

# Healthwatch Kent Consultation Critical Friend Report

**Organisation: Kent County Council**

**Consultation: Health Visiting and School Public Health Service**

**Date: 6 May 2016**

## About Healthwatch Kent

Healthwatch gives people a powerful voice locally and nationally. In Kent, Healthwatch works to help people get the best out of their local health and social care services. Whether it's improving them today or helping to shape them for tomorrow. Healthwatch Kent is all about local voices being able to influence the delivery and design of local services. Not just people who use them, but anyone who might need to in future.

Healthwatch Kent acts as a critical friend to organisations who carry out consultations. We have designed a Best Practice Guide to Consultations in partnership with the Consultation Institute, KCC plus NHS providers and commissioners. We use our Best Practice Guide to scrutinise the process organisations have followed.

We would encourage all organisations to work with Healthwatch when considering a change to a service to give the public's perspective on what will work best.

Trained Healthwatch Kent volunteers reviewed the process of the above consultation. Our findings are below.

## The Process

This consultation was held from 2 November to 14 December 2015.

The Healthwatch Consultation Working Group agreed to act as critical friend on this consultation on 16 November 2015.

### 1. Establishing the case for change

A good explanation was given for the need for change, but the objectives of the change were less clear.

No plan for the process was seen, although it was requested. There was a draft equality impact assessment, although the range of protected characteristics highlighted was restricted to three. There is reference in the consultation document to stakeholder engagement but engagement with the public to discuss the case for change is not mentioned other than briefly in the equality impact assessment. Reference is made to the engagement done for the Children & Young People's Emotional Wellbeing Strategy which would have been an element of this consultation.

We could not get detail on what resources were put into developing the case for change.

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## 2. Pre-consultation

The equalities impact assessment is a very useful document, but has the only mention of engagement regarding options along with the work done for the Children & Young People's Emotional Wellbeing Strategy, but indicates this has happened over a long period of time. It is therefore unclear how the public were engaged in developing the options for consultation.

## 3. Consultation

The options being consulted on were presented clearly in the consultation paper. There was an easy read version but we felt this was less clear in explaining the options. The consultation was held over 6 weeks, we felt this was an appropriate and realistic timescale.

There was little reference to the pre-consultation engagement and we did not see evidence of how the options were developed with the public.

The consultation was promoted through KCC's social media accounts, press statements on Kent.gov's Media Hub, the Kelsi weekly e-bulletin and direct emailing to organisation stakeholders via the Public Health and Consultation Teams.

Paper copies of the Consultation were distributed to Children's Centres, Libraries, CCGs and GP surgeries.

There was no mention of any consultation events for the public and we did not see any updates to the consultation papers over the period of the consultation.

## 4. Post Consultation

A summary of the outcomes of the consultation were produced. 120 people responded of which only 59 were parents. Considering the size and scope of the consultation this would seem to be a very low number.

The document does not describe what will happen next or how decisions will be agreed and taken forward.

It would be useful to understand if there will be further engagement and consultation on the implementation of the agreed model.

## Conclusions

This was one of the first consultations where Healthwatch Kent has acted as critical friend, and it became clear that the requirements and interpretations of what is required of the county council differs from NHS consultations.

Although it is not a legal requirement on the council to have input from the public in developing the options for consultation, the best practice guidelines developed by Healthwatch Kent and Kent County Council recommend this happens. We could see no evidence of previous engagement with the wider public in forming the options. It is noted

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that stakeholder engagement has taken place over a period of time, but with limited groups, and there is no direct evidence to substantiate this.

The low response rate considering the number of residents that will be impacted by these proposals would seem to indicate that there should have been other mechanisms used to gather feedback, such as engagement events with appropriate groups.

We continue to work with the Corporate Lead for External Consultations to ensure we are as effective as possible at looking at consultations going forward. We have also agreed how best to get further information as a number of requests were not answered. We feel the consultation papers would have benefitted from input from Healthwatch Kent prior to release so they could better communicate the options and purpose of the consultation.

We could also have given advice on appropriate engagement methods, as it is unclear how this occurred.

However, we have recently been asked for early input on other consultations so this has been heard and responded to by the organisation.

### Next Steps

- To meet with Public Health to understand what has occurred following the consultation.
- Encourage Public Health to work more closely with Healthwatch Kent during the planning stage of future consultations relating to health and social care matters.
- Discuss with Public Health how it might access existing engagement networks to have a dialogue with the public about it's work and developing options for future approaches
- Be aware of future consultations to ensure that they are as widely advertised and as accessible as possible to reach all interested parties.
- Agree a named contact within Public Health to liaise with throughout the next consultation process.

### Response from Organisation

Kent County Council welcomes this feedback from Healthwatch as part of our dialogue around this consultation which has been ongoing for some time. We welcomed the positive feedback that was publicly given by Healthwatch previously, about the same consultation process, so we are keen to align both of these pieces of feedback.

As set out below KCC is committed to stakeholder engagement and took a number of pro-active steps to engage and consult in relation to this piece of work. The Public

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Health team worked closely with KCC's consultation team to ensure that this process was undertaken successfully. KCC considers that the consultation process was robust and effective but welcomes any feedback on how to further improve this going forward.

This began with liaison with Healthwatch in October 2015 regarding Public Health consultations undertaken in November-December. This included discussions around relevant service user engagement and policy development. Further discussions took place in January 2016 when information requested by Healthwatch was provided by the Corporate Consultation and Public Health teams.

In terms of the points highlighted by Healthwatch in the above report, KCC would like to clarify the following:

### Case for change:

- As stated in the Consultation document, the proposal put forward included various options for how the service delivery model for Health Visiting and the School Public Health Service could be shaped. While no direct service changes (or service user experience) were specified as part of this review, KCC opted to consult at an early stage to ensure this policy level improvement work could incorporate views put forward by members of the public, service users and relevant professionals before decisions about the shape of the service were made.
- The aim of the consultation was to assist in the development of service specifications in advance of renewing the existing contracts inherited from the NHS. Standard service re-commissioning via the contract extensions had been considered and could have been implemented but Public Health felt it opportune to take advantage of this chance to consult stakeholders. The consultation was about the case for change and was developed through liaison between service providers, Public Health and the NHS.

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### Pre-consultation:

- Feedback received as part of the review into the Children & Young People's Emotional Wellbeing Strategy was also used to incorporate stakeholder views prior to formal consultation.
- The existing public health offer to school aged children was reviewed and engagement with various stakeholders was undertaken as part of this process. The views and experiences of children and young people, their families, school staff, head teachers and providers were taken into consideration. Heads were engaged using an online survey and through head teacher briefings across the county. Parent and carer feedback was gained through an online survey; 64% of the 69 respondents had 11-15 year old children. An online survey was developed in collaboration with a Kent Youth Help Champion and distributed to service users to gain insight into their experiences. In addition, two focus groups were held in a Youth Health Champions event and a Pupil Referral Unit which engaged a further 19 service user representatives.
- An extensive engagement process was initiated prior to the transfer of commissioning responsibility for 0-5 services into the local authority and is ongoing. This involved engaging with a wide range of stakeholders, including: 125 families currently using the health visiting service; the Kent Parent Carer Forum, partners across health and social care (CCGs, specialist children's services), wider KCC children's services (early years provision and early help, including children's centres); current service providers and the wider market.
- Feedback was used to inform the consultation process and continues to inform service development work.

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### Consultation:

- KCC is pleased that Healthwatch notes the clear presentation of the options within the consultation papers and the suitable consultation period. Additionally, it is helpful that Healthwatch recognise the positive steps taken to publicise the consultation and encourage participation.
- We are surprised that the level of response to the consultation is being considered in isolation from the other public health engagement and consultation work. The response number is not particularly low in terms of similar strategic level service model consultations, which commonly attract more professional interest. Given the positive targeted publicity and online promotion of the consultation, it is understood that sufficient awareness and access to the consultation was ensured.
- It should be clarified that while no consultation specific events took place during the consultation period, this project was part of an ongoing review with further engagement planned in advance of any contract changes. Additionally, a number of projects and pieces of work were being undertaken prior to and during the consultation period to raise awareness about the process and encourage stakeholders to respond to the consultation. ActivMob engaged 125 families in over 20 children's centre run sessions across Kent over this period. The Kent Parent Carer Forum was also engaged to gain insight into the experiences of parents/carers of children with SEN and disabilities. Aside from informing the wider service improvement planning, these sessions and the organisation's community group links and social media networks were used to raise awareness around the public consultation. KCC's own Twitter account, which has over 40k followers, was also used to promote the consultation. Additionally, the consultation options were discussed with various stakeholders internally at KCC and across the health and social care economy.

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### Post consultation:

- Healthwatch has correctly identified the lack of clear explanation regarding how subsequent decisions would be made in relation to the options presented in the consultation papers. This omission has been noted by KCC and will be addressed appropriately in future Public Health consultation activities. Further engagement activities have taken place following the formal consultation on the model, the outcomes of which have contributed to additional refinement of the service specifications. As changes are implemented and new ways of working established, it will be interesting to see how children and young people respond to Healthwatch via their community links.

KCC values the positive contribution Healthwatch can make during the option development phase, prior to consultation on proposals, where their access to patient and service user views can be best used to influence the ongoing Public Health Transformation.

We are grateful for the constructive comments in the report and will incorporate all useful feedback into our engagement work in the future. We look forward to further discussions and co-operation with Healthwatch as Public Health continues to work on tackling health inequalities and improving health across the county.