Appendix C to Agenda item 5



Improving inpatient mental health care: Proposal to relocate Ruby Ward

Consultation activity report: October 2021

Contents



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Background and context

A national initiative to improve mental health inpatient wards





There is a Government initiative to **eradicate mental health dormitory wards** by 2024 – with funding provided to NHS organisations to deliver the initiative



Kent and Medway NHS and Social Care Partnership Trust (KMPT) was allocated £12.65 million to replace their last remaining dormitory ward – Ruby Ward at Medway Maritime Hospital



Ruby Ward provides care for older adults (65+) with 'functional mental illness' (e.g. schizophrenia, bipolar disorder)

The route to consultation



Bid for funding

- KMPT prepared a bid for Government funding to replace Ruby Ward with a new fit for purpose mental health inpatient unit
- KMPT identified potential locations for a new unit that met the funding conditions

Criteria

Assessment criteria were developed to help identify the most suitable sites.
 These looked at factors such as size and availability, whether the site was located with other hospital services and who owed the site.

Evaluation

 Potential sites were tested against the criteria. Only those which met all the criteria were considered suitable for the new location for Ruby Ward

Preferred option

A single preferred option was – a new build unit at KMPT's Hermitage Lane,
 Maidstone site

Public consultation

- A public consultation on the preferred option started on 3 August 2021 and ran for seven weeks until 21 September.
- A range of methods were used to promote the consultation and to gather views from staff, patients, the public and stakeholders





Our **proposal** is to build a **new mental health unit** for older people at Kent and Medway NHS and Social Care Partnership Trust's (KMPT) **Maidstone site on Hermitage Lane**, which is adjacent to Maidstone Hospital.

We are **not proposing** any significant **changes to the way care is provided** but we expect the new unit would enhance care.



An overview of our consultation plan

About the consultation plan



- The consultation plan set out in detail the approach to consultation and the activities that were to be delivered during the consultation period
- It included:
 - Consultation principles
 - Aims and SMART objectives
 - Identification of stakeholders and audiences
 - Impacted protected characteristic groups
 - An activity plan
 - Approach to evaluating the consultation





Our consultation plan set out the principles for our approach to the consultation.

These were to:

- consult with people who may be impacted by our proposals
- consult in an accessible and flexible way
- consult well through a robust process
- consult collaboratively
- consult cost-effectively
- ensure independent evaluation of feedback.

Aims



Our aims for the consultation were to:

- raise awareness of the public consultation and how to contribute across the affected geography
- collect views from the full spectrum of people who may be affected including staff, patients, service users, carers, stakeholders, and the public
- ensure we use a range of methods to reach different audiences including activities that target specific groups with protected characteristics and seldom heard communities
- ensure those methods reflect changes to consultation and engagement as a result of the Covid-19 pandemic
- explain how the proposals have been developed and what they could mean in practice,
 so people can give informed responses to the consultation
- ensure that we preserve the integrity and legality of the consultation to the best of our ability should Covid-related circumstances threaten to undermine, or derail our plans
- meet or exceed our reach and response targets within the timeframe and budget
- ensure the CCG governing body consider fully the consultation responses and take them into account, in decision-making, with sufficient time for thorough consideration.

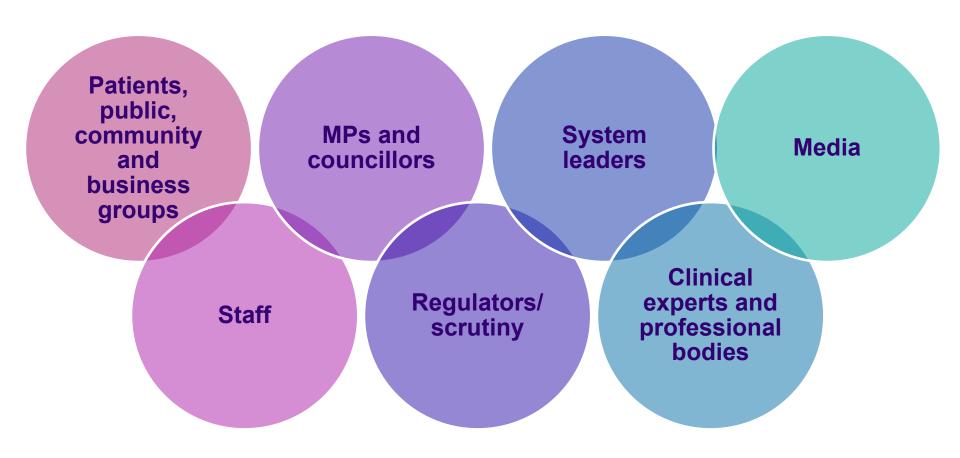


SMART objectives

SMART objective	Measure/assessment
Opportunities to see or hear about the consultation*:118,200 people (approximately 10 per cent of the core and target population)	Reach of consultation activity
Target for active and direct engagements: 2,955 people	Evaluation of consultation activity
Target for responses: 1,773 separate responses to the consultation	Number of responses received through consultation questionnaire, public events, focus groups, emails, phone calls, letters, social media interactions.
 Geographic 'hot spots' (areas that have a higher reliance on/likelihood of being impacted by proposed changes): 60 people across 4x 'drop-in' exhibitions 24 people across 4x focus groups 	Number of people attending events.
Protected characteristics, seldom-heard/hard-to-reach and most impacted groups: 7x focus groups including at least 36 people	Number of people attending the focus groups/interviews.
Staff: all affected staff have opportunity to access information about consultation, complete consultation questionnaire and/or join one of two staff workshops.	 Evaluation of consultation activity: mailings to staff, staff-specific events, attendance at events. Number of staff and/or their representatives responding to the consultation.
 Patients, families, and carers: All affected patients, families/carers have opportunity to access information and respond to consultation though a focus group, indepth interview, the consultation questionnaire etc. proactive outreach to at least 1x carer support group and at least 1x patient representative group. 	 Evaluation of consultation activity: direct contact with families/carers, focus groups, events. Number of patient/carers and/or patient carer organisations responding to the consultation.
 Stakeholder attitudes: At least 2x proactive engagement with elected representatives and patient representative groups At least 3x positive feedback about the consultation process from stakeholder groups 	 Evaluation of proactive engagement with elected representatives and patient representatives. Number of positive attitude feedback received from stakeholder groups.
Budget: delivery of consultation activity within an agreed budget	Consultation budget is not overspent

Our consultation audiences







Equality and diversity (1)

Impacted groups	Planned engagement activity
Age – older adults (over 65)	 Raise awareness through appropriate voluntary and patient community networks Make information available on request in large print and audio formats to allow for age-related changes in vision Provide both online and in-person engagement opportunities, and online and hard copy documents Make sure sufficient older people, as well as a mix of other age groups are included in our focus groups and telephone interviews
People with disabilities or sensory needs	 Make consultation information available in an Easy Read format and on request in audio and large print Promote consultation with local disability forums and provide appropriate feedback mechanisms Offer a specific focus group for people with disabilities
Gender reassignment (trans)	 Liaise with local trans groups to promote the public consultation Offer a specific focus group (or if difficult to recruit to, individual depth interviews) for trans people
Race	 Make consultation document and questionnaire available on request in the five most commonly spoken languages in Kent and Medway Link in with local faith and cultural groups Briefing provided to local interpreting services Work in partnership with 'Friends, Families and Travellers' Offer a specific focus group for people from different ethnic minorities
Religion or belief	 Use existing relationships with religious leaders to promote public consultation and ask what materials/involvement activities would be appropriate for their communities Establish links with the local interfaith forum Ensure religion and beliefs can be discussed in the proposed focused groups



Equality and diversity (2)

Impacted groups	Planned engagement activity
Sex	 Make sure there are appropriate images men and women can identify with in any design Link with older men's and women's groups Focus groups and telephone interviews will include both sexes
Sexual orientation	 Liaise with local LGBTQ+ groups to promote the public consultation Offer a dedicated focus group
Other disadvantaged or inclusion groups – carers	 Work with local carers organisations to raise awareness of the consultation Offer a range of engagement activities on different days and at different times so carers have the opportunity to participate around their caring schedule Offer a specific focus group for carers
Other disadvantaged or inclusion groups – areas of socioeconomic deprivation	 Raise awareness with local community and voluntary groups that reach this audience for example, food banks, housing associations, homeless charities Provide both online and in-person engagement opportunities, and online and hard copy documents Produce information in a variety of formats using plain English to ensure it is accessible Offer a range of ways to respond that are free e.g. freepost address, email and online Offer a specific focus group for people in areas of socioeconomic deprivation
Other disadvantaged or inclusion groups – clinically extremely vulnerable who shielded during pandemic	 Raise awareness with local community and voluntary groups that reach this audience Provide a range of online and Covid secure opportunities to find out about, engage and respond to the consultation Offer a specific focus group for those who have shielded and are clinically extremely vulnerable



Planned approach (1)

Consultation method	Approach overview/description
General publicity and information sharing	 Promote information via physical and digital channels using advertising, video, posters, social media, as well as via NHS organisations and stakeholder/ community channels. Proactive and tailored information to be communicated or shared with specific communities or groups.
Website/ online media	 Webpage with comprehensive guide to consultation, regularly updated, including information to help the public to understand the impact of the proposed changes on them individually. Consideration of online exhibition to interactively share information in an accessible and engaging way and to seek feedback. Video/ animation to explain the proposal in an accessible way.
Telephone and freepost	 Consultation team accessible via telephone, post and online mechanisms to ensure opportunity to give feedback is available to those who may be digitally excluded or less digitally experienced.
Consultation questionnaire	 Online and hard copy questionnaire available to be completed by people in response to general publicity, specific outreach or after attending events.
Residents' survey – telephone interviews	 Interviews with a representative sample of the general public (age, gender, working status, district/area) including harder to reach residents, including those who don't have a car.
Public exhibitions x4	 In-person drop-in sessions providing an opportunity for information giving and detailed conversations with local communities.
Public online listening events x4	 Online events with panel-led plenary and facilitated 'table discussions' to ensure everyone has an opportunity to give feedback on the proposals, held during consultation weeks 2-6, two in the day and two in the evening.
Patient and voluntary group meetings	 Attend existing meetings to raise awareness of our plans and to provide an opportunity for detailed conversations with patient and voluntary group representatives. Feedback from each meeting will feed into the consultation process.



Planned approach (2)

Consultation method	Approach overview/description
Qualitative focus groups x11	Targeted focus groups to better understand the impact of our proposals on those identified in the inequalities impact assessment (IIA) as likely to be disproportionately impacted: • protected characteristic groups x4 – disability, trans, race, sexual orientation • groups potentially impacted x3 – carers, deprived, extremely clinically vulnerable (shielded) • specific geographies x4 The groups will be set up to ensure we hear from older people, as well as a mix of other ages, and both sexes.
Staff engagement	Specific, focused staff engagement meetings for staff directly impacted by the proposals using in-person and digital engagement methods and including two staff workshops during the consultation period. NB: Any employer-led formal HR-led consultation with employees, on potential changes to individual job roles to support the implementation of proposed changes is outside the scope and remit of this consultation plan.
Stakeholder engagement	 Formal consultation with Medway HASC Ongoing updates to Kent HOSC A visit with Medway HASC councillors to demonstrate 'modern mental health care in Medway' Regular briefings to Kent and Medway MPs Regular information flows with key stakeholders
Media	 Engage with media proactively and reactively throughout consultation Use media to promote events and opportunities to engage Provide clinical spokespeople wherever possible

Measuring our success



The success of the consultation will be measured against the aims and SMART objectives, with a focus on:

- the depth and breadth of responses/feedback on the proposals
- the targets for reach set out in this plan
- feedback from respondents on the process of the consultation, including their views on how the consultation has been conducted within the context of the pandemic
- feedback from Medway HASC, Kent HOSC, Medway and Kent Healthwatches, and NHS England and NHS Improvement post consultation
- whether we meet our statutory and legal duties associated with consultation.



Consultation activity: raising awareness

Raising awareness: print and digital advertising





We placed adverts in **five KM Media Group print publications** between 11th August 2021 and 16th September 2021:

- Kent Messenger, Medway Messenger, Sheerness Times Guardian, Sittingbourne News, Gravesend & Dartford Messenger which have a combined readership of almost 99,000 people.
- Total of 20 advertisements were published.

In addition, accompanying **online/digital adverts appeared on Kent Online** news website between 10th Aug 2021 and 21st September 2021:

- Booked: 600,000 page impressions
- Delivered: 694,073 page impressions
- 381 clicks (above average conversion rate for banner advertising).





Raising awareness: radio advertising

We placed radio adverts on local radio station KMFM starting w/c 23rd August running for 30 days.



- KMFM have a weekly audience of 200,200 adults
- 148 slots were booked and additional free slots were given by the media company

Area	Booked slots	Free slots	Total number of times advert aired
Medway	148	40	188
Maidstone	148	135	283
West Kent	148	87	235



Raising awareness: social media

Regular social media posts, using a variety of messages and images to promote the consultation and attendance at events, across NHS accounts and via partners including Healthwatch.

- 14 posts on Kent and Medway CCG social media channels across Facebook, Twitter, and Instagram:
 - Reach/impressions: 11,690
 - Engagements (likes, comments, retweets etc): 125
- KMPT published a total of 19 posts across
 Facebook and Twitter during the consultation period.
- Social media content was sent to stakeholder organisations who were invited to share content through their own social media channels, including Healthwatch, local branches of Mind, the Sunlight Centre and Age UK

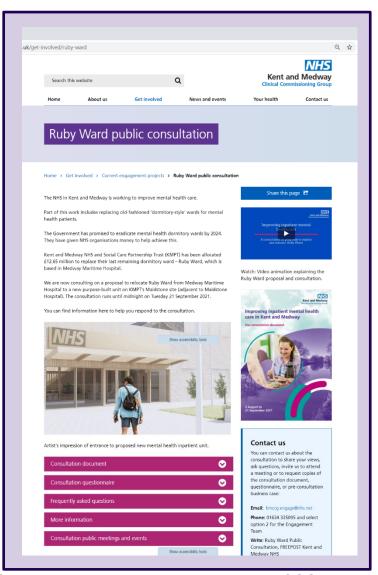




Examples of social media content used during consultation



Raising awareness: dedicated webpages



Webpages were set up on the Kent and Medway CCG website:

- Signposted from the home page and under the 'get involved' banner
- Pages held links to all of the consultation documentation, including:
 - full consultation document, summary and EasyRead versions (with alternative languages on request),
 - frequently asked questions
 - details of public listening events and drop-in exhibitions
 - an animation explaining the proposals and why change is needed
 - the pre-consultation business case

Website analytics: 3 August – 13 September		
Sessions 939		
Page views 1,310		
Unique page views 1,080		

 KMPT and other NHS partners signposted to the Ruby Ward consultation pages from their website and/or through bulletins and newsletters.

Consultation page on Kent and Medway CCG website

Raising awareness: Communications cascade



A comprehensive communications cascade by email to a wide range of staff and stakeholders was issued on 3 August 2021 to mark the launch of consultation, covering the following groups:

- Local MPs
- KMPT staff
- Medway HASC members
- KMPT patient /stakeholder groups
- Kent HOSC members
- KM CCG member practices, PCNs and local area teams
- NHSEI leads (including communications leads)
- CCG staff
- CCG and KMPT communications leads
- KM ICS Board, system partners and ICPs
- KM CCG Governing Body members
- Wider K&M communications leads (e.g. acute and community providers)

- KMPT Board
- Local health partners (i.e. LMCs, HWB, patient groups, voluntary sector etc)
- Kent and Medway Mental Health Improvement Board
- District/borough councils
- Ruby Ward staff and service leads and staff side/unions
- Patients, carers and public via websites, social media and other existing communications channels (e.g. bulletins and newsletters)
- Healthwatch Kent and Healthwatch Medway
- Media

Raising awareness: dissemination via existing bulletins



Information and updates about the consultation and opportunities to engage were included in all scheduled Kent and Medway CCG stakeholder and community bulletins

Community bulletin				
Date	Audience	Opened	Total clicks	Unique clicks
5 August	8,312	3,731	41	25
19 August	8,294	3,430	8	6
2 September	8,270	3,302	3	3



- Know someone who is pregnant?
- #GrabAJab: Walk-in vaccination clinics
- · All aboard the Covid-19 vaccine bus
- Guides to help with suspected and newly-diagnosed cancer
- Let's make our health better
- Parties in general practice
- Proposal to relocate Kent and Medway's mental health ward
- Recommendant chair
- Celebrating South Asian Heritage Month
- · Opportunities to get involved
- Find support in your area

Example of Kent and Medway CCG Community Bulletin

Raising awareness: information at NHS/community sites



Provided materials to partner and stakeholder organisations to promote the consultation:

- hard copies of posters in A4 and A3 sizes
- digital poster for 'e-screens'
- copies of the consultation document (full and summary versions)
- social media content
- copy for newsletters, websites and bulletins etc

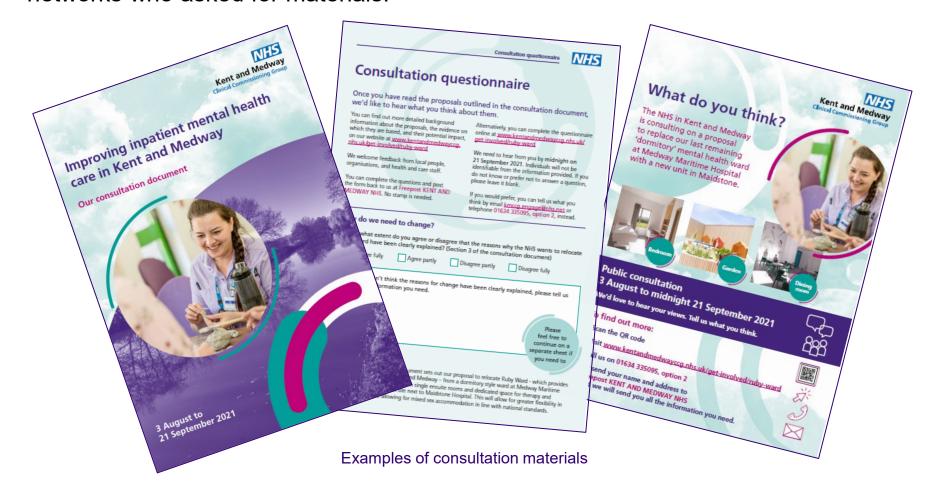


Poster produced in A4 and A3 format to promote the consultation

Raising awareness: information sent by post



Copies of consultation materials including the summary documents and posters were sent to nine local libraries and five voluntary and community groups and networks who asked for materials.





Raising awareness: media activity

Media releases were sent to local outlets to ensure they had information about the proposals, and the media were offered access to programme representatives via

events and briefing sessions.





Consultation activity: gathering views



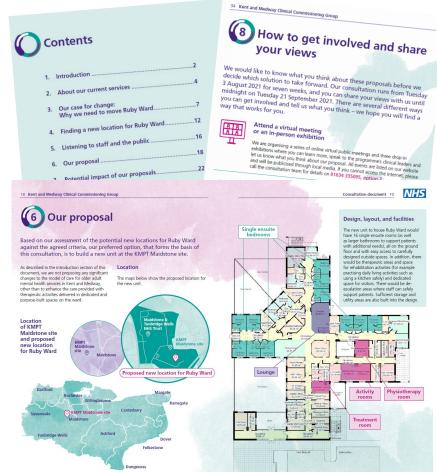
Gathering views: consultation documents

A full consultation document, a summary version and an EasyRead version were developed to explain the consultation to audiences and help people form their views on the proposal.









Examples of the consultation documents and content

Gathering views: consultation questionnaire



Consultation quest	tionnaire
Once you have read the proposals out we'd like to hear what you think abou	
fou can find out more detailed background information about the proposals, the evidence on which they are based, and their potential impact,	Alternatively, you can complete the questionnaire online at www.kentandmedwayccg.nhs.uk/get-involved/ruby-ward
on our website at www.kentandmedway.cg. hb.uklget-involvedfruby-ward. We welcome feedback from local people, organisations, and health and care staff.	We need to hear from you by midnight on 21 September 2021. Individuals will not be identifiable from the information provided. If you do not know or prefer not to answer a question, please leave it blank.
fou can complete the questions and post the form back to us at Freepost KENT AND MEDWAY NHS. No stamp is needed.	If you would prefer, you can tell us what you think by email kmcg.engage@nhs.net or telephone 01634 335095, option 2, instead.
Why do we need to change?	
	that the reasons why the NHS wants to relocate
Ruby Ward have been clearly explained? (Secti	on 3 of the consultation document) Disagree partly Disagree fully
Tuby Ward have been clearly explained? (Section Agree fully Agree partly 2	on 3 of the consultation document) Disagree partly Disagree fully

The consultation questionnaire contained 10 questions about the proposal, plus equalities monitoring questions. It was published online, linked from the consultation website and was available hard copy. We received 94 completed questionnaires, all submitted online.

Area	Number of
	responses
Medway and Swale	31
West Kent	29
East Kent	16
North Kent	5
No postcode	13
TOTAL BY ACTIVITY	94

The consultation questionnaire



Gathering views: Focus groups

10 focus groups were held in September 2021. Four were for people from the general population and six for people with protected characteristics (we had planned to run a focus group for trans people but were not able to recruit attendees). **42 attendees** were recruited via an independent agency and a breakdown is shown in the table below. A full report on the focus groups is part of the consultation response report.

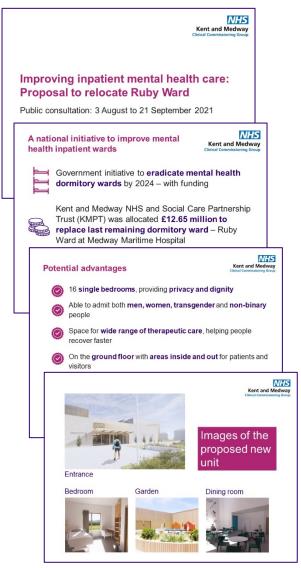
Focus group (total attendees)	Sex/ gender	Sexual orientation	Age	Area	Race/ ethnicity
General population (22 across four sessions)	Male – 11 Female - 11	Heterosexual/ straight – 21 Gay/Lesbian - 1	18-24 x4 25-40 - 4 41-64 x10 65-75 - 4	Dartford – 6 Sevenoaks - 5 Tonbridge & Malling - 4 Medway – 3 Swale – 3 Tunbridge Wells - 1	White British – 21 White Scottish - 1
Deprivation (3)	Female - 3	Heterosexual or straight - 3	25-40 - 1 41-64 - 2	Sevenoaks - 1 Swale - 1 Medway - 1	White British - 3
Disabilities LTHC (3)	Female – 2 Male - 1	Heterosexual or straight - 3	41-64 - 2 65-75 - 1	Dartford - 2 Maidstone - 1	White British - 3
Carers (2)	Male – 1 Female - 1	Heterosexual or straight - 2	25-40 - 1 41-64 - 1	Dartford – 1 Sevenoaks - 1	White British - 2
Extremely clinically vulnerable (2)	Male – 1 Female - 1	Heterosexual or straight - 2	41-64 - 2	Gravesham - 1 Medway - 1	West Indian White & Black African
LGB (3)	Female - 3	Gay/Lesbian – 1 Bisexual - 2	18-24 - 1 25-40 - 2	Dartford - 1 Gravesend - 1 Tunbridge Wells - 1	White British - 3
BAME (7)	Female – 6 Male - 1	Heterosexual or straight - 7	18-24 - 1 25-40 - 4 41-64 - 2	Dartford – 5 Medway – 1 Maidstone - 1	Black African – 3 White & Black African - 1 African - 1 Indian - 1 Other Asian background - 1

Gathering views: Online public listening events



Four online public listening events were scheduled.

- Promoted via the CCG website, social media, and stakeholder groups/networks.
- Promotional information included signposting to register with login details for the events sent to those registered two days before the date
- One of the events did not attract any attendees so did not go ahead. One of the events had two people registered who cancelled on the day. The other two events were held on:
 - Wednesday 25 August 2021 6:30pm to 8:30pm
 - Wednesday 15 September 2021 6:30pm to 8:30pm
- Attendees were given a short presentation about the proposals, followed by the opportunity to ask questions and share their views
- Feedback from those who attended was positive.



Examples from public listening events presentation

Kent and Medway Clinical Commissioning Group

Gathering views: Exhibitions





Example of a pop up exhibition

Three 'pop up' exhibitions/information stalls where held during the consultation period:

- Saturday 11 September 2021 at the Sunlight Centre, Gillingham. We were grateful to the HASC members who came along to the exhibition
- Thursday 16th September at The Forum, Sittingbourne
- Friday 17th September at The Mall, Maidstone
- The exhibitions used large-scale exhibition panels to display key information about the proposals
- Copies of the summary consultation document and questionnaires were available
- Programme representatives were on hand to offer additional information, details of how to respond to the consultation and to gather ad hoc views and feedback from people
- In total over 70 people attended.



Gathering views: Telephone interviews

A specialist independent research agency was commissioned to conduct a telephone survey that collected the views of a representative sample of residents across Medway and Kent during the consultation period.

- Fieldwork took place between 24th August and 21st September
- 851 interviews were completed

Area	Number of interviews
Medway and Swale	243
West Kent	248
East Kent	242
North Kent	118
Total	851

- 750 interviews originally commissioned with a further 100 commissioned to focus on gaining views from residents in areas of higher deprivation.
 Therefore there was an additional focus in parts of Medway, Maidstone and Swale
- The full report and analysis forms part of the consultation response report.

Gathering views: Attendance at stakeholder group meetings



Ruby Ward programme representatives presented the proposals at **12 stakeholder group** meetings during August, September and October 2021 (11 during the formal consultation period) that were attended by over **90 people**.

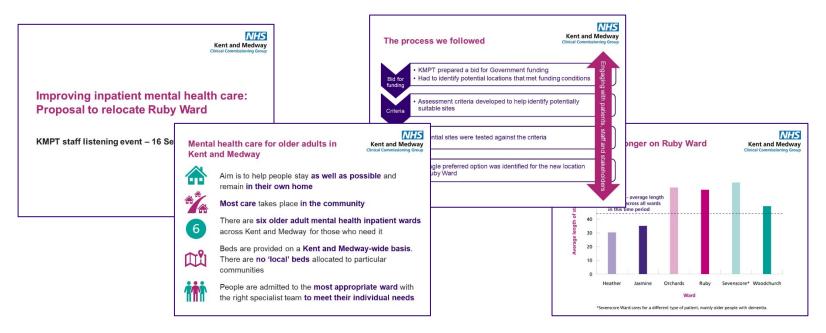


- Follow up information was sent to over 100 contacts after these meetings, including all members of the patient involvement/participation groups, the KMCCG engagement group and KMPTs 'Keeping Connected' group.
- Stakeholder groups were also provided with written information, consultation materials and social media content to disseminate through exiting newsletters, bulletins, and online channels.



Gathering views: Staff listening events

- Two independently facilitated events with KMPT Ruby Ward staff were undertaken on Monday 16th August, scheduled to accommodate different shift patterns
- The sessions were attended by 11 Ruby Ward staff, including nurses and therapists, one nursing ward manager and one locality manager for community mental health
- A further two events were held for wider KMPT staff on 3rd and 16th September.
- They were attended by nine staff from across KMPT (beyond Ruby Ward)



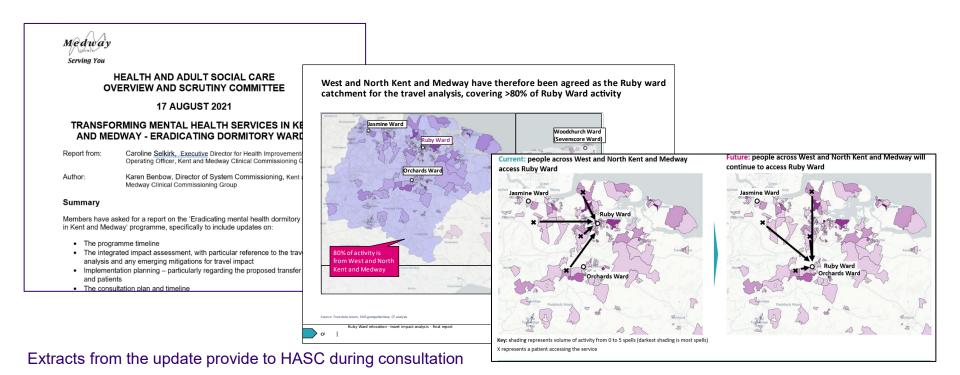


Consultation activity: Engaging with elected representatives

Overview and scrutiny: Updates to Medway HASC



- Medway Health and Adult Social Care Overview and Scrutiny Committee (HASC) received an update at its meeting on Tuesday 17th August and follow-up information in response to specific questions about the consultation
- The programme team worked with the HASC officer to discuss opportunities for informal briefing and information sharing as part of our consultation activity.



Overview and scrutiny: Updates to Kent HOSC



- A written update was submitted to the Kent Health Overview and Scrutiny Committee (HOSC) for its meeting on 16th September 2021.
- HOSC members were part of the communications cascade notifying them of the consultation launch on 3rd August
- The programme team were in regular contact with the Democratic Services team to ensure questions were answered with the ongoing offer of informal and ad hoc briefing as required.
- As Kent HOSC had previously determined that the proposals did not amount to substantial variation of service, their input was sought as part of the public consultation and wider stakeholder engagement planned, instead of direct consultation with Kent County Council under section 244 duties.

Engagement with MPs



- All Kent and Medway MPs were included in the initial communications cascade launching the consultation on 3rd August 2021
- Offers of dedicated briefing for MPs from the CCG's Accountable Officer were made during the consultation period



Consultation activity: Mid-point review



Mid-point review during consultation

- Responses and feedback were reviewed at the consultation mid-point by the programme team to confirm if further targeted work was required. As a result an additional 100 telephone interviews were commissioned (see '<u>Gathering</u> responses: <u>Telephone interviews</u>')
- Updates on activity and numbers of responses were provided by the programme team to the CCG governing body and KMPT's board during the consultation period



Delivery against aims and SMART objectives

Kent and Medway Clinical Commissioning Group

Response to the consultation

- Information about the consultation was widely and effectively shared across existing CCG and KMPT networks, reaching hundreds of people already involved, engaged or interested in the CCG, mental health services or the wider NHS
- Engagement from patient and stakeholder groups and representatives was good and constructive
- The consultation was widely promoted to the general public, giving hundreds of thousands of people the opportunity to see or hear about the proposals
- However, there were lower levels of active engagement from the general public in opportunities to respond and share views
- A combination of the Covid pandemic and the relatively small numbers of patients impacted by the proposal are likely to be the key factors in this
- Despite this the proactive outreach through telephone interviews and focus groups allowed us to gather views from a representative sample of the population, as well as from individuals from protected characteristic groups and deprived communities
- On balance, the responses received are likely to be representative of the views of the wider impacted population in Medway and north and west Kent.

SMART objectives evaluation (1)



SMART objective	Assessment
Opportunities to see or hear about the consultation*:118,200 people (approximately 10 per cent of the core and target population)	Approximate total opportunities to see/hear: 320,000 Achieved advertising, social media, websites and sharing information with stakeholders directly and via third parties
Target for active and direct engagements: 2,955 people	Approximate total direct engagements: 4500 Achieved through meetings, exhibitions, focus groups, phone polling, dissemination to stakeholders and questionnaire responses
Target for responses: 1,773 separate responses to the consultation	We received a total of 987 responses across the questionnaire, telephone interviews, focus groups and listening events
Geographic 'hot spots' (areas that have a higher reliance on/likelihood of being impacted by proposed changes): • 60 people across 4x 'drop-in' exhibitions • 24 people across 4x focus groups	 70+ people across 3x exhibitions 22 people across 4x focus groups
Protected characteristics, seldom-heard/hard-to-reach and most impacted groups: 7x focus groups including at least 36 people	20 people across 7x focus groups
Staff: all affected staff have opportunity to access information about consultation, complete consultation questionnaire and/or join one of two staff workshops.	 All Ruby Ward staff received information about the consultation 11 impacted staff joined a workshop session 9 further staff joined a listening event 19 staff from NHS or local authority organisations submitted a questionnaire response

SMART objectives evaluation



SMART objective	Assessment
 Patients, families, and carers: All affected patients, families/carers have opportunity to access information and respond to consultation though a focus group, in-depth interview, the consultation questionnaire etc. proactive outreach to at least 1x carer support group and at least 1x patient representative group. 	 Information was provided on Ruby Ward for current patients, families and carers to access Information was shared by KMPT through patient facing channels Meeting with KMPT's 'Keeping Connected' engagement pool, with follow up information shared to full membership Proactive contact with and dissemination of materials to wide range of patient and carer groups (Mind, Age UK, Carers First, Medway Carers etc) Meetings with six patient and public participation groups
 Stakeholder attitudes: At least 2x proactive engagement with elected representatives and patient representative groups At least 3x positive feedback about the consultation process from stakeholder groups 	 Attended 12 stakeholder/patient group meetings Attended 1x HASC meeting Provided written updates to all elected representatives Positive feedback received from stakeholders about the proposals and from meeting participants about the quality of the materials provided
Budget: delivery of consultation activity within an agreed budget	Achieved



Post-consultation: Reviewing the feedback and next steps

Reviewing feedback and consultation reports



- This report is one of two developed post-consultation.
- An independent analysis of the consultation feedback has been carried out and a consultation response report developed
- This report and the consultation response report will be published on the Kent and Medway CCG website at www.kentandmedwayccg.nhs.uk/get-involved/ruby-ward

Next steps



 Public consultation response report and activity shared with Kent and Medway CCG governing body and with Medway HASC

Kent and Medway CCG receives HASC response to the consultation

- Development of decision-making business case
- Consultation responses report feeds into decision-making business case

• CCG governing body decision on proposed change