Ward 15 Stakeholder Reference Group

1:30pm on Tuesday 4 October 2016

Royal Hospital for Children

MINUTES

Present:
Jennifer Rodgers (Chair) Chief Nurse, Paediatrics and Neonates, NHSGGC
Neil Ferguson Head of Planning, South Sector, Women & Children, NHSGGC
Joe Ferrie Engage Renfrewshire
Kimberley Hutchison Your Voice Inverclyde
Dagmar Kerr Action for Sick Children Scotland
Rachel Killick Patient Experience Public Involvement Manager, NHSGGC
Dr Lesley Nairn Consultant Paediatrician, NHSGGC
Catriona Renfrew Director Planning and Policy, NHSGGC

In attendance:
Lisa Ramsay PA and Team Support, PEPIQ
Louise Wheeler Service Change Advisor, Scottish Health Council

Actions

1. Welcome & Apologies
Jennifer Rodgers welcomed all to the meeting and introductions were made. Apologies were noted from Caroline Champion, Elaine, Karen, Kerry and Sandra.

2. Minutes of Meeting previously held on Monday 5 September 2016
The minutes of the previous meeting were agreed as accurate.

3. Options Appraisal Report
Catriona Renfrew advised that, following on from discussion at the last meeting about the options appraisal exercise held in 2011, an options appraisal report had been circulated to the group following the previous meeting of the Stakeholder Reference Group (SRG) for information.

The report is also available on the engagement pages of NHS Greater Glasgow and Clyde’s website.

Dagmar Kerr said that she had previously seen the report following the 2011 engagement process.

4. Summary of Engagement on the Proposal So Far
Rachel Killick summarised the main engagement opportunities which had taken place since the last SRG meeting:

- We have held six drop in sessions for patients and parents to ask us any questions about what is being proposed, offer their feedback and comment. Four of these were in Ward 15, Royal Alexandra Hospital, one was in a paediatric clinic in Inverclyde Royal Hospital, and another in the Vale of Leven Hospital. We spoke with 19 people at these drop ins.
• We have hosted two public engagement events for people to hear from clinicians about what is being proposed and why, and to hear from attendees what they think is important for the Board to consider. The events were attended by 35 people.
• We have been emailing an extensive network of 400 people and organisations about the proposal, to inform them of opportunities to take part, spread the word, and have their say.
• People have spoken to us on the phone and via email, to ask questions, comment and feedback. 17 people have chosen to take up this opportunity.

Rachel gave a brief overview of the main themes of what NHS Greater Glasgow and Clyde have heard so far:

• People very much value Ward 15, and the high quality of care children have received there.
• People listened to the clinical views about why this change is better for children and emphasised the importance of explaining this in simple, clear language.
• People feel it is important to look into the impact the proposal might have on travel for patients and parents.
• People value the personal approach staff on Ward 15 have to parents and patients, where they know the staff and the staff know them. They would want the same in the new Royal Hospital for Children.
• People want to know how their views will be taken into account by the Board when making their decision.
• People want to be sure if the Royal Hospital for Children has the capacity to care for those additional children who would be seen at the Royal Hospital for Children, should the proposal go ahead.

Joe Ferrie advised that Engage Renfrewshire circulated the email promoting the public event and that would have reached approximately 400 people.

5. Feedback and Evaluation of Meeting and Engagement So Far
Jennifer asked the group for their thoughts and feedback on the engagement so far.

Joe advised that the public event session he attended on 27 September was well attended, especially by local councillors. The majority of the representation was from Paisley. Joe felt the presentations at the public event were good, clear and helpful, and that one of the main themes from that event was issues on transport and the cost of transport and also confusion about what happens should the Board decide not to go to consultation. Joe added that he and his organisation were neutral.

Jennifer thanked Joe for his feedback.

Kimberley Hutchison asked if the presentation from the public events could be shared with the group. Catriona replied that it would be circulated and that it was already on NHS Greater Glasgow and Clyde’s website.
Catriona asked Rachel if the themes from the drop in session in Inverclyde differed from those at the Royal Alexandra Hospital. Rachel replied that there was a perception from some parents she spoke to that the journey time would be longer to get to the Royal Hospital for Children than to the Royal Alexandra Hospital. Rachel then sat with the parents and carried out a comparison check on the internet. For parents she spoke with in Inverclyde, journey times on Google Maps were either the same or quicker to get to the Royal Hospital for Children. Kimberley added that there would be cost implications for those parents travelling on public transport from Inverclyde. Catriona said that travel costs would be looked at if the Board decide to proceed to consultation.

Dagmar asked if there was financial support available to parents for visiting their children in the Royal Hospital for Children. Jennifer said that she would liaise with the Family Support and Information Service, and confirm if financial support was available.

Neil Ferguson told the group that he was aware of various areas that were not highlighted in the presentation including the broader catchment area of Ward 15 and that only a small number of people have a prolonged stay. Lesley added that currently the majority of complex care would be carried out at the Royal Hospital for Children anyway, and not at the Royal Alexandra Hospital.

Joe said that the Scottish Ambulance Service representatives made good points at the public event; advising that a child should not be transported to hospital in a car because people feel it is quicker than an ambulance, as it not is the best interests of the child. The parents or carers should wait on the ambulance as treatment can be provided by the paramedics as soon as they get to the child. Rachel said that if the Board decide to proceed to consultation, further work on ambulance transport times to the Royal Alexandra Hospital and the Royal Hospital for Children will be undertaken. Neil added that he was working with the Scottish Ambulance Service. Catriona said that the Scottish Ambulance Service will ensure that patients get to the correct hospital which is appropriate for their care.

Lesley suggested that it may be worthwhile carrying out a public information campaign advising people what Emergency Department to attend, when to phone an ambulance and advising when it would not be appropriate to transport a child to hospital in a car. Dagmar added it would also be helpful to raise awareness with the public when it is not appropriate to attend Emergency Departments.

Catriona explained that part of the engagement process is understanding what NHSGGC can do differently, and that could be providing information to parents about what to do and where to go for their child.

Catriona asked those in the group that were involved in the previous consultation on Ward 15 if there was any difference in the issues being raised. Joe replied that is was mostly the same between the initial engagement process and this engagement process.
Joe advised that a public event had been held recently in Paisley by the Kids Need Our Ward campaign group about the proposal. Catriona said that it would be useful to have feedback from that meeting so that they can be fed into the engagement process. Rachel advised that she has already asked parent campaigners from Kids Need Our Ward to let her know if there were issues raised or questions asked at this event.

Lesley said that one of her observations was that the public events held by NHS Greater Glasgow and Clyde were only attended by one parent that used both the services at the Royal Alexandra Hospital and the Royal Hospital for Children. Rachel said that all the drop-in sessions she carried out were attended by parents that use the services. Rachel added that thought should be given on the best way to communicate with parents about the outcome of the engagement process.

Neil added that he felt the tone of the first SRG was measured, as was the family he spoke with at the public event. He felt that the main concerns raised by people were about logistics.

Joe said that the public events were advertised well throughout the Renfrewshire area and that Engage Renfrewshire promoted the events. Dagmar confirmed that Action for Sick Kids Scotland promoted the public events via Facebook and it had hundreds of ‘reaches’. Kimberley advised that Your Voice Inverclyde gave out information in Inverclyde.

Catriona said that should the Board decided to go to a public consultation then that will be another opportunity for parents, carers and the public to give their views on the proposal.

6. Next Steps
Jennifer asked the group members if they would be willing to continue with their participation should the Board decide to go to public consultation. All agreed they would like to continue their involvement. Catriona added that it would be helpful for the Stakeholder Reference Group to review the consultation material and process should the public consultation go ahead.

Kimberley asked how the Board would decide whether the public consultation should or should not go ahead. Catriona replied that a report will be provided to the Board which will include the feedback that has been received during the engagement process, and how this could be taken into account.

Catriona confirmed that the Patient Experience Public Involvement team will be carrying out further travel analysis, should the Board decide to proceed to public consultation. Rachel added that Scottish Government guidance says that a transport analysis should be carried out and from discussions with parents, they will look at public transport, drive time, parking and ambulance transfer times.

Dagmar said that it is important to emphasise all of the services that will continue to be provided in the Royal Alexandra Hospital.
Catriona confirmed that input from the SRG meetings, as well as feedback received during the engagement process, will be incorporated into a report that will be presented to the NHSGGC Board on 18 October 2016.

Catriona asked Louise Wheeler if she could give a view on the engagement process. Louise added that most of the evaluations of the public event on 27 September 2016 rated the event from okay to very good. Rachel said that the majority of people that attended the public events said they had been given the opportunity to express their views and ask questions on the proposal. Others noted that event attendees had raised that transport and parking was an issue as well as deprivation in the Paisley area. Rachel asked the group members to complete an evaluation form.

Jennifer thanked the group for their contribution.