• Department of Health & Social Care announced that Shropshire, Telford & Wrekin STP will receive £312m for the Future Fit programme

• The Future Fit public consultation started on 30 May and runs for 15 weeks until 11 September; extended by one week because of additional events and Northumbria comparator report.


• Consultation materials and survey available in hard copies and via our new website www.nhsfuturefit.org; FAQs updated weekly and continuing to engage with people through our events, local media, social media and attending various meetings
• 1515 survey responses as at mid point review (over 100 retuned ‘blank’)
  • 611 Telford & Wrekin
  • 653 Shropshire
  • 251 mid Wales
• Majority of respondents responding as a member of the public rather than on behalf of an organisation or charity
• 84% of respondents white British and 5% Welsh
• 16% identified as carers
• 23% as parents of one or more children under the age of 16
• 15% identified as having a disability
• 57% of respondents identified Christianity as their religion and 33% declared no religion
• 84% of respondents heterosexual and 10% preferred not to say
Total responses – 1641 (completed total was 1515 as over 100 ‘blank’) at mid point review. As at 23/07/18 this total has risen to 2445 – approx. 0.5% of the 500,000 population served by the two hospitals. Around 14% of the population served by the two hospitals lives in mid Wales. Approx. 15% of surveys received to date are from mid Wales postcodes.

Gender - 61% women and 34% men have responded. This compares to the combined area data of 50.5% and 49.5% respectively. Anecdotally, women are more likely to respond to health consultations on behalf of their families and the women and children’s element of the consultation may be prompting more women to respond.

Age - 45% of respondents to date are aged 59 and over. However we are seeing significant % of respondents in the working age brackets: 27-37 (11%); 38-47 (16%); 48-58 (20%).

Ethnicity
Combined area data shows White British as 93.7% compared to 84% of survey respondents. Other ethnicity data is currently in line with expectations from combined area data, however significant activity is planned for the second half of the consultation to reach various race and religion groups.
• Over 200 people reached through attending Local Joint Committees in Shropshire
• Direct face to face activity with seldom heard groups has reached more than 500 people to date
• Around 1500 people have been reached through the pop-up displays including mid Wales additional activity
• More than 800 people have attended the drop-in Public Exhibition events
• We have received over 13,000 surveys to date
• We have placed adverts in seven local newspapers, had six days of adverts on shropshirestar.com, and held numerous radio, TV and newspaper interviews
• We have had more than 13,000 visitors to our website
• We have earned more than 220,000 impressions on Twitter and organised three tweetchats with clinicians, with another to follow
• Extensive direct face to face activity with seldom heard groups has reached more than 500 people to date
• Groups have included:
  • Disability networks, including parents of children with a disability
  • Mums and toddler groups
  • Race and religion groups, including Amish
  • Age specific groups, including older people
  • Mental health groups, Alzheimer’s groups and their carers
• Additional four groups reached:
  • Welsh language, carers, rurality, areas of deprivation
• Further groups as a focus:
  • Military and their families, businesses, predominantly those reaching specific community groups
• General engagement activity, including public exhibitions have also reached seldom heard groups
Information provided by the Consultation Institute notes the following:

• Consultations that achieve higher than a 1% response rate considered ‘good’

• The average response rate for UK public consultations stands at 0.7%

• A consultation conducted by the NHS Calderdale Clinical Commissioning Group and the NHS Greater Huddersfield Clinical Commissioning Group, achieved a response rate of 0.1%

• Greater Manchester’s Healthier Together consultation in 2014 attracted a response rate of 0.9% of the population and was commended as “the largest public response to a regional consultation about health services conducted in England, in the last decade.”

• However, in Dorset’s Community Services Review, 18,619 consultation questionnaires were completed and submitted. That is equivalent to about 2.4% of the total population of Dorset.
• Women’s and Children
  • Cost of building it, moving it and now possibly moving it back
  • Telford is growing and has a younger population
• Travel and transport
  • Deprivation and rurality
  • Car park charges
  • Future proofing transport links
• Community
  • What is happening in community/primary care to support this
• Urgent/Emergency Care
  • Closure of A&E and concern over losing PRH completely in the future
  • Can’t we pay more to get more staff?
• Consultation process
  • Why are we consulting in mid Wales?
  • Why can’t we stay as we are now?
  • Isn’t it a done deal?
- Women and children
  - Ludlow would use A&E at Hereford
  - RSH Maternity needs huge improvements
  - Fear of travelling further in labour and risk to life
  - Please separate children’s area in UCC
  - Positive about the mother and children’s services possibly being back at RSH

- Travel and transport
  - Carers’ concern over travel times
  - Ambulance waiting times
  - Deprivation and rurality
  - Car Park charges
  - Future proofing transport links

- Community
  - Want the community hospital to be better utilised
• Travel and transport
  • Deprivation and rurality, including cost of transport
  • Car park charges
  • Future proofing transport links
  • Use of Welsh travel passes past point of first transport change
  • Availability and time to arrival of ambulances

• Planned Care
  • Travel times for family and friends under option 1
  • Options for further planned care within Wales
  • Use of technology to enable more remote care, including GP and hospital appointments through Skype

• Urgent/Emergency Care
  • Concern over travel distances by ambulance to A&E under option 2
• Increase general promotion through use of videos
• Encourage more responses from men and younger people
• More targeted activity through Facebook advertising to reach young men and women and parents of young children
• More reach into diverse communities including race and religion
• Continued engagement with parents, young mums and pregnant women
• More engagement with the business community, including those employing large numbers of certain communities - pop ups in canteens, foyers etc
• Extend reach to younger working age people – pop-ups in train stations, lunchtime pop ups in business zones etc.
• Continued attendance at ‘invited to’ meetings for ongoing public Q&A
• Further staff engagement alongside partner organisations
• Stakeholder and GP letters issued to encourage formal feedback
• Consultation closes 11th September 2018
• Programme Board Meeting on 18th September 2018
• Consider process and timeline for decision making.
• Best case Joint Committee February 2019
• Engagement with Participate to agree timescales
• Continue to progress reports from interdependent programmes:
  • Travel and Transport
  • QIAs
  • LMS
  • EQIA
  • Workforce Transformation Plan
  • Out of Hospital Care
  • Urgent and Emergency Care
• Draft Decision Making Business Case December 2018