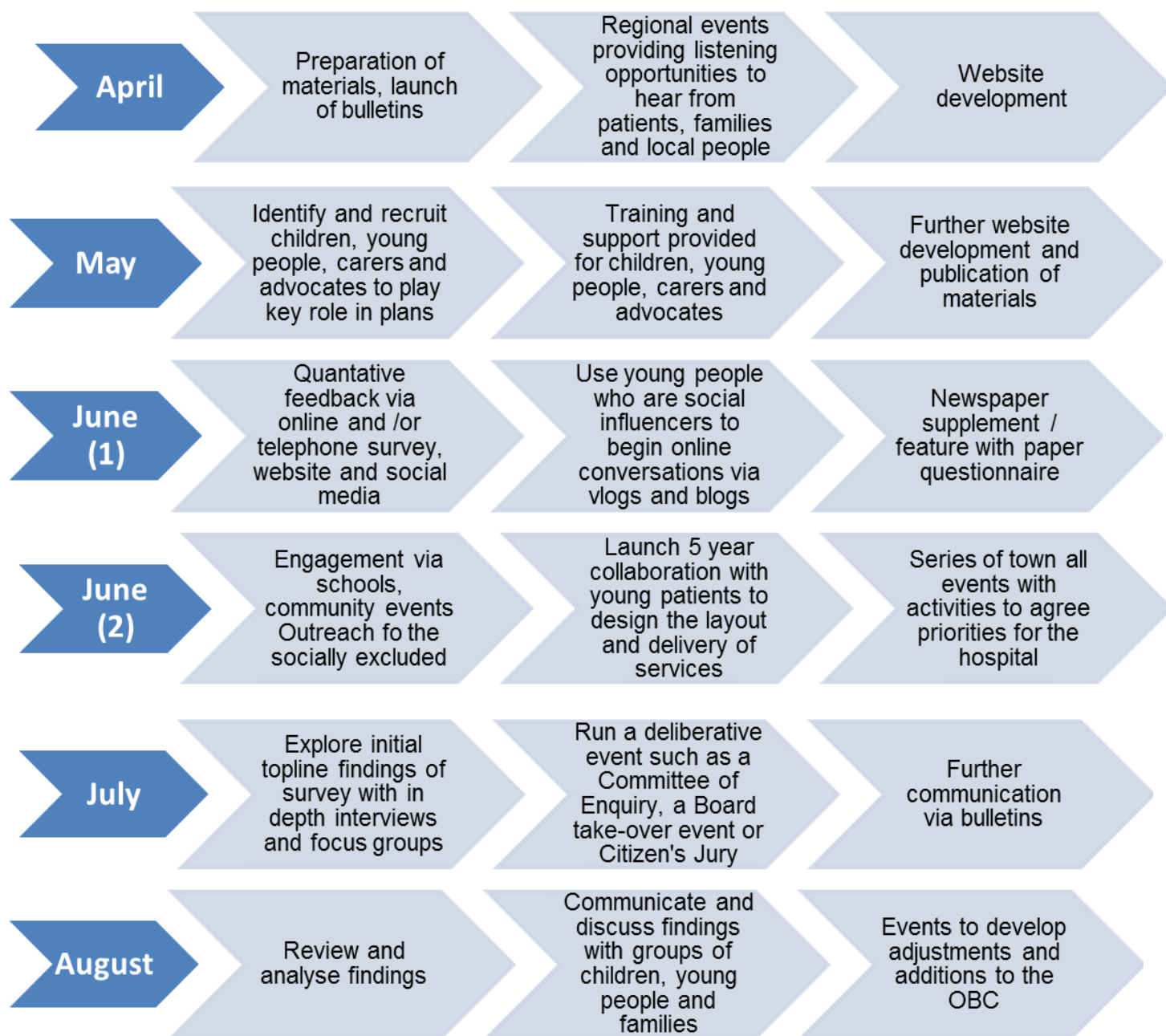
To support the delivery of an ambitious engagement programme, a social enterprise or independent agency with expertise and experience in co-production and design of health facilities will be commissioned.

A stakeholder analysis is taking place to identify key patients and public groups and young people.

2.2.3 Timeline for engagement

The outline business case will be developed between February and autumn 2019, with the development of the full business case taking place from spring 2020 to spring 2021. Construction would take place from winter 2021 to winter 2023.

The diagram on the following page summarises some of the key engagement activities that feature in the plan for the first phase – development of the outline business case.



2.2.4 Commissioning view of approach to patient and public engagement

NHS England is the lead commissioner for the EoECH and has a duty under Section 13Q of the NHS Act 2006 (as amended) to 'make arrangements' to involve the public in commissioning. The Midlands and East regional specialised commissioning team requires any potential service change to be subject to an assessment against this standard to ensure that appropriate engagement takes place.

The development of the plans for the hospital will take place over the next two years and it is important that the involvement of children and young people, their families and the wider population continues throughout this period.

The engagement approached proposed for this project will go beyond engagement, ensuring patients, families and local people are continually involved and co-produce plans for the hospital.

The project team has committed to regularly consult the Health Committee over this time.

NHS England has undertaken a 13Q assessment on the proposed engagement approach and will continue to monitor the delivery of the engagement strategy to ensure the engagement meets the standards expected by the NHS Act 2006. The assessment concluded that the proposed approach gave patients, families and local people a genuine opportunity to shape the plans and develop the business case. It considered that the two-year involvement approach offers more meaningful engagement than an alternative 12 week consultation on the EoECH vision, but noted that it would be important to understand whether the Health Committee would support that view.

There will need to be a planning consultation at a later stage when there is a design for the building. There will also need to be a further 13Q assessment and consideration of consultation requirements if the co-production with young people and families working with clinicians and the project team results in a significant change to a patient pathway that will impact patients, families or stakeholders.