

NHS GRAMPIAN

THE BAIRD FAMILY HOSPITAL AND THE ANCHOR CENTRE PROJECT

Communication and Involvement Framework

Approved by Project Board October 2015 and updated June 2016

1. Introduction

This Framework aims to provide an agreed and transparent approach to informing patients, public and other stakeholders, and involving them in The Baird Family Hospital and The ANCHOR Centre Project. The Framework gives an overview of the project, and more detail is available from the Project Team, if required. An Involvement Action Plan for each project will also be developed, covering the coming 6 months over the life of the project, the first of which is attached in Appendix 1. The action plan will be developed, implemented and reviewed by the Communication and Involvement Subgroup for each project.

The Framework has been informed by discussions with the Project Board and the Scottish Health Council, by adopting written national guidance, and by views and comments gathered through patient and public involvement to date.

2. Project Aims

The overarching project aim is to build The Baird Family Hospital and The ANCHOR Centre as two new, fit-for-purpose facilities on the Foresterhill Health Campus. These buildings will provide modern clinical accommodation to support the provision of high quality clinical services and create welcoming healthcare environments which will promote positive patient experiences.

The Baird Family Hospital will include all clinical services currently located in the Aberdeen Maternity Hospital (AMH) as well as Breast and Gynaecology services.

The ANCHOR Centre will provide accommodation for Oncology and Haematology out-patient and day-patient services, including Aseptic Pharmacy.

3. Project Background

The Baird Family Hospital will fulfil the requirement to replace the existing Aberdeen Maternity Hospital (AMH) which was included in the Maternity Strategy approved by

the Board of NHS Grampian in 2010. The building is not fit for purpose for modern day clinical service delivery and limits the ability of the service to redesign in order to better meet the needs of women, neonates and their families. The new hospital will allow enhanced provision for ambulatory care to be the norm, reducing the need for unnecessary hospital stays, as well as providing increased accommodation to support families. The facility will also allow for more appropriate co-location of services to support women e.g. pregnancy loss services to be co-ordinated and appropriately provided by the obstetric or gynaecology service, dependent on the individual needs of the patient. The location of the Baird Family Hospital will allow for physical connections to be made to Aberdeen Royal Infirmary and Royal Aberdeen Children's Hospital which will benefit patients and families who require to access care in these two buildings.

The ANCHOR Centre has been planned for some time and has been developing on a staged basis. The new Radiotherapy Centre on the Foresterhill Health Campus, completed in 2013, was the first stage of the development of this centre. The new centre will allow new accommodation for Oncology and Haematology out-patient and day-patient services to be co-located, benefitting patients by providing enhanced clinical spaces in the same facility. The inclusion of the Aseptic Pharmacy Suite in the centre will also reduce patient journeys to collect and receive treatments and medications.

A key aim of NHS Grampian is to maintain people in their own homes and communities as far as possible. If treatment and care in hospital is required it should be for the minimum time necessary, in facilities that support effective and efficient clinical care. Both of the proposed new facilities will be planned on this basis i.e. within the context of the whole pathway of care for patients.

The development of The Baird Family Hospital and The ANCHOR Centre will be part of the implementation of the Foresterhill Development Framework which was approved by the Board of NHS Grampian and the Scottish Government in 2008. The Development Framework has already resulted in significant investment in the campus i.e. in new buildings such as the Matthew Hay Building, Aberdeen Dental School and Hospital, Suttie Centre and the new Radiotherapy Centre. It has also led to significant investment in existing buildings including the out-patient facilities in the Rotunda, new operating theatres and the £30m+ investment in the in-patient areas in the Phase 2 and East End buildings.

The Baird Family Hospital and The ANCHOR Centre Project will therefore not only replace old buildings and allow for the relocation of services, but will also facilitate the redesign of clinical services to ensure they meet the needs of the local population.

4. Project Management Arrangements/Structure

A copy of the Project Board Membership and Remit is enclosed as Appendix 2. The revised Project Structure is enclosed as Appendix 3. Include up-to-date ones!

5. Past Communication and Involvement Activity

Involving patients and the public is intrinsic to NHS Grampian's approach to strategic planning and service delivery. The Baird Family Hospital and The ANCHOR Centre Project, in this respect, is a natural progression from NHS Grampian's previous activity in public involvement and communication relating to cancer services and maternity services redesign. Work to involve stakeholders in the current project has been undertaken since the early stages of project planning and has been a feature of engagement adopted by the Project Team from the start.

The six broad groups of stakeholders that the Project Team have engaged with since December 2014 include

- Patients and the public
- Third Sector organisations (charities and patient support networks)
- NHS Grampian staff
- Regional and national planning bodies and clinical networks
- MSPs
- Local Authority representatives

The areas of engagement have included site option appraisal: clinical workshops; a naming consultation for both buildings; internal launch events for NHS Grampian staff; discussions relating to specialist service provision with the appropriate bodies; two well-attended public consultations events (23 June and 11 August 2015); and engagement with Aberdeen City Council Planning Department in relation to a Pre-Application Notice for both buildings as well as the Foresterhill Health Campus as a whole.

More details on project Stakeholder Involvement to date can be found in Appendix 4. Update!

6. What Are We Consulting On?

It is important to be clear about the main communication messages to patients and the public. These are:

- Services will not be stopping/closing
- Why services are moving
- Where services are moving to and when
- What will be different and why
- What patients and the public can and cannot influence

On this last point, there are aspects of the project relating to the location and range of services offered which are already agreed. The focus in relation to these elements will be about *informing* patients and the public. There is a considerable service redesign agenda and building design development agenda that will be the focus of stakeholder involvement over the life of the project.

- **The Baird Family Hospital:** this will replace AMH which is no longer suitable for the provision of modern health services. The plan will be to demolish this

building following the commissioning of The Baird Family Hospital. Stakeholder involvement will be required to assist clinical teams in redesigning services to improve patient pathways and allow for more efficient co-location of services. Input from patient representatives will be vital to ensure that redesign is undertaken which keeps benefits to patients as the focus.

- **The ANCHOR Centre:** Bringing Oncology, Haematology and Radiotherapy out-patient and day-patient services together allows for the delivery of coordinated services in a fit-for-purpose environment. Patients will utilise different parts of the service during their patient journey; the ability to access clinical support in the same location will improve the patient experience and reduce the need for patients and families to travel to different parts of the Foresterhill Health Campus, thereby creating a more patient-focussed model of service delivery.
- In addition, three enabling works must be completed before construction on this project can start. These are the re-location and demolition of the Foresterhill Health Centre, the Eye Out-Patient Clinic and the Breast Screening Centre. Consultation and public engagement on these enabling works is being carried out by the respective Project Groups.

Other aspects of the project will be about involving and consulting with patients and the public. The issues identified so far where there is scope for people to influence the plans are:

- Helping to ensure the environment of care meets the needs of the population, for example influencing the design of the new buildings including patient access, waiting areas, internal and external environment, and signage
- Redesign of clinical services and patient pathways of care
- Fundraising involving public representatives

7. Who Will Be Informed and Involved?

To help identify stakeholders with a concern or an interest in the project, a Stakeholder Analysis Exercise was carried out by the Project Team on behalf of the Project Board (Appendices 5a and 5b) in August 2015. Two separate Stakeholder Analyses were produced due to the different stakeholders, and therefore different engagement needs, for the two developments. These involved gathering a list of stakeholders for both buildings and then prioritising them into categories in terms of their interest and influence. This exercise will allow Project Team resources to be directed appropriately, in relation to those who need to be kept informed and others who need to be supported to be fully involved.

The Project Team recognises that further Stakeholder Analysis Exercises may need to be carried out as people's interest and influence in the project changes over the life of the project. The original Stakeholder Analyses were reviewed in June 2016 and changes made accordingly.

A Benefits Realisation Plan will be an important part of planning for the project and will lead to specific pieces of clinical service redesign work which will benefit from

having public and patient involvement. The details of the service redesign agenda will be worked on by the Project Team, and this work will benefit from establishing a current patient experience baseline and, subsequently, agreed improvement targets through consultation.

The Project Team will also work with existing structures and networks such as the Public Involvement Network and neighbourhood network groups.

8. How and When Will People Be Informed and Involved?

As detailed in Section 5 and Appendix 4, public representatives were involved in the site option appraisal, clinical workshops, and in the naming process for the two buildings. Third Sector representatives and NHS Grampian staff have also been involved from the early stages of the project. In the future, the Communication and Involvement Subgroups for both developments will include representation from the Scottish Health Council to ensure the project's public involvement and communication framework meets government standards.

A common sense approach to the communication and involvement process is to dovetail activities with the stages of the business planning cycle of the project. This will allow the involvement process, including decisions about who to involve and how to involve them, to be agreed in a timely manner.

The Business Planning Cycle Stages are:

- Site Option Generation (completed in December 2014)
- Initial Agreement (approved September 2015)
- Outline Business Case
- Detailed Design of Building
- Full Business Case
- Financial Close
- Construction
- Commissioning of buildings

These stages will progress in tandem with service redesign.

The new buildings will facilitate appropriate clinical service redesign to ensure we continue to provide high quality care in the most effective way to meet patient needs. A redesign structure has been developed by the Project Team, including patient representation

A number of methods will be used at these stages to *inform* patients, the public and staff about the project. Many of these suggestions were made by patients and staff. For example:

- Newspaper features
- The NHS Grampian website and intranet
- Noticeboards
- Newsletters
- Awareness sessions

- Social media

A number of methods have been and will be used to *involve* patients, the public and staff. For example:

- Representatives on Project Board and Project Groups
- Public representation at workshops involved with service redesign
- Patient interviews
- Patient surveys
- Visual methods

Although the initial stages of consultation have been quite focussed, in terms of who has been involved, the next stage of the process will include raising wider public awareness of the proposals. It is also envisaged that the project will be included when other related NHS Grampian public consultation activities are being undertaken, e.g. Foresterhill Health Campus wide developments such as the Transport Hub (multi-storey car park), Keyworker Housing and the re-provided Foresterhill Health Centre. Subsequent action plans will detail this involvement.

9. Following National Guidance

Support from the Corporate Communications Team will help to ensure that the project adheres to national consultation guidance. There are points to note in relation to national guidance.

CEL 4 (2010) Informing, Engaging and Consulting People in Developing Health and Community Care Services is a key document, issued by the Scottish Government to NHS Boards and setting out the relevant legislative and policy frameworks for involving the public in the delivery of services.

Extracts from this guidance include:

- *NHS Boards are required to involve people in designing, developing and delivering health care services they provide for them.*
- *Where the Board is considering consulting the public about service development and change, it is responsible for*
 - *informing potentially affected people, staff and communities for their proposal and the timetable for:*
 - *involving them in the development and appraisal of options.*
 - *involving them in a (proportionate) consultation on the agreed options.*
 - *reaching a decision.*
 - *providing evidence on the impact of this public involvement on the final agreed service development or change.*
- *The public involvement process should be applied in a realistic, manageable and proportionate way to any service development or change*
- *Boards should (...) keep the Scottish Health Council informed about proposed service changes so that it can provide Boards with advice and, if necessary, support in involving potentially affected people in the process.*

The Project Team met with the Scottish Health Council in relation to the Major Service Change assessment and prepared a questionnaire for both developments (Appendices 6a and 6b). The Scottish Health Council representatives agreed in letters to the Project Board with the conclusion that the project does not meet the threshold for Major Service Change as set out in *Guidance on Identifying Major Health Service Change* (Scottish Health Council, 2010). Further details can be found in Appendices 7a and 7b. A Health Inequalities Impact Assessment will also be carried out by the project at Outline Business Case stage.

Public involvement in the project will build on NHS Grampian's commitment to follow national guidance and an established culture of communication with the people it serves, evidenced in its core organisational values of 'Caring, Listening and Improving'. The National Standards for Community Engagement will be followed to ensure good practice in day-to-day aspects of the project (see Appendix 8).

10. Progress Evaluation

Evaluation of any communication and involvement activities needs to examine both the process and the impact of involvement. For example:

Patient/public representatives on Project Board, Project Groups, Communication and Involvement Subgroups, and in workshops:

- Process – number of representatives, attendance of meetings, support provided
- Impact – contribution during discussions and influence on decisions

11. Post-Project Evaluation and Benefits Realisation Plan

The project will undertake a Post-Project Evaluation, the purpose of which is to assess how well the project has met its objectives, including whether the project has been delivered on time, to cost and achieved quality standards.

A comprehensive Benefits Realisation Plan will be included in the Outline Business Case for the project building on the initial work outlined in the Initial Agreement. This plan identifies the potential benefits of the project, how they will be measured and how they are evaluated.

List of Appendices

Appendix 1: Involvement Action Plan

Appendix 2: Project Board Membership and Remit

Appendix 3: Project Structure

Appendix 4: Stakeholder Involvement to Date

Appendix 5a: Stakeholder Analysis (The Baird Family Hospital)

Appendix 5b: Stakeholder Analysis (The ANCHOR Centre)

Appendix 6a: Major Service Change Questionnaire (The Baird Family Hospital)

Appendix 6b: Major Service Change Questionnaire (The ANCHOR Centre)

Appendix 7a: Letter from the SHC confirming no major service change
(The Baird Family Hospital)

Appendix 7b: Letter from the SHC confirming no major service change
(The ANCHOR Centre)

Appendix 8: National Standards for Community Engagement