

Report to: **East Sussex Health Overview and Scrutiny Committee (HOSC)**

Date: **10 October 2007**

By: **Director of Law and Personnel**

Title of report: **Fit for the Future – consultation process**

Purpose of report: **To review the East Sussex PCTs' consultation process in relation to the Fit for the Future proposals and the analysis of the responses to the consultation.**

RECOMMENDATIONS

HOSC is recommended to:

- 1. Note the analysis of the consultation responses (appendix 3).**
 - 2. Consider the consultation with HOSC and with the public in terms of whether the process so far has been appropriate and the time allowed has been sufficient.**
 - 3. Recommend to the PCT Boards that an appropriate level of further consultation is discussed with HOSC if the Boards identify additional viable options which have not yet been fully consulted on.**
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1. Background

1.1 On 23 March 2007 HOSC received details of the PCTs' proposals on maternity, gynaecology and special baby care services under the 'Fit for the Future' banner. HOSC determined that these proposals constituted a potential 'substantial variation or development' of health services requiring formal consultation with HOSC under section 7 of the Health and Social Care Act 2001.

1.2 Also on the 23rd March 2007, HOSC received a presentation on the PCTs' plans to conduct a public consultation on the proposals and a copy of the proposed programme of consultation activities. At that meeting HOSC requested an extension to the period of consultation to take into account local government elections. The PCTs agreed to this, making a total consultation period of 17 weeks which ran from 26th March to 27th July 2007.

2. Consultation process

2.1 During the consultation process, the PCTs undertook a number of activities designed to gather views on the proposals. These included public meetings, roadshows, focus groups, provision of a website and consultation documents and meetings with various local groups and organisations.

2.2 The PCTs commissioned an independent review of their consultation process against national best practice and guidance related to public consultations. This review is attached at appendix 1.

2.3 To guide and advise on the consultation process the PCTs established a Public Reference Group comprising NHS and patient and public representatives. HOSC representatives have attended some meetings of this group as observers. A report summarising the role of this group and their feedback on the process is attached at appendix 2.

3. Consultation responses

3.1 The PCTs employed an independent analyst to collate and analyse the responses to the public consultation, drawing out key themes and trends in the feedback. The analyst's report is attached at appendix 3.

3.2 The PCTs received 383 written responses to the consultation, as well as eight petitions and a postcard petition consisting of 1521 individual submissions. Feedback from 57 meetings and notes from two focus groups were also included in the analysis.

3.3 Overall, of the four PCT options within the consultation document, options 3 and 4 received significantly more support (around 20% of written responses expressing support for each of these options) than options 1 and 2 (4% and 2% respectively expressing support for these). However, 37% of written responses supported locating a consultant-led unit at both Eastbourne and Hastings either by changing staffing or maintaining the status quo, in addition to 9263 petition signatures and 1521 postcards which also stated that both hospitals should have consultant-led childbirth services.

3.4 The report summarises the key issues, advantages and disadvantages people highlighted in relation to each option, together with respondents' views on the importance of various criteria when making a decision.

3.5 The responses to the consultation are one factor which the PCT Boards will take into account when making their decision on the preferred way forward.

4. Recommendations

4.1 HOSC is recommended to:

- 1) Note the analysis of the consultation responses (appendix 3).**
- 2) Consider the consultation with HOSC and with the public in terms of whether the process has been appropriate and the time allowed has been sufficient.**
- 3) Recommend to the PCT Boards that an appropriate level of further consultation is discussed with HOSC if the Boards identify additional viable options which have not yet been fully consulted on.**

ANDREW OGDEN
Director of Law and Personnel

Contact officer: Claire Lee Telephone: 01273 481327