

# Guildhall Walk Healthcare Centre: Formal consultation – engagement plan

### 1 Background

The Guildhall Walk Healthcare Centre was opened in 2009, as part of the national drive to create 'Darzi Centres' to extend the choices available to patients.

The centre currently has a registered list of around 7,000 people, and demographic characteristics that make it slightly different from a typical GP practice – for example, there is a significant proportion of University students, approximately 1,000 under-19s and only around 150 people aged over 65. The practice also offers a service for approximately 140 people who are registered homeless. The facility not only offers a conventional GP service to registered patients, it also provides a GP-led 'walk-in' service as well and this element in particular relates to the delivery of urgent care services in the city.

The contract for services provided at Guildhall Walk ends in March 2016, and so decisions are required which may impact both upon primary care, and urgent care, provision in Portsmouth. At the same time proposals are being developed that look at the future strategic development of models of care for both urgent and primary care which makes this an opportune time to review the future of this particular service.

### 2 Urgent care/primary care – the local context

Over the past decade or so, the provision of urgent care options has extended in response to both national and local policy. As well as the Emergency Department (ED), city residents can access two nurse-led walk-in services – one for minor injuries, one for minor illnesses – at St Mary's Hospital Treatment Centre, the GP-led walk-in service for minor illness (but not injuries) at Guildhall Walk, a primary care-led Urgent Care Centre at Queen Alexandra Hospital, the 111 phone helpline service (incorporating the out-of-hours GP service), and pharmacies and GP practices offering extended access. All city practices also offer some 'same day' appointments.

Despite the expansion of choice, there has been no clear gain in terms of the impact on ED. Attendances at ED are rising less quickly than in many other areas, but they are still rising, and performance against the national four-hour access target remains too low. More importantly, the engagement work we have already undertaken indicates that local people find the current system difficult to navigate effectively.

Meanwhile the development of the Portsmouth 'blueprint' for health and care, which looks at how services can work in a more integrated way in future to transform out of hospital care means that there is a need to rethink how some services are currently delivered. And, alongside this, the local health system has developed an urgent care strategy locally to look at how services can best be provided in future in a way that manages local demand and expectation in line with the development of national thinking around urgent and emergency services.

The ending of the current contract for services at Guildhall Walk offers an opportunity to look again at the complex urgent care landscape in the city, and identify whether, with the transformation agenda that is beginning to emerge locally, there are more appropriate ways of delivering services in future.

### 3 Engagement and consultation

The CCG is operating a three phase approach to its engagement work with the local people over decisions relating to urgent care.

Phase 1	General engagement work to shape thinking (in this case on urgent care)	Started January 2014 – May 2015
Phase 2	Public engagement on the options around the future of GW	1 <sup>st</sup> June 2015 – 31 <sup>st</sup> August 2015
Phase 3	Formal consultation with HOSP and, if HOSP require it, further public	12 week consultation (taking account of
	consultation.	Christmas)

### Phase 1 GENERAL ENGAGEMENT – key findings



Over the last 18 months the CCG has conducted extensive engagement activities with the general public, patient representatives, and clinicians, to better understand how people make decisions about urgent care, and how a more effective system could be delivered.

The full results of our engagement activity can be found attached above, and include a week-long Under Pressure campaign with The News, a survey of more than 800 people in the summer of 2014, and a survey with Wave105 in early 2015. The CCG has also gathered more qualitative feedback from representatives of the patient groups aligned to each GP practice. Some recurring messages from public and patients were:

- Confusion. Most people do not know, for example, the differences between the walk-in facilities at St Mary's, and Guildhall Walk. Feedback suggests patients would prefer a simpler system, even if it meant fewer choices being available.
- Poorly informed. For example, a notable minority (30%) do not know that GPs offer same-day appointments, and awareness of 111 remains too low.
- Evolving preferences. Most people still want to see a GP for minor illnesses, however a large majority now see a walk-in service as the default choice for minor injuries.

Conversations have also been held with city GPs, over a period of time. Initially the key messages from the clinicians were:

- Support for a minor injury walk-in service at St Mary's, adjacent to diagnostic services, but concern regarding the current nurse-led minor illness service there (primarily regarding the perception that notable numbers of patients there are subsequently referred elsewhere)
- Some preference expressed by primary care professionals to have capacity to deal with own patients in-hours. But... concerns over in-hours capacity, and how to meet patient expectations
- Practices recognise the current ongoing need for a GP led walk-in service in the city to manage demand

More recently the CCG has spoken again with GPs from across the city, regarding urgent care and walk-in services. The feedback suggested:

- Support for a simplified system, with walk-in services on Portsea Island brought together into a single location
- Support for a model of walk-in care which combines both GPs and nurses, rather than having separate 'GP-led' and 'nurse-led' services

#### Phase 2 FOCUSED ENGAGEMENT GHW – key findings

Between June 2015 and the end of August the CCG engaged with local people and interested parties on both the future of the walk in centre at Guildhall Walk and the GP practice and its associated registered list.

Again, this engagement work produced some clear themes in terms of the feedback received:

- Asked about the most important factors for the NHS to consider when deciding whether to relocate the walk-in service from Guildhall Walk to St Mary's approximately two-thirds of respondents cited the quality of care as the biggest concern, with access also being important to people 65% highlighted travelling distance, and 58% highlighted the importance of having a service near the city centre. Approximately a third of respondents stated the most important factor was ensuring best possible value for public money, or bringing GPs, nurses and diagnostics together in one place
- When asked for the *single* most important factor to be considered, access was key a quarter choosing a city centre location as the prime consideration, and a further 22% choosing travelling distance
- When asked to set out their concerns about the possible move, more than half (55%) expressed doubts that St Mary's had the capacity to cope with the extra activity, 40% feared a reduction in quality, and 39% said they would have further to travel.

The CCG also approached the independent HealthWatch Portsmouth to ask whether the organisation could carry out some additional engagement. The conclusions of HealthWatch following its engagement work included:

- There were concerns about access from the western side of the city to St Mary's, and further concerns over the adequacy and affordability of car parking facilities at St Mary's
- Some respondents questioned whether a single facility would have the capacity to respond to current and future demand, and whether that could lead to increased waiting times at St Mary's
- Concerns exist about the quality and range of services that would need to be provided in a combined walk-in facility, including crisis and mental health services.

#### Phase 3 FORMAL CONSULTATION

We anticipate a formal consultation phase will start in November 2015, as a result of discussions in September with the CCG Governing Board and the Portsmouth Health Overview and Scrutiny Panel. The duration of this formal phase will be three months and will allow additional time to cover the Christmas/New Year process). The formal consultation will explain the rationale for the proposal being put forward by the CCG including consideration of options for the future of Guildhall Walk as both a GP practice and a walk-in facility. A consultation document will be produced, together with a summary version and a Q+A sheet amongst other materials. These will need to be made available in different formats. The consultation will seek people's views on the proposal being put forward and will include a specific set of questions for patients registered with the GP practice, as opposed to those who use the facility on a walk-in basis.

A variety of approaches will be utilised for the process involving face to face, meetings, drop in events, web and digital media solutions, traditional media and others. An Equality Impact Assessment has been undertaken for this scheme and will be updated in line with the formal consultation process.

The objectives for the communications work in support of this consultation are to ensure the CCG meets its statutory duty for public participation including the involvement of the public, patients and carers in planning of commissioning arrangements and any proposed changes to services which may impact on patients. In particular we need to:

- Raise awareness: ensure that everyone who wants to be is aware of the consultation and the reasons for it happening;
- Improve understanding: ensure that people understand the reasons for the consultation, the proposals being considered and the specific elements that apply to them (eg there will be a difference in the feedback we are seeking between patients registered at GHW and those who use it as a walk-in facility);
- Encourage participation: ensure that everyone who wants to is able to participate in the consultation, wherever possible in a way that best suits them;
- Offer reassurance: help people understand why their views are important, even if we are putting forward a preferred option, in the shaping of an overall proposal.
- Provide information: this consultation offers us the opportunity to remind people of the wide range of services available to them when they need NHS help in a hurry, some of which may be acceptable alternatives to using a walk-in service.

A wide range of stakeholders will need to be involved in the formal phase of the consultation, many of whom have already shared their views as part of the engagement work we have been undertaking. It will therefore be important to acknowledge this when we approach them for help with this stage of the process.

The table that follows identifies the stakeholders that will need to be involved and sets out the means by which we will seek their input. In many cases the early stages of the consultation process will need to be used to work with different organisations to find out how best to engage with different client groups – some advice has been sought from Healthwatch on this, which has been appreciated.

Healthwatch Portsmouth is an independent organisation helping local people have their say about how health and social care services are provided in the city. It has fed back recommendations to help the CCG engage with local people over Guildhall Walk and will continue to do so throughout the consultation process. It may also independently analyse the responses the CCG receives. If anyone feels the CCG are not providing enough information for them to be able to give a response, they should in the first instance contact the CCG. If this query is not resolved, Portsmouth residents can then contact Healthwatch Portsmouth on 02393 977079 or at <a href="info@healthwatchportsmouth.co.uk">info@healthwatchportsmouth.co.uk</a>.

#### Proposed key stakeholder list for formal consultation process.

This list is not exhaustive and may well be added to as the process unfolds – it does, however, represent our thoughts important stakeholders to consult with during this process.

	Stakeholder		Media/method
	GUILDHALL WALK HEALTHCARE CENTRE		
1	Portsmouth Health Limited	Current service provider (via Care UK)	<ul> <li>Regular meetings with service lead</li> <li>Consultation document and request formal response</li> </ul>
2	GHW Practice Staff	Staff affected directly by proposals	Service lead to dictate who best to lead this and how it will be done
3	GHW Practice patients (registered list)	Patients affected directly by proposals	Letter to every patient with link to formal consultation document and

	Stakeholder		Media/method
			explanation of process; feedback invited (specific questions to those on registered list)  Consider need to text reminders at lauch, midway through and towards end of process)  Posters/summaries in Centre  Work with practice manager to identify best possible approaches
	LOCAL NHS ORGANISATIONS AND BODIES		
4	NHS England (Wessex)	Key partner and NHS Gateway review requirements	<ul> <li>Regular meetings re assurance process</li> <li>Consultation document and request formal response</li> <li>Regular updates through usual monitoring channels</li> <li>Specific email to primary care/pharmacy leads to request dissemination of consultation information</li> </ul>
5	Local GPs	CCG members and links to walk-in services	<ul> <li>Email to each senior         partner/commissioning lead and practice         manager with link to consultation         document and requesting response</li> <li>Regular news item on PIP</li> <li>TARGET sessions update</li> <li>GP Commissioning event updates</li> </ul>

	Stakeholder		Media/method
6	Portsmouth Hospitals NHS Trust Board	Key partner/urgent care system provider	<ul> <li>Consultation document and request formal response</li> <li>Posters/summaries in A&amp;E?</li> </ul>
7	Portsmouth Hospitals NHS Trust staff	Interested party	Syndicated article for newsletters/intranet containing link to consultation document and how to respond
8	Solent NHS Trust Board	Key partner/urgent care system provider	Consultation document and request formal response
9	Solent NHS Trust staff	Interested party	Syndicated article for newsletters/intranet containing link to consultation document and how to respond
10	Care UK/St Marys NHS Treatment Centre	Key partner/urgent care system provider/affected by walk-in proposals	<ul> <li>Consultation document and request formal response</li> <li>Posters/summaries in Centre</li> <li>Syndicated article for newsletters/intranet containing link to consultation document</li> </ul>
11	NHS Fareham and Gosport CCG	Key partner/urgent care system	<ul> <li>Consultation document and request formal response</li> <li>Syndicated article for newsletters containing link to consultation document</li> </ul>
12	NHS South Eastern Hampshire CCG	Key partner/urgent care system	Consultation document and request formal response

	Stakeholder		Media/method
			Syndicated article for newsletters     containing link to consultation document
13	South Central Ambulance Service	Key partner/urgent care system provider	<ul> <li>Consultation document and request formal response</li> <li>Syndicated article for newsletters containing link to consultation document</li> </ul>
	ELECTED MEMBERS		
14	Local MPs	Key stakeholder	<ul> <li>Consultation document and request formal response</li> <li>Offer update meeting</li> </ul>
15	Portsmouth City Council Councillors	Key stakeholder	<ul> <li>Direct contact with PCC councillors in closest wards</li> <li>Consultation document and invite response</li> <li>Members Information Service updates</li> </ul>
	PATIENTS GROUPS		
16	Guildhall Walk Patient Participation Group	Patient group – directly affected by proposals	<ul> <li>Send consultation document to chair and request formal response</li> <li>Meeting – agree with practice how best to take forward</li> </ul>

	Stakeholder		Media/method
17	Portsmouth PPG Network	Wider patient group – key stakeholder	<ul> <li>Email with link to consultation document</li> <li>Update at network meetings</li> </ul>
18	Solent NHS Trust members	Wider patient group – interested parties	Email with link to consultation document and invitation to respond
19	Portsmouth Hospitals NHS Trust members	Wider patient group – interested parties	<ul> <li>Email with link to consultation document and invitation to respond</li> <li>Seek publicity through PHT Facebook page</li> </ul>
20	Portsmouth CCG Healthy Discussions Group (online forum)	Wider patient group – key stakeholder	Email with link to consultation and invitation to respond
21	PUSH	Patient group – directly affected by proposals	<ul> <li>Explore scope for PUSH to support consultation phase with more 1:1 work with clients (as engagement phase)</li> <li>There are other groups who may also be able to help here but PUSH were helpful in engagement phase.</li> </ul>
22	Solent Learning Disability Service	Links into LD patients affected by proposal – support with 'easy read' materials	Work with Solent NHS trust and to their easy read guidelines to produce appropriate materials and share with clients
	ORGANISATIONS DIRECTLY AFFECTED		
23	Portsmouth University students and staff	High volume users of service – directly affected	Approach University for support in disseminating information to students and staff – via Comms and Welfare

	Stakeholder		Media/method
			Teams • ? specific drop-in event(s) at University
24	Portsmouth University Students Union	High volume users of service – directly affected	As above – newsletters, posters etc
25	?University Language School/foreign students	Potential high volume users of service – directly affected	• As 23
26	Lalys pharmacy	Neighbouring pharmacy – affected by proposal/impact on service/alternative minor illness service provider	<ul> <li>Consultation document and invite response</li> <li>Update meeting with owner on progress if required</li> </ul>
27	Guildhall Walk businesses	Potential users of service – affected by proposal	Door drop posters and summaries
28	Portsmouth Central Library	Potential users of service, signpost to service	<ul> <li>Venue for drop-in events or information stands?</li> <li>Posters and summaries</li> </ul>
29	Portsmouth City Council staff	Potential high volume users of service – directly affected	Syndicated article for newsletters/intranet containing link to consultation document and how to respond
30	PCC Housing Team	Signpost to service, affected by proposal	Seek advice from PCC executive team on most appropriate approach
	MONITORING BODIES		
31	Portsmouth Health Overview and Scrutiny	Monitoring of process – directly affected. Key	Consultation document and request formal response

	Stakeholder		Media/method
	Panel	stakeholder	<ul> <li>Regular updates at meetings</li> <li>Informal meetings and briefings as required</li> </ul>
32	Healthwatch Portsmouth	Independent advice and analysis – key stakeholder and link to patient groups	<ul> <li>Advice and guidance on processes</li> <li>Approach for support with consultation with specific groups</li> <li>Consultation document and request formal response</li> </ul>
33	Hampshire HASC	Monitoring of process – directly affected. Key stakeholder	<ul> <li>Consultation document and request formal response</li> <li>Regular updates at meetings</li> <li>Informal meetings and briefings as required</li> </ul>
	OTHER PARTNERS		
34	Portsmouth City Council executive	Key stakeholder	Consultation document and request formal response
35	PCC Director of Public Health and team	Key stakeholder – interest in homeless service provision	<ul> <li>Consultation document and request formal response</li> <li>Consider any further homeless people needs analysis work</li> </ul>
36	Portsmouth Health and Wellbeing Board	Key stakeholder	<ul> <li>Consultation document and request formal response</li> <li>Attendance/update at meetings as required</li> </ul>

	Stakeholder		Media/method
37	Salvation Army (Homeless population)	Support for engagement with homeless service users	<ul> <li>Explore scope for SA to support consultation phase with more focus group work with clients (as engagement phase)</li> </ul>
38	Local pharmacies	Alternative service providers	<ul><li>Posters and summaries</li><li>Formal approach via NHS England</li></ul>
39	Local neighbourhood forums	Interested parties/affected by proposals (inc Portsea Action Group.)	Work with PCC to identify most appropriate means of disseminating information
	VOLUNTARY/COMMUNITY SECTOR ORGANISATIONS (including but not restricted to)		
40	Groups and organisations including but not restricted to: Two Saints PRENO MIND Headway Off the Record Alzheimers Society AGE UK Red Cross (inc their drop-ins and cross cultural men's group),	Information disseminators	<ul> <li>Email link to consultation document and request share with members</li> <li>Request information about how best to engage further with them if they wish</li> <li>Use of PCC Voluntary Sector Newsletter to share messages</li> </ul>

	Stakeholder		Media/method
	Portsmouth Foyer Roberts Centre Learning Links (Work Programme and Families Moving Forward projects), Action Portsmouth, Parent & Carers Board and different faith groups.		
41	Portsmouth Disability Forum	Key stakeholder - Information disseminators	<ul> <li>Email link to consultation document and request share with members</li> <li>Posters/summaries to Sorrell Centre</li> <li>Seek advice from PDF on most appropriate means of providing information</li> <li>Use of Health Café for drop in session?</li> </ul>
42	Pompey Pensioners	Information disseminators	Email link to consultation document and request share with members
43	Carers Networks	Information disseminators	Email link to consultation document and request share with members
	GENERAL PUBLIC		
44	Walk-in users of the centre	Patients directly affected by proposals	<ul> <li>Posters and summaries in GHW –         information about how to comment</li> <li>Information for GHW website</li> </ul>

	Stakeholder		Media/method
45 46	Walk-in users at St Mary's Treatment Centre General public	Patients indirectly affected by proposals  Interested party	<ul> <li>Posters and summaries in SMTC –         information about how to comment</li> <li>Information for Care UK website</li> <li>Media and social/digital media</li> </ul>
		Drop in events arranged for  Cascades Shopping Centre  Portsmouth Central Library (static display stands and information/feedback forms) plus series of drop-in events. Library is in Guildhall Square so useful as a focal point.  We are seeking advice from Healthwatch on other means of promoting the consultation to public audiences and this will continue throughout the process.	<ul> <li>Posters and summaries in key locations</li> <li>Regular reminders</li> <li>Series of public drop-in events and market stalls – focused on city centre locations primarily.</li> <li>Voluntary sector newsletter</li> <li>Partner newsletters, including NHS Providers, PCC, Healthwatch, Action Portsmouth</li> <li>Seek partner support in promoting awareness</li> <li>?Life Channel screens</li> <li>?Information to local schools/churches/drop in centres etc</li> <li>Talk to Care UK about what can be undertaken at St Mary's Treatment Centre eg tours/drop in (nb active care facility working long hours) or video/virtual tours</li> </ul>
47	38 Degrees Patient Body	Interested party (petition)	Email link to consultation document and request share with members

	Stakeholder		Media/method
	MEDIA		
48	The News	Key stakeholder/interested party/information disseminator	<ul> <li>Proactive and reactive work as usual</li> <li>Briefings and updates as required</li> </ul>
49	BBC South/Solent	Interested party/information disseminator	<ul> <li>Proactive and reactive work as usual</li> <li>Briefings and updates as required</li> </ul>
50	Express FM/Wave 105FM	Key stakeholder/interested party/information disseminator/Previous partner with winter urgent care campaign/engagement – scope for follow up activity	<ul> <li>Proactive and reactive work as usual</li> <li>Briefings and updates as required</li> </ul>
51	Meridian TV	Interested party/information disseminator	<ul> <li>Proactive and reactive work as usual</li> <li>Briefings and updates as required</li> </ul>
	DIGITAL/SOCIAL MEDIA		
52	PCCG twitter followers	Support tool for promoting consultation	<ul> <li>Programme of regular tweets to raise awareness and promote involvement</li> <li>Seek support from partners re retweets</li> </ul>
53	Urgent Care Pompey Facebook	Support tool for promoting consultation	<ul> <li>Regular posts on FB site with occasional purchase of 'boost' advertising</li> <li>Consider development of video content</li> </ul>
54	Portsmouth CCG website	Support tool for promoting consultation	<ul> <li>Focal point for digital content but link closely with Twitter and Facebook activity</li> <li>Banner from homepage for duration of consultation</li> </ul>

	Stakeholder		Media/method
			<ul><li>Blog activity?</li><li>Regular updates</li><li>Consider development of video content</li></ul>
55	Information for partner websites/social media pages	Support tool for promoting consultation	<ul> <li>Approach NHS, community and public sector partners for support with posting and signposting information</li> <li>Syndicated article for web updates containing link to consultation document and how to respond</li> </ul>

### 4 Main communications tools and approaches

As the table above indicates a range of different approaches and media will be used to ensure that all stakeholders, as well as service users and members of the public are aware of the consultation and have the opportunity to participate.

These can be grouped into three key categories as outlined below but it will also be important to seek advice directly from harder to reach groups on how best to consult with their members specifically and may involve interpreters, focus groups, or routes through community leaders (as opposed to surveys only.)

Approach		Cost? Y/N	£
WRITTEN COMMUNICATIONS			
Consultation document, summary and supporting materials	Available to all	Υ	
Letters to patients	Registered patients at GHW - making them aware of the consultation	Υ	
	and inviting them to participate directly		
Text/email reminders	Registered patients at GHW, partner organisations	Y (text)	
Posters	General availability – to raise awareness of consultation	Υ	

Approach		Cost? Y/N	£
Syndicated articles	General availability – launch and reminders	N	
Regular updates for publication online (see digital below)	General availability – reminders	N	
Media releases	Local media outlets – raise awareness/launch/reminders	N	
FACE TO FACE/EVENTS			
FTF meetings	MPs, GHW/pharmacy staff, HOSP updates, GHW PPG	N	
GP TARGET	Local GPs	N	
GP commissioning evening	Local GPs	N	
PPG network	Patient representatives	N	
Focus groups	Explore opportunities to follow up on engagement activity conducted	Υ	
	through partner organisations - eg Healthwatch, Salvation Army, PUSH –		
	as trusted, independent voices.		
Drop in events	Run a series across the city – majority focused in Guildhall/city centre	Υ	
	area but also aim for specific University sessions and one at St Mary's		
HOSP meetings		N	
CCG GB meetings		N	
Offers to attend partner meetings		N	
DIGITAL/SOCIAL MEDIA			
CCG website	Focal point for information	N	
PIP	Local GP extranet	N	
PCC Members Information Service	Online service for PCC local councillors	N	
CCG Healthy Discussions Group	Small online patient reference group	N	
PHT/Solent members	Update email	?	
Social media (CCG Twitter account, Urgent Care Pompey		Y (FB	
FB)		boost)	
Partners social media		N	

# 5 Key messages

The CCG will need a set of consistent, clear messages that it will want to promote at the time that the consultation is launched, and as the process continues. These may need to be refined and adapted as the consultation unfolds.

#### Around the process:

- We are consulting on preferred options established following an extensive period of engagement.
- Engagement can make a difference the views of local people have already contributed to the way we have drawn together our preferred options and we would encourage everyone who wants to participate to have their say.
- We need to ensure that people understand the nature of this consultation process that we are consulting on a preferred option and seeking their views on this and providing an opportunity to highlight views on the proposal and share concerns and considerations.

#### Around our vision for urgent care

#### We want to deliver:

- Joined up care. So people get the care they need all of it, not just some without being 'bounced' to other services, or referred elsewhere, unless absolutely necessary.
- Simple choices. To make it easy for people to get the care they need without having to worry about whether they are in the 'right' place or not, and to cut down the times that patients are handed over from one service to another.
- High quality care. Expert staff, backed up by modern equipment and technology, in the best possible premises.
- Specialist expertise. Strengthening A&E and ambulance services so that they have the skills and capacity to give people high-quality, life-saving care when they are in crisis.

### Around the reasons for change:

- The local urgent care system has become confusing. Both nationally and locally there is a recognition that the NHS needs to give people simple, clear choices about where to go for urgent care. In turn, simpler choices can help people to make better choices about where to get care.
- Over the past decade, the city has developed a system of access to primary care which is not equal across the whole population. A relatively small number of people (7,000 registered patients, including a significant percentage of students residing in Portsmouth during term-time only) have

seven-day access to their GP at Guildhall Walk, funded by local NHS funds – those funds do not benefit the rest of the 200,000 registered patients in the city. That said, the service as it stands is highly valued by those who use it, both as a walk-in facility and as registered patients.

• The NHS must spend public money wisely: currently it is paying money to rent space in some locations, such as the Somerstown Hub, and the John Pounds Centre, which is un(der)used. This exercise is not driven by cost saving but there is scope to save some element of expenditure that could then be used in other services.

#### Around the benefits of change:

The preferred option of creating a combined, enhanced walk-in centre at St Mary's Hospital would secure many improvements. We would seek to explain the benefits through the use of four key phrases:

Patient care would be better
Choices would be simpler
Resources would be used more effectively
It helps keep NHS services located on Portsea Island for the long term

### 6 Communications and Engagement Risks

Communications and engagement risks will be identified through the appropriate risk management process for this overall project. A risk analysis is available on request.

### 7 Evaluation of feedback

It will be important to ensure that we can demonstrate that analysis of all feedback received has been conducted independently. Initial discussions have been held with Healthwatch Portsmouth to seek their support with this, either working with them directly or through a third party organisation recommended by them. Further discussions will be undertaken once the format of the consultation document, and its constituent questions, are confirmed.