

Dr Gray's Hospital Developing a Plan for the Future (2023-2033)

Engagement Summary Report

Phase 1: June 2022 Phase 2: August to December 2022



26 January 2023

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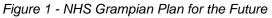
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1. INTRODUCTION

A principal work stream of NHS Grampian's Plan for the Future (2022-2028) is to develop a strategic ten-year plan for Dr Gray's Hospital to ensure it meets the needs of its community in the years ahead. This process began in June 2022.

This work stream is sponsored by the Director of Strategy & Deputy Chief Executive for NHS Grampian and the Chief Officer of Health and Social Care Moray (HSCM). The engagement process is being delivered by NHS Grampian's Public Engagement Team.





Purpose of this Report

This report provides a high level summary of stakeholder engagement, participation and subsequent feedback which will be used to identify key focus areas for the development of a ten year strategic plan for Dr Gray's Hospital covering the period from 2023 to 2033. This engagement forms one element of an on-going engagement process.

2. SCOPE

Feedback from early informative engagement with staff indicated it would be necessary to be explicit in terms of scope for the formal engagement process. The scope for engagement is:

- All the services that Dr Gray's currently provides
- It may also include services not currently delivered at Dr Gray's or might be delivered at a higher level of speciality

- Potential new models of service delivery will also be included, for example, networked models of care:
 - Where services are planned and delivered working between other hospitals and across traditional boundaries of neighbouring NHS Boards
- Current influences and parameters are in place which are non-negotiable:
 - The need to deliver maternity services at a level and via models prescribed by the Cabinet Secretary in April 2022. This requirement means service provision and the organisational structure and facilities at Dr Gray's will need to be developed to achieve this
 - Business as usual as we develop our future focus areas, e.g. winter, managing waiting times as a result of the pandemic

3. PHASE 1 ENGAGEMENT PROCESS

It was agreed from the outset with Dr Gray's management that staff engagement would be prioritised over public engagement in the first instance to help inform the approach needed for Phase 2 engagement sequencing.

Throughout the process the Scottish Approach to Service Design (2019)¹ framework has been followed, using the 'Double Diamond' approach.

Three qualitative questions were asked of staff using the following means:

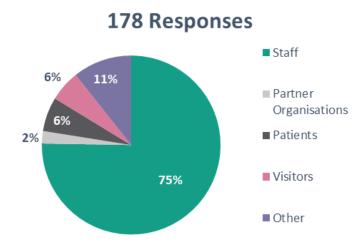
- An online survey tool using Lime Survey for staff and visitors to Dr Gray's
- Microsoft Word/paper version of the survey was made available for those who could not/did not have access to the online survey
- A pop-up 'Have your Say' event was hosted in the foyer of Dr Gray's Hospital on 15 and 16 June 2022 hosted by Public Engagement Team staff

Subsequent engagement and consultation on the intended approach for Phase 2 was tested with Dr Gray's Senior Staff Committee who provided a valuable sounding board and have continued to be engaged throughout the process. A presentation pack was provided to Senior Staff in support of Phase 2 engagement which could be used to promote and encourage staff participation.

4. PHASE 1 ENGAGEMENT RESULTS & THEMES

Phase 1 engagement resulted in 178 responses to the on-line and hard-copy questionnaires, principally from Dr Gray's staff along with face-to-face dialogue with staff and visitors at the pop-up events held in the foyer at Dr Gray's. Anecdotally this early engagement was generally well received.

¹ <u>The Scottish Approach to Service Design (SAtSD) - gov.scot (www.gov.scot)</u>



"A porter told me that there was a real 'buzz' across the site that we were there listening to what staff had to say and pushing for colleagues to go and have their say"

Overview of Phase 1 Feedback

A review of the initial feedback principally fell into three themes as set out below and is illustrated by qualitative feedback.

Summary of Phase 1 Engagement Themes

	N
Facilities	 Investment in staff amenities Upgrading facilities/modernising Planning for expansion
(Flaces)	Improving car parking and wayfinding
	N
	 Investment in all services, existing and new
Services	• More clinics, surgery and service expansion to meet current and future needs
(Pathways)	Reduce the need to travel to Aberdeen
	Have an ambitious plan for Dr Gray's
	Recruitment and retention
Team	Staff development and career progression
	Leadership and management
(People)	Staff engagement and communications

Qualitative Feedback

"We need to value our staff "The hospital is outdated. It "Dr Gray's is extremely more, listen to what they important to the people looks and feels rundown. are telling us. The small changes can make a big difference." Ward areas need to be better of Moray." designed/fit for purpose." "More flexibility and less red tape around training staff and appointing staff would **"DGH has such** "More services that potential on paper to would mean less visits deliver services and eventually make it easier to to Aberdeen for short provide a sustainable recruit to consultant and appointments." busy hospital to the qualified posts." community."

5. PHASE 2 ENGAGEMENT PROCESS

Phase 1 engagement informed the approach needed for Phase 2 and its chosen methodology. The Scottish Approach to Service Design framework used by the engagement team fosters co-production ensuring continuous feedback which is reviewed and adjusted as necessary. Evaluation of engagement throughout Stage 2 provided the opportunity to understand and appreciate the personal experiences of those taking part, so the approach could be refined or adapted as needed. This method achieved an added benefit of demonstrating that participants' voices had been heard in 'real time' and in some cases acted upon immediately.

A key focus for planning and facilitating engagement has been through partnership working, benefiting from partners' networks and expertise to help steer engagement activities and to reach harder-to-reach communities and groups.

Close working relationships have been established with Health and Social Care Moray (HSCM), in particular through the Moray Community Wellbeing Team, which has given a much improved increase in reach. In addition, linking in with the Engagement Lead for HSCM and colleagues at TSI Moray, as well as Moray Health and Wellbeing Hub, has further facilitated reach and penetration.

Scottish Ambulance Service, Primary Care colleagues and other staff and partners that interact with DGH services have participated, including those based at other hospital sites across Grampian to ensure that understanding of what is important to stakeholders, what is seen to work well and what could be improved is viewed from multiple perspectives.

6. PHASE 2 ENGAGEMENT RESULTS & THEMES

Phase 2 engagement was undertaken between August and December 2022 and comprised in summary:

Participant/respondent number for Phase 2

Activity	Participants/ responses**
17 x staff in-person 3 hour facilitated workshops held at Dr Gray's Hospital	140
50 hours of in-person engagement	
1 x Scottish Ambulance Service 3 hour facilitated in-person workshop	2
1 x Scottish Ambulance Service MS Teams online workshop	3
1 x Primary Care 3 hour in-person facilitated workshop held at Moray College	8
Online questionnaires* for: - Staff	84
- Partner organisations and other professional stakeholders	81
- Primary Care and dentists	16
- The public and service users	607
A pop-up 'Have your Say' event was hosted in the foyer of Dr Gray's Hospital hosted by Public Engagement Team staff	Multiple members of staff, patients and visitors
 Community Wellbeing and Development Team 20 x older people groups Engagement in localities: Speyside, Moray coastal communities; Cullen, Buckie and Elgin 	600
Dr Gray's Senior Staff Committee	Monthly from June 2022
Strategic Planning and Commissioning Group	October/ December 2022
Moray Senior Leadership Team	October/ November 2022
Director of Strategy & Deputy Chief Executive , NHS Grampian – weekly 'open' visits specifically to engage with staff	September to December 2022

* 859 people accessed online questionnaires, but not all left comments

** These may not be unique responses

Overview of Phase 2 Feedback

In-person staff workshops provided the opportunity to undertake in-depth discussions in an environment which fostered a relaxed and open discussion, with personal experiences being shared openly with independent facilitators invested solely in the engagement process, rather than any pre-determined outcome. Themes were interrogated to aid understanding and dialogue from the workshops provided detailed responses which substantiate the high level themes first identified in Phase 1.

Feedback from all the workshops was constructive, balanced and at times humbling in its content; the staff and colleague cohorts presented a professional team with a desire to provide the best possible service to the people of Moray and to be practising as one component of an integrated offer for the Grampian region.

Analysis of both quantitative and qualitative feedback from all stakeholder groups has enabled feedback to be summarised into 13 high level priority areas sitting under the headings of People, Places and Pathways. These themes were identified by collating the highest number of references in the survey responses and from feedback from the face-to-face discussions.

People	Places	Pathways
 Staff being enabled to fulfil their potential Centre for excellence for remote health provision Test bed for interdisciplinary/ multi- disciplinary models of care Centre for excellence for teaching undergraduate students and development post- graduate trainees 	 An anchor organisation for Elgin and Moray Expert provision for local population Delivery of service for Grampian and North regions Moray Portfolio as an integrated system Utilisation of technology and innovation 	 Networked with Aberdeen and Inverness Delivery of general unscheduled services, expert in assessment, diagnosis and stabilising and either (1) onward transfer, or (2) local treatment Residual capacity to deliver planned care services in Dr Gray's and in network Separate planned and unplanned care

Phase 2 Emerging Strategic Themes

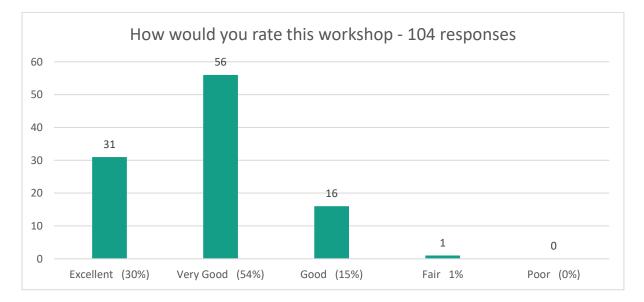
In addition, feedback concerning current immediate to short-term challenges have been collated, themed appropriately and shared with the commissioning team and Dr Gray's management as it sits outside the main scope of this work stream.

7. EVALUATION

Initial feedback from June's staff engagement informed the approach of offering staff the opportunity to participate in face-to-face facilitated workshops. The workshops provided a 'deep dive' to explore strengths, challenges and opportunities that exist for staff and their respective teams.

In planning the workshops a decision was reached by the Planning Team to not only offer workshops for each Department team in Dr Gray's, but to also offer five multidisciplinary pathway workshops to explore how services work together due to the smaller hospital site and the many interdependencies of services offered at Dr Gray's.

Each workshop was evaluated, in total 140 members of staff attended the workshops with 104 completing evaluation forms.



DGH Hospital Plan for the Future Workshop Evaluation Summary

A sample of feedback:

- "I was encouraged to come by my manager"
- "I know pressure of lack of staffing restricted others"
- "Lots of opportunity for everyone to make their contribution"
- "Was better than I expected and really enjoyed it"
- "Conversation flowed well due to the 2 facilitators very friendly, warm, open to wide discussion"
- "Open discussion, clear agenda, good facilitation. Willingness of colleagues to discuss difficult and challenging topics"
- "Well above my expectations much better than my perception. Friendly and relaxed"

Learning

As highlighted, this approach is an iterative process where continuous feedback and learning is being reviewed and adjustments made as necessary to ensure inclusive reach and engagement across Moray and the wider Grampian Health Care System, specifically seeking involvement of those seldom heard populations/groups.

Learning points so far include:

- Collaboration of effort with partner organisations to streamline processes and maximise reach.
- Seeking opportunities and reducing duplication through other engagement initiatives currently planned or being carried out both internally and within partner organisations.
- Using a cascading model to reach seldom heard groups, utilising the skills and reach of the Moray Community Wellbeing Hub, Public Health, Local Authority and Third Sector Colleagues.
- The need for bespoke approach to presentation and facilitation, depending on group/audience.
- Managing the sequencing of engagement to ensure it is authentic, meaningful and timely. It is important that it is seen and practised as a process rather than a series of independent events.
- Linking in with other Northern Health Boards to find out what matters to their populations and to find out about any strategy development work carried out locally so can share good practice and insights.
- Linking in with Public Health, Community Planning and Equality & Diversity colleagues which provides extremely valuable advice on approach and actions.
- Digital barriers continue to be an issue for many people. Having a digital device does also not automatically mean people are aware that an engagement initiative is happening, so more traditional means of publicity e.g. posters, newsletters, articles in local press are still important.

Key Risks

There are a number of risks which are being reviewed and managed throughout the process. Key risks and relevant learning is summarised below:

 Workload and pressures on staff may impact on their ability to engage meaningfully and participate in the development process. It is important to engage with staff in a format and style which fosters a relaxed and open discussion. The workshop facilitators worked hard to respond to the unique dynamic of each group during the sessions.

- Confusion by staff and the public due to duplication of engagement already being undertaken by HSCPs and other partners – a joined-up approach is being undertaken by the Planning Team which includes: NHS Grampian's Director of Strategy & Deputy Chief Executive; HSCM Chief Officer; Operational, Strategic Planning and Engagement Leads from Dr Gray's, HSCM and NHS Grampian. Agreement to share previous engagement feedback and key themes between partners is important to ensure that the valuable feedback that individuals and groups have taken the time to submit is fully utilised by the system.
- Capacity to engage with a representative stakeholder group within the agreed timescale in an authentic way to inform the development of a robust, coproduced strategic plan. Additional capacity has been created to enable the NHS Grampian Engagement Team to support the bespoke engagement model required. Also key to this is fully utilising capacity across current networks and partners to maximise engagement activities.

Measuring Success

When planning for and evaluating engagement activities, Planning with People Guidance² has been followed. Planning with People Guidance is based on principles set out in the National Standards for Community Engagement³ and will continue to be applied throughout the process to ensure good practice.

Success will be reflected by the level of on-going engagement and co-production of this plan with staff, the public and communities.

An on-going cycle of seeking validation from those who have participated is part of the process to ensure that feedback is not only representative and inclusive but is also a true reflection of views gathered.

8. NEXT STEPS

Phase 2 engagement is ongoing and will continue to inform the principal themes for Dr Gray's strategic plan.

Feedback and analysis of participants to date demonstrates some gaps in representation which will be followed up during January and February 2023.

The process of engagement will shortly move to development of the delivery plan and a more iterative approach to engagement within each defined work stream.

² Care services - planning with people: guidance - gov.scot (www.gov.scot)

³ National Standards for Community Engagement | SCDC - We believe communities matter