



Improving Rehabilitation Services for the Elderly in North East Glasgow

We proposed to improve our rehabilitation services for older people in the North East of Glasgow and East Dunbartonshire.

Summary

Our proposal involved transferring services provided in Lightburn Hospital to:

- Glasgow Royal Infirmary
- Stobhill Hospital
- Local care homes
- Community facilities in the East End of Glasgow.

If the services were relocated, it would result in the closure of the Lightburn Hospital site.

We informed and engaged on the proposal from the 1st of September to the 6th of December 2016. We asked patients and members of the public for their comments and feedback on the proposal.

We delivered a substantial engagement programme with local communities. This shaped our proposals and allowed us to hear different views. This programme was delivered jointly with NHSGGC and Glasgow City Health and Social Care Partnership (HSCP).

Throughout the engagement project, we worked with various community groups and organisations. This included engagement with:

- North East Health and Social Care Public Partnership Forum
- Baillieston Tenants Association

Why did we want to make this change?

We developed our proposed changes with our consultants, nurses and allied health professionals.

These clinically driven changes were designed to:

- Locate acute services in our full acute hospitals. This offered onsite access to a range of investigations, services and specialists
- Provide locally accessible inpatient community rehabilitation
- Provide more rehabilitation in people's homes.

Informing and Engaging Public Events

We held two public events on the 2nd of November 2016. We talked to people about our proposal and asked for their views.

The Director of Planning and Policy gave a presentation about the proposal. They outlined how people could help shape our thinking around the options.

Glasgow City HSCP's Head of Operations gave a presentation on community services for older people. They discussed getting older people access to the right service at the right time. This approach allows us to support older peoples' independence, health and well-being.

People were also informed about the HSCP's vision to develop a new health and social care hub.

See a draft summary note of the events.

Informing and Engaging Drop-In Sessions

We held 3 drop-in sessions in Lightburn Hospital to collect feedback from patients, carers and relatives.

We engaged with 25 people at the sessions and heard:

1. Praise for the team at Lightburn and the excellent care they provide. Some people felt concerned this might change if services and staff relocated
2. Lightburn Hospital was easily accessible for many people in the East End. However, this wasn't the same for people who didn't have a car and had to use public transport
3. Positive feedback about the facilities at Stobhill Hospital. However, people were concerned about the limited public transport from the East End to Stobhill Hospital
4. Despite concerns, people understood the clinical reasons behind the proposal. They understood we wanted to improve our care for older people. Some carers liked the idea of having a 'one stop shop' as it could reduce repeat visits for further investigations.

We also advertised the sessions using posters throughout the hospital. The posters included contact details and other ways to provide feedback.

Informing and Engaging Report

We submitted a [report to the NHSGGC Board on the 20th of December 2016](#). The report described how we informed and engaged with patients and the public about the proposal.

The report featured the feedback we heard, and asked the Board to:

1. Note the outcome of the patient and public engagement
2. Consider any issues raised and initial responses
3. Approve moving to formal public consultation.

The Board approved moving to a formal 12-week consultation in early 2017.

Public Consultation Event

We held a public event on the 29th of March 2017 to engage with patients, relatives, carers and interested groups.

There was a presentation, as well as question and answer sessions. We had a series of information stations on different elements of the proposal.

Clinical, managerial and planning staff answered people's questions and collected feedback.

We spoke to 52 people at the event. The [summary note](#) includes some of the feedback we heard.

We also described and answered questions about the new East End Health and Social Care hub that was being developed.

See the [public consultation event presentation](#).

Stakeholder Reference Group

Our Stakeholder Reference Group (SRG) influenced how we engaged with patients and the public about our proposal. It also influenced the consultation plan.

An officer from the Scottish Health Council joined our meetings to provide feedback about them.

Meeting 1

Our first meeting took place on the 20th of September 2016. We presented:

1. Our proposal to improve rehabilitation for the elderly in North Glasgow
2. How we intend to inform and engage with patients and the public.

We welcomed thoughts, questions and ideas from those who attended. They helped us to develop a leaflet and design events to engage with the public.

Meeting 2

Our second meeting took place on the 12th of October 2016. We developed:

1. Content for the proposal's information leaflet
2. Format of the public events

3. We also discussed the work we were doing on travel and accessibility.

After the meeting, some Public Partners visited a ward, day hospital and other facilities at Stobhill Hospital.

Meeting 3

Our third meeting took place on the 17th of November 2016. We reviewed the public events and all the feedback we had received so far.

Public partners were asked to review options to meet the service model principles. They agreed that the options and assessment criteria presented at events and the meeting were fully understood. They also agreed the options and criteria had been looked at satisfactorily against the criteria.

Meeting 4

The fourth meeting took place on the 22nd of December 2016. We worked on:

1. Reviewing the informing and engaging process
2. Agreeing the feedback report was accurate
3. Discussing the approach for the formal public consultation.

We also discussed who needed to undertake an Options Appraisal scoring exercise. Additional Public Partners representing the local area were required to do this. This exercise was planned for early 2017 and helped to develop the preferred options for consultation.

Meeting 5

The fifth meeting took place on the 26th of January 2017. During the meeting, we:

1. Carried out an Options Appraisal exercise about the preferred options for consultation
2. Agreed the draft consultation plan and how it would adapt to feedback and requests
3. Discussed consultation materials and what information we need to share with the public.

The Public Partners stressed that the Summary Consultation Leaflet needed to be short and easy to understand. It needed to highlight where to get information and how to give feedback.

Meeting 6

The sixth meeting took place on the 17th of March 2017. We discussed the consultation materials and information available to the public. The Public Partners were happy with the range of materials and efforts made to publicise them.

The group also discussed:

1. Engagement and communication with staff potentially affected by the proposal
2. Proposed format and content for the upcoming public event.

Meeting 7

The seventh meeting took place on the 26th of April 2017. We reviewed the public consultation event. Participants thought the event worked well, and that people had opportunities to ask questions and provide feedback.

The Public Partners said the consultation programme was extensive and feedback was positive.

We discussed the next steps and how the consultation would be reported to the Board. The Board would make a decision on whether to take the proposal forward later in the year. The outcome would be communicated widely.

Other Engagement Activities

1. Outreach sessions at various local health centres to engage with patients and the public
2. Conducting a public health review of the potential impact of closing Lightburn Hospital.

Update on Engagement

We presented a [report to the NHSGGC Board on the 15th of June 2017](#). This included an outline of the engagement process and the feedback we heard about the proposal.

After careful consideration, the Board decided to take forward the proposal. This meant they would write to the Cabinet Secretary for Health and Sport for approval to carry out the changes.

Additional Resources

1. [Summary Consultation Leaflet](#) – information about what we wanted to change and its effect on patients
2. [Frequently Asked Questions](#) – answers to queries people had or might have had about our proposal
3. [Options Appraisal Process](#) – we used this to develop the preferred options we proposed
4. [Transport issues analysis](#) – we analysed transport issues to address people’s concerns about access
5. Summary [Consultation Document](#) and [Consultation Document](#)
6. Various videos:
 - a. [Explanation of the proposed new model and services](#)
 - b. [Community rehabilitation in Intermediate Care](#)
 - c. [Community rehabilitation in people’s homes](#)
7. [Illustrative diagram and description](#) of the pathway.