

NHS Rehabilitation Centre – Update to the Nottingham City Health Scrutiny Committee July 2020

Briefing

1. We updated the Committee on our proposals for establishing an NHS Rehabilitation Centre at the Stanford Hall Estate, which hosts the Defence Medical Rehabilitation Centre (DMRC), in September 2019 and January 2020.
2. We previously notified the Committee of our intention to launch a public consultation on these proposals in March 2020. Due to the Covid-19 pandemic, this consultation was postponed.
3. In April 2020 we provided a briefing to the Committee, seeking views on running the public consultation without face-to-face contact. In that briefing we noted that we had sought specialist advice from the Consultation Institute and legal advice from our Solicitors, Browne Jacobson, on the feasibility of delivering the consultation in a lockdown and/or social distancing context, without any face-to-face engagement. The consensus of that advice was that removing face-to-face engagement from the exercise does not weaken it or effect its validity for use in the decision-making process
4. The Committee provided comments and feedback on our proposal to undertake the consultation through non-contact methods. We have considered these, and revised our Consultation Plan to mitigate the issues raised. We have included our updated Consultation Plan with this briefing. We have also provided specific responses to the comments received from the Committee on a non-contact approach to consultation below.
5. In light of the mitigations we outline in our plans and in the information below, we wish to formally notify the Committee of our intention to hold a public consultation on our proposals, for a period of 8 weeks, from 27 July 2020.

Comments received from the Committee and the CCG's response

On an issue such as this everyone in the region should be consulted by letter. Failing this, local transport charities should be consulted to get their views on the travel to and from the centre.

The cost of writing to every household in Nottingham and Nottinghamshire on this proposal would be prohibitive, and not proportionate to the impact on the local population. We have considered the need to ensure we reach as many people as possible however, and have put additional resources into promotion and awareness raising, including:

- Paid for press advertising in Nottingham and Nottinghamshire and in the surrounding areas
- Paid for social media advertising
- Commissioning additional materials to promote the consultation, such as a short animation.

We have also retained Healthwatch as a delivery partner in this project, who will undertake targeted engagement by phone with some of our most vulnerable and marginalised communities.

Are there plans to have any paper versions of questionnaires etc. which participants could request? If not it could be worth considering as some people will not have internet access and may prefer to participate that way?

People can complete a questionnaire online, in hard copy or over the phone. We have a phone line set up to receive requests for hard copies or telephone completion.

Is there any particular reason it needs to go ahead whilst we are on lockdown? Are there time constraints for example?

The Covid-19 pandemic is likely to be restrictive for some time, and there is no certainty of when public gatherings would be allowed to take place. This means that postponement until social distancing is relaxed is currently indefinite.

The current proposal is also based on the premise that there is insufficient specialist rehabilitation bed capacity in the East Midlands, with the NHS Rehabilitation Centre able to provide significant health benefits. We are therefore keen to proceed with the consultation if there are no reasons it cannot be delivered meaningfully.

We are also mindful that the proposal for a new rehabilitation facility came about as a result of a government capital allocation some time ago following the donation of land to the NHS. Although The Black Stork Charity have contributed £7m of enabling activities they have indicated that the offer of land is not open indefinitely and the timely outcome of our consultation and commissioning decisions is required.

Given that this is an amended procedure, which may or may not hit teething problems, could the consultation period be extended?

We have extended the consultation period from 6 weeks to 8 weeks. We have also put in place regular monitoring of responses; website hits; social media reach and other metrics to ensure that the consultation is reaching a large number of people.

Will Healthwatch still be included?

Yes, Healthwatch are involved and will be delivering targeted engagement. As with the core consultation they will be using non-contact methods. Healthwatch have already demonstrated their ability to reach across our vulnerable communities in lockdown, having undertaken a remote engagement exercise on the impact of Covid-19 on different communities.

How will responses that are not paper-based be captured? Will there be recording of phone conversations or will people be expected to fill in an online response on a website after the interview/forum?

We have set up a comprehensive engagement log that will capture feedback across all channels. We will try and direct people to the questionnaire where possible but will also accept feedback provided over the phone, in writing and by email. We will record all feedback within our engagement log.

People should not be excluded from the consultation who can't participate in phone and/or virtual interviews for whatever reason.

We are offering a range of feedback channels – postal, phone, online.

Face-to face interviews are problematic at the moment, but the difficulties are not insurmountable.

Given the current Government guidance on Covid-19 infection risk and social distancing, we do not feel it would be appropriate to undertake face-to-face engagement.

Is there any room for flexibility, i.e. to carry out phone or online interviews “where at all possible”?

Yes – we are offering online, phone or postal completion to all.

An online approach does ‘weaken the exercise’ in that it will inevitably exclude some people, and any responses could depend on how the questions are asked.

We have taken legal and procedural advice on our proposed approach. The consensus of this advice is that the approach does not weaken the exercise, as long as appropriate mitigations are in place. We have carefully considered the feedback of the Committee in drawing up our plans.

Lewis Etoria
Head of Insights and Engagement
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