



# Health Overview and Scrutiny Panel

## October 2022

**Report of:** BNSSG Healthy Weston Phase 2

**Title:** Themes from an 8-week public engagement exercise on the new model of care for Weston General Hospital set out within the Healthy Weston 2 programme.

**Ward:** N/A

**Officer Presenting Report:** Colin Bradbury, Andy Hollowood

**Contact Email Address:** [Helen.edelstyn@nhs.net](mailto:Helen.edelstyn@nhs.net);

## Recommendations

The committee is asked to:

1. Note the outputs from the 8 week public engagement exercise on the new model of care for Weston General Hospital

## 1. Executive Summary

Local clinicians have developed a model that builds on the progress made as a result of Healthy Weston Phase 1 and the merger in 2020 between Weston Area Health Trust and University Hospitals Bristol. This model will:

- Preserve the current 14/7 A&E service at Weston, seeing the same range of people and providing the same treatments as today
- Deliver better outcomes for patients of all ages. This includes using digital technology to get specialist opinion and, if someone needs specialist inpatient treatment, who is not suitable for older people's services or surgical care (e.g. appendicitis or broken bones), transferring them to larger centres that can deliver better outcomes and shorter lengths of stay in hospital
- Give a clear and sustainable service model that is more likely to attract key staff to come and work at Weston, building on recent success of teams both in the hospital and in the community who have been able to attract new staff to come and work in Weston
- Drive further integration with local community and primary care services
- Mean that many more people can be treated locally at Weston.

More than 5,000 members of the public, patients and carers, staff and a wide range of other stakeholders have contributed to the Healthy Weston programme, including helping to identify priorities, developing, and testing models, providing feedback, and highlighting areas for further development.

We continued this strong focus on engagement as we delivered an 8-week period of public engagement between June and August to help plan the practical implementation of Healthy Weston Phase 2.

The feedback and insight from this engagement period, is set out within this report, and will further inform and strengthen our understanding of the perceived impacts of the new model of care and what people would like to see done to mitigate any challenges.

## 2. Introduction

The North Somerset Health Overview and Scrutiny Panel (HOSP) met on 20 April 2022 and decided that the preferred model put forward for Healthy Weston Phase 2 should be considered a process of service improvement. This model was then subject to evaluation by clinicians, managers, and patient representatives at an independently chaired evaluation workshop on 21 April 2022. This workshop used evaluation criteria that had received support in advance from the North Somerset HOSP. The workshop considered two clinical model options against the evaluation criteria. A consensus recommendation of Option 2 as the preferred option was put forward and ratified by the Healthy Weston Steering Group on 31 May. A final report from the South West Clinical Senate Review Panel held on 31 March has been received. The report confirms the Clinical Senate's assurance of the preferred model.

On 7 June 2022, the Bristol, North Somerset, and South Gloucestershire Clinical Commissioning Group Governing Body [BNSSG CCG GB], agreed the Healthy Weston Phase 2 Outline Business Case, which set out the preferred model, and confirmed a commitment to a dedicated period of public engagement building on the existing engagement work that has already been undertaken. This cover report sets out the outputs from public engagement between 20 June and 14 August 22.

Further detail on the preferred model of care for Weston General Hospital, presented in the Outline Business Case to BNSSG CCG GB on 7 June can be found at Appendix A.

## 3. What we achieved through public engagement

Given our extensive previous engagement activities to develop and test the Healthy Weston Phase 2 model, the focus of this engagement period was on **gaining information to further inform our implementation plans**. To achieve this, we undertook 8 weeks of active listening and engagement, followed by one month of drawing together themes and ideas that will further inform implementation plans.

Between 20 June and 14 August 2022, we asked members of the public, staff, people who might be particularly affected and those that had not been involved before to help us plan practical next steps. We promoted opportunities to get involved by:

- **advertising** using newspaper articles, webpages, social media, pop-up stands at hospitals, videos, existing meetings, and the staff intranet and newsletters
- **directly inviting** community groups and partner organisations, members of the Healthier Together Citizen's Panel, hospital staff and people on our mailing lists
- **working with others**, such as placing leaflets, posters and website links in health and social care organisations, and attending existing meetings of community groups and staff

In total, we heard from 890 people during this engagement period. This was more than our target of up to 500 people, and they were from a range of different areas, age groups and roles:

- three quarters were members of the public, community groups or other groups and one quarter were NHS staff
- two thirds lived in Weston, Worle and villages or other parts of North Somerset. The rest were mainly from Bristol and South Gloucestershire
- two thirds were women. About 1 in 10 were from minority ethnic groups. One third were aged under 50 years, one third 50 to 65 years and one third older than 65. One quarter had a disability or long-term health issue.

#### 4. People and stakeholders we engaged with

Our aim in this 'planning for implementation' period was to engage with:

- those who are **interested in identifying potential solutions** to the key themes we are prioritising
- groups that we have **engaged with less** in our previous engagement activities
- groups that may be **affected** by the planned Phase 2 approach, including any groups identified by our Equalities Impact Assessment as potentially negatively impacted

The feedback received reflects these focus areas and many of the groups identified in our stakeholder list, including feedback from transport companies, disability access groups [NS People First, Deaf community], Patient Public Groups, multicultural groups, a men's health group, BNSSG Citizen's Panel and staff groups. Whilst the team emailed all groups on the stakeholder list and followed this up with a telephone call offering the group someone to visit or host an online meeting to listen to feedback about the Healthy Weston 2 plans this wasn't always taken up by the group.

Further detail on the stakeholder's we engaged with is set out in the HW2 Engagement Themes report in appendix B.

#### 5. Focus for this phase in engagement

Based on learning from earlier engagement for Phase 2 and formal consultation from Phase 1 of the Healthy Weston programme, our Equality Impacts Assessment and review of our proposed approach by groups such as North Somerset Health Overview and Scrutiny Panel, South West Clinical Senate and patient and staff reference group, five themes were agreed for engagement.

The five themes are

1. How should we let people know about plans for Weston General Hospital? We are keen to continue to engage and listen to people as we begin putting plans into action.
2. Most services at Weston General Hospital will continue as they are now, with services for all ages including maternity, children's services, and adults' services. Are we clear that there will be services for all ages at Weston General Hospital?
3. What could we do to encourage people to have a planned operation at Weston General Hospital? E.g., advertising shorter waiting times?

4. Some of our plans mean that people will travel to another hospital further away for their specialist care. What practical things could health services do to help if people and visitors are at a hospital further away from home? For example, support with technology to help people stay in touch with loved ones.
5. How could we mitigate any concerns staff at the Trust running Weston General Hospital may have?

## 6. Key themes from what we heard

An independent team has compiled the themes from the engagement, including the things from the feedback that we need to consider in our onward planning. The theme summary from the independent team is set out in appendix B. The following paragraphs set out the headlines from the independent report.

Overall, the people we engaged with were positive about the plans for Weston General Hospital:

- The survey asked people whether they agreed or disagreed that ‘the plans will improve Weston General Hospital. Of the survey responses, 73% agreed that the plans will improve Weston General Hospital.
- In meetings and pop-up stands people were also positive about the overall vision for developing Weston General Hospital
- 84% of survey responses liked the idea of having more care for older people at Weston General Hospital
- 88% of survey responses liked the plan to offer more planned operations at Weston General Hospital, and 75% said that they would be happy to have planned surgery at Weston General Hospital
- NHS staff provided similar feedback as members of the public. NHS staff were just as likely as members of the public to think that the plans would improve Weston General Hospital

*‘Always good to know that planned improvements are underway. The overriding story coming through is the increasing backlog of demand for medical procedures. A positive newsfeed on how Weston General Hospital is proactively working to combat this would help promote its plans’ [Bristol resident, via Citizen’s Panel]*

The responses also suggested things that we could do to strengthen the approach and work in a joined-up way. Suggestions included:

- focusing more on transport and parking, such as liaising with transport providers to increase direct public transport links between hospitals
- the need to proactively promote and build the reputation of Weston General Hospital
- undertaking detailed work on staff morale, retention and wellbeing to make sure that the plans could be implemented and sustained, and also provide a staff transport service between hospital sites
- more integrated planning. Some responses said that the plans rely on integrated work with social care, transport, and other services to help people leave hospital quickly.

Survey responses sometimes stated that the opening hours of the A&E department should be extended, however we were not seeking feedback about this during this engagement period as no change to A&E is planned as part of Healthy Weston phase 2 programme of work.

Other responses were worried whether we would have the money and workforce to implement the plans.

*'There might be some upset surrounding the plans so there needs to be a campaign to highlight the benefits as much as possible and build up the reputation' [North Somerset resident resident, via Citizen's Panel]*

Further detail on the themes from the engagement with is set out in the HW2 Engagement Themes report in appendix B.

## 7. How we will use what we learn

The theme summary will be reviewed by the Patient and Staff Reference Groups and the Healthy Weston programme team. We will then use the suggestions and what we learnt during this engagement period to:

- inform and update our implementation plan
- update our impact assessments
- develop a communications strategy to support the implementation period, including staff consultation
- continue to engage with the public, patients, staff and other key stakeholders

The programme will prepare a 'you said, we did' document listing how the suggestions were considered and what, if anything, is being done as a result

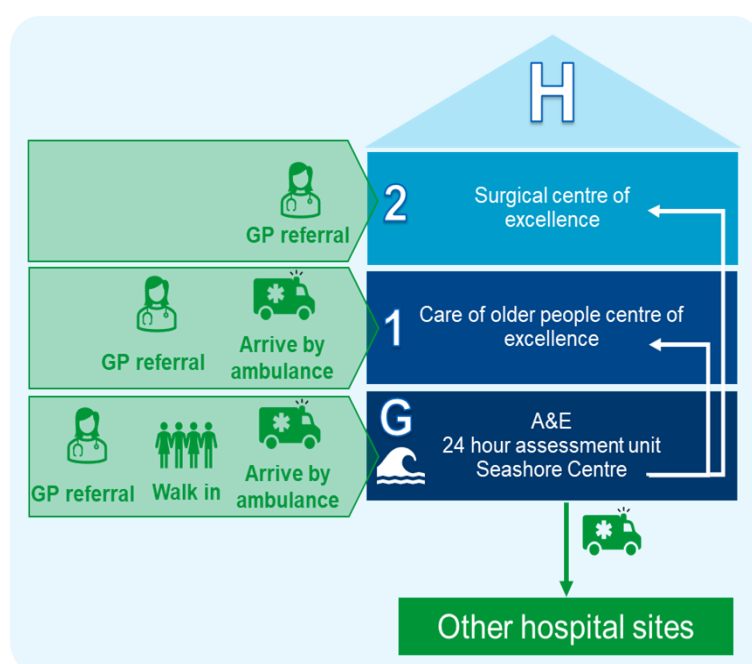
## Appendix A: New Model of Care for Weston General Hospital

Weston General Hospital will:

- become a **centre of surgical excellence**. This means thousands more planned operations for people of all ages will be carried out
- become a **centre of excellence for older people's care**. This means it will provide more care for people who are frail, in addition to all the usual services for people of all ages
- help more people **go home quickly** after an emergency. It will have units for assessing and treating patients quickly.

Weston General Hospital will **continue to provide A&E services from 8am to 10pm**, exactly the same as for the last 5 years.

Other services at Weston General Hospital will continue to be provided and improved the same as now, such as outpatient appointments, maternity care, children's services, cancer care, diagnostic tests like x-rays, intensive care, emergency surgery and stroke rehabilitation, for people of all ages.



Under the proposed new model, inpatient medical specialties are concentrated in other surrounding hospital leaving Weston to focus on developing centres of excellence. This will mean all people in an ambulance, other than those with conditions for which there are existing established pathways (e.g., major trauma), would be taken to Weston General Hospital for assessment and initial treatment. If, on assessment, they need inpatient medical care for longer (other than people who would benefit from treatment in the new centre of excellence for older people or emergency surgery) they would be transferred to another local hospital for their care.

This option ensures that Weston General Hospital:

- treats the majority of emergency cases at Weston
- reduces the number of non-elective beds displaced to neighbouring hospitals
- gives Weston staff a wider range of patients to treat, thereby aiding recruitment and retention.

## Appendix B: HW2 engagement themes summary