

## **Consultation Process Plan**

**14 March 2014**

Have your say on  
**Improving Older People's Services**  
across Cambridgeshire and Peterborough

**Proposed consultation 17 March to 16 June 2014.**

**DRAFT**

## **Background**

Cambridgeshire and Peterborough CCG (CCG) has been running a procurement process based on an outcomes framework model. Much of the NHS is run on inputs, data is collected on attendances, or units of activity, not necessarily on the results of that activity and the outcome it has for the patient. The CCG wants to change this to an outcomes model, where the effects of treatment are measured, where the outcome that the patient wants is the focus of the treatment or activity.

Through the 'Integrated Older People's Pathway and Adult Community Services procurement' we are looking to find an organisation, or group of organisations that have come together as one, who can deliver a joined-up approach to healthcare services for older people and improved health outcomes.

The procurement process began in July 2013. In September 2013 we announced that there were 10 bidders, made up of a number of both NHS, independent sector and social enterprise organisations competing for the contract.

A series of workshops and discussions were then held with the bidders between October and December 2013.

In January 2014 five of the 10 bidders put forward their initial proposals known as Outline Solutions for improving older people's healthcare.

A period of evaluation and moderation then took place from which a shortlist of Outline Solutions was drawn up in February 2014.

### **Why are we consulting now?**

We have been conducting engagement events and meetings throughout this procurement. We have held events with the voluntary and charities sectors as well as patient representative and stakeholder meetings. We have visited many groups of older people across the whole CCG area. This engagement work will continue throughout this programme of work.

The procurement process that we are following is based on an Outcomes Framework which is designed to encourage innovation in the delivery of services for older people.

Bidders are required to put forward proposals (Solutions) in order to meet the outcomes that we, the CCG want to see as a result of this tendering process. This means we needed a shortlist of 'Outline Solutions' from the bidders before we had something meaningful for people to give feedback on.

The CCG will take into account the response to consultation, produce a report setting out any changes which are necessary, and require bidders to build these into their final submissions.

## 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 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.
- Engage an external market research company to devise a questionnaire to accompany the full and summary consultation documents.
- Translate this questionnaire into key community languages, to accompany translated documents.
- Ensure that drafts of the full consultation documents and questions for consultation are shared with the following groups:
  - Bidders
  - Older People's programme board
  - Strategic Projects Team
  - Patient Reference Group
  - CCG Governing Body
  - Health Scrutiny Committees from Cambridgeshire, Peterborough, Northamptonshire and Hertfordshire.
  - The CCG Patient Reference Group (PRG)
  - Healthwatch organisations from Cambridgeshire, Peterborough, Northamptonshire and Hertfordshire.
- Ensure that the final consultation document reflects feedback from these groups.
- Plan a series of public meetings in accessible venues across the CCG area. There will be a mix of afternoon and evening meetings.
- Publicise these meetings within the consultation documents and on our website
- Share publicity materials with our partners and stakeholders. Will we put adverts in local papers.
- The CCG's meeting requirements form will detail for each meeting who is attending, roles, equipment and any risk assessments.

### 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. Community languages include:
  - Polish
  - Portuguese
  - Lithuanian
  - Urdu
  - Latvian
  - Russian
  - Other languages on request
- 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 questionnaire (if a separate document) and translations as soon as possible after the start of the consultation.
- Distribute hard copies of the documents to:
  - GP practices
  - Dentists
  - Pharmacies
  - Opticians
  - Sheltered Housing schemes
  - Nursing and residential homes
  - Stakeholder database
  - Councils for Voluntary Services (Peterborough and Cambridgeshire).
  - Libraries
  - Cambridgeshire Community Services NHS Trust – particularly community/district nursing staff and other staff likely to be involved in providing care
  - 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 (Edith Cavell site)
  - Queen Elizabeth Hospital NHS Trust
  - Unions
  - NHS England Area Team
  - Health Education England (Cambridge office)
  - NHS PropCo (Cambridge office)
  - Police
  - Fire
  - Urgent Care Cambridgeshire
  - Herts Urgent Care (providers of C&P CCG NHS 111 service)
  - 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
  - Other NHS organisations (on request)
  - Local Authorities
  - District Councils
  - Parish Councils
  - Housing Associations
  - Cambridgeshire Community Services Staff
  - Health Scrutiny Commissions
  - Health and Wellbeing Boards
  - Local Health Partnerships
  - Older People's Partnership Boards
  - Local Voluntary Sector Organisations
  - Charities
  - CCG Patient Reference Group
  - Practice Patient Groups
  - Healthwatch organisations
  - Mental Health Network
  - NHS England
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- Ensure that further copies are distributed throughout 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 and include in the response reports.
  - Receive and report on all petitions received during 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 and include in the response reports.
  - 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 and Huntingdon.

- Health Scrutiny Committees in Northamptonshire and Hertfordshire on request.
  - Healthwatch organisations in Cambridgeshire and Peterborough. Attend in Northamptonshire and Hertfordshire on request.
  - CCG Patient Reference Group
  - Health and Wellbeing Boards in Cambridgeshire, Peterborough, Northamptonshire and Hertfordshire.
  - Local health Partnerships in Cambridge City, South Cambs, East Cambs, Fenland, Hunts, East Northants.
- Hold public meetings in venues across the region.
  - Ensure public meetings are a mix of both afternoon and evening sessions.
  - Hold some public meetings or events at the weekend.
  - Have interpreters at each community meeting where necessary or requested as well as sign language interpreters on request.
  - Attend groups or events on request, if possible.
  - Ask to attend events and groups in locations where we haven't been able to hold a public meeting.
  - Advertise all public meetings via the website, local papers, and on social media, at least three weeks before the meetings.
  - List all public meetings on our website, as well as in the consultation document.
  - Plot our events to show that we have had CCG coverage.

**Email/letter** with link to/copy of consultation and list of public consultation meetings

- Stakeholder database
- CCG staff
- CCG Patient Reference Group
- PPGs (where possible)
- GP Practices
- GP Members
- Healthwatch(s)
- Local Voluntary sector
- Parish Councils
- County and City Councils
- District Councils
- Housing Associations
- NHS organisations as listed
- Unions
- Groups and individuals that we have already engaged with throughout the process

## **Media**

Engagement Team, Cambridgeshire and Peterborough Clinical Commissioning Group  
 Lockton House, Cambridge, CB2 8FH. 01223 725304.  
 Engagement@cambridgeshireandpeterboroughccg.nhs.uk

**Media briefing pack** for journalists – copies to be sent via email at launch or earlier if embargo agreed. To include:

- OPP leaflet
- About the CCG leaflet
- Past press releases relating to OPP
- Link to OPP page on website
- Quotes from named individuals relating to consultation
- Web address for consultation documents
- Public meeting dates

Limited number of hard copies to be available at Public Meetings for attending media.

**Media release** for distribution at following each Governing Body meeting:

- 4 March - Public consultation on older people's healthcare and adult community services to begin. Possibility of this being a multimedia release with a short (1-minute) video file attached featuring Clinical Lead.
- April
- May
- June
- July

## **Social Media**

**Facebook** (Only 67 likes for CCG page – age group according to FB insights is 18 to 24 years)

- Media releases flow through automatically
- Post link to consultation on page with details of what it is about and an invitation to share the link to increase audience.
- Post details of each public meeting a week before, the day before, on the day

## **Twitter**

- Tweet press releases
- Tweet link to consultation on page with details of what it is about and an invitation to re-tweet the link to increase audience. Repeat monthly throughout consultation
- Tweet details of each Public Meeting a week before, the day before, on the day.
- Tweet after each meeting thanking those who attended.

## **Updates**

Engagement Team, Cambridgeshire and Peterborough Clinical Commissioning Group  
Lockton House, Cambridge, CB2 8FH. 01223 725304.  
Engagement@cambridgeshireandpeterboroughccg.nhs.uk

## **Staff**

- Email to staff from Clinical Lead prior to launch - early March
- Email to staff launching consultation with link to consultation documents.
- Fortnightly updates via Connect
- Staff briefings.
- Staff can direct any questions that they may have to the Consultation/ Engagement mailbox?

## **GPs/practice staff**

Email from Clinical Lead via the Membership mailbox prior to launch - early March

- Email launching consultation with link to consultation documents.
- Monthly updates via Members News
- Q&A session at Members' Meeting on 13 May 2014
- Members' mailbox for questions

## **Stakeholder database**

- Update taken from media release following 4 March Governing Body
- Link to consultation on launch day
- Reminders for public meetings a week before
- April stakeholder update
- August stakeholder update

## **Governing Body Updates**

- Date to be agreed – mid consultation

## **Post Consultation**

An Independent report to be produced on the consultation responses

Cambridgeshire and Peterborough CCG Governing Body will review report and findings before making its decision on the Older Peoples Programme

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 – through full solutions phase and throughout mobilisation (to be agreed.)*

## **Legal requirements**

This consultation document has been drawn up in accordance with the key consultation criteria as set out in the Cabinet Office Code of Practice on Consultation 2008.

### **1. When to consult**

Formal consultation should take place at a stage when there is scope to influence the policy outcome.

### **2. Duration of consultation exercises**

Consultations should normally last for at least 12 weeks with consideration given to longer timescales where feasible and sensible.

### **3. Clarity of scope and impact**

Consultation documents should be clear about the consultation process, what is being proposed, the scope to influence and the expected costs and benefits of the proposals.

### **4. Accessibility of consultation exercises**

Consultation exercises should be designed to be accessible to, and clearly targeted at, those people the exercise is intended to reach.

### **5. The burden of consultation**

Keeping the burden of consultation to a minimum is essential if consultations are to be effective and if consultees buy-in to the process is to be obtained.

### **6. Responsiveness of consultation exercises**

Consultation responses should be analysed carefully and clear feedback should be provided to participants following the consultation.

### **7. Capacity to consult**

Officials running consultations should seek guidance in how to run an effective consultation exercise and share what they have learned from the experience.

The Code of Practice states that these criteria should be reproduced in all consultation documents.

Find out more about Cabinet Office Code of Practice on consultations:  
[www.bis.gov.uk/policies/better-regulation/consultation-guidance/code-of-practice](http://www.bis.gov.uk/policies/better-regulation/consultation-guidance/code-of-practice)

## **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