



## Report to Healthier Communities & Adult Social Care Scrutiny & Policy Development Committee

16 March 2022

**Report of:** Jackie Mills, Director of Finance, NHS Sheffield CCG

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**Subject:** Primary Care Capital Transformation Project.  
Draft Consultation Plan

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**Author of Report:** Abby Tebbs, Deputy Director of Primary Care and Richard Kennedy,  
Engagement and Equality Manager

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**Summary:**

The report summarises a programme to invest and transform primary care in three areas of the city. This includes the proposal to build 5 new health centres.

The consultation plan is here for committee's comment and approval. Is the plan robust, are there any communities, meetings or methods that could be added to amplify the patient voice?

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**Type of item:** The report author should tick the appropriate box

Reviewing of existing policy	
Informing the development of new policy	
Statutory consultation	X
Performance / budget monitoring report	
Cabinet request for scrutiny	
Full Council request for scrutiny	
Call-in of Cabinet decision	
Briefing paper for the Scrutiny Committee	
Other	

**The Scrutiny Committee is being asked to:**

The committee is asked to consider the report and approve the consultation plan.

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**Category of Report:** OPEN/

## Primary Care Capital Transformation Project Draft Consultation Plan

### 1. Introduction

NHS Sheffield Clinical Commissioning Group (SCCG) has been awarded £37m to transform Sheffield GP practices across the city as part of £57.5m allocated to primary care bids across South Yorkshire. The funding is part of a £1 billion increase to NHS capital spending by the current government (Wave 4B Capital Funding).

Plans were originally developed by GP practices, and SCCG supported them to develop these bids for funding. Following confirmation of the ICS award SCCG has worked with the practices to develop the plans to Strategic Outline Case. The plans include up to 5 new health centres in Sheffield bringing together existing GP practices, other health services, and some voluntary services all under one roof to change the way that healthcare is delivered. They would give practices more modern, flexible spaces to help meet the needs of patients in the 21<sup>st</sup> century and the demands of a growing population. Council services may also have a presence in some of the buildings.

The health centres are planned for 3 areas in the city.

- One centre in the City Centre
- Up to two centres in SAPA5 Primary Care Network
- Up to two centres in Foundry Primary Care Network

These areas were chosen as they have not benefited from previous funding for GP buildings, so many practice sites are in converted properties or otherwise need modernisation.

More than 100,000 Sheffield residents could benefit from the developments which would support us to tackle health inequalities in the City so it is important that we work with local communities in planning the hubs to meet their specific community's needs.

The funding will also be used to improve and make more space in some existing GP practices. This will create modern and flexible spaces offering a range of services to patients, joining up local services and improving the use of digital technology in primary care.

The development of the health centres is not yet determined, and involvement and consultation activity with local people and stakeholders is essential to ensure that informed decisions are made on this programme. The option to retain the status quo and not build the hubs or move GPs practices into them will form part of the consultation, however, the funding will be lost if the plans do not go ahead.

The funding comes with strict national requirements, including a deadline of December 2023 for completion of all funded developments and a strict business case development and approval process set by HM Treasury. While the national timetable for approving the programme has slipped these requirements and deadlines have not changed. This, together with the COVID-19 pandemic, has meant that we have been unable to involve patients and the public in our plans from the beginning, as we would have preferred and that we now have very tight timelines for involvement and consultation.

## 2. Overview of Plans

The plans for the capital funding of £37m in Sheffield cover three areas:

- a) transformational hubs - exploring the potential to build up to five new health centres in three areas of the city;
- b) Redeveloping void space in existing LIFT buildings in Sheffield to bring it back into use for the benefit of the local community;
- c) Refurbishment of existing premises occupied by a number of practices across the city

This consultation plan focuses on the transformational hubs or health centres.

As described above, a number of practices in three networks in the centre and north of the city have contributed to the current proposals. These practices have shown a potential interest in developing and pursuing these plans further with their patients and the CCG. The number of registered patients indicated below includes individuals who access main and branch sites out of these areas.

At present no commitment is required from any practice as part of the development of these projects. The practices are being supported by the CCG to understand the effect that participating in one of the health centre developments could have on both the practice and their registered patients. There are a number of factors that each practice will need to take into account before they give final commitment in the autumn to progressing the scheme the factors will be different for each practice.

Health Centre	Max. Number of patients	Potential locations
Foundry hub 1	24,560	<ul style="list-style-type: none"><li>• Sheffield Medical Centre</li><li>• Catherine Road</li></ul>
Foundry hub 2	19,988	<ul style="list-style-type: none"><li>• Rushby Street</li></ul>
SAPA 5 hub 1	30,655	<ul style="list-style-type: none"><li>• Concord Sports Centre</li></ul>
SAPA 5 hub 2	23,551	<ul style="list-style-type: none"><li>• Buchanan Road / Wordsworth Avenue</li></ul>
City hub	22,547	<ul style="list-style-type: none"><li>• Star House, Carver Street</li></ul>

This consultation will be delivered by NHS Sheffield CCG, working with practices and primary care networks (known as PCNs).

## 3. Constraints on the programme

### 3.1. Funding

As outlined above, to be successful in receiving this funding we must meet the strict conditions for this programme has strict national conditions attached to it for it to be used.

- The funding has to be used for the purposes laid out in the initial bid only. In this case, that means that only these health centres can be built using this funding, we can't use the money to build in other areas, and if it is not used it will have to be returned to the Treasury.

- The buildings have to be in public ownership. NHS Sheffield CCG has been working with Sheffield City Council to identify suitable council owned locations.
- The buildings need to be completed by December 2023. This is a tight deadline, but achievable.

### **3.2. Timetable**

As described above, official approval of this funding from the government has been significantly delayed. Despite this delay in approval, the original deadline for completion has remained at December 2023. The process of developing the sites and building the health centres is estimated to take over 12 months, so the instruction to develop would have to be made by November 2022.

This has placed considerable constraints on the timetable to progress the programme including engagement and consultation activity. This has resulted in the planned consultation having a duration of 10 weeks. National approval to make the plans public has not yet been received, however the CCG has agreed with the NHS England regional team that it is essential to begin public involvement immediately.

Although there is no set time for the duration of a consultation, it is often suggested that this should be 12 weeks. This reduced timescale for consultation will be mitigated by a thorough pre-consultation engagement phase that will inform the programme's business case prior to formal consultation.

Despite the restraints, SCCG is committed to running a fair and open consultation process that meets the Gunning Principles of good consultation:

- Proposals are still at a formative stage
- There is sufficient information to give 'intelligent consideration'
- There is adequate time for consideration and response
- 'Conscientious consideration' is given to the consultation responses before a decision is made

### **3.3. Changes to NHS organisations and other structures**

Due to the time required to plan a programme of this scale, the plans have already passed through different iterations of NHS structures. These original plans were born from neighbourhoods and since passed to primary care networks.

NHS Sheffield CCG has supported GP practices and primary care networks to develop these plans for funding approval. From July 2022 however, NHS Sheffield CCG is due to be abolished. Its functions as the NHS organisation responsible for commissioning primary care in Sheffield will transfer to the South Yorkshire Integrated Care Board. As all statutory duties will remain with South Yorkshire Integrated Care Board, comparable internal committees overseeing assurance and decision making will be in place for the programme come July.

Similarly, the changes to how the overview and scrutiny function of health services is undertaken by Sheffield City Council is due to change. NHS Sheffield CCG is committed to continuing a dialogue with the new committee that supersedes it on this programme.

## **4. Proposals**

Sheffield CCG is working in partnership with the city council to develop the business cases for these projects. In order to meet the requirements the buildings developed under this scheme remain in public ownership it is proposed that the city council owns the buildings once completed. This offers a number of additional advantages, such as opportunities to co-locate and integrate social care and other council services with health and voluntary sector provision at locations that are accessible to local people. However, this partnership approach means that site selection has

been limited in most cases to sites already within council ownership. Extensive work has taken place to identify suitable and viable locations with good public transport routes. This has involved narrowing down 37 sites to 6 potential locations. The reasons why other sites have not been suitable have included:

- Not being big enough to build a health centre on
- Being in the wrong location, and not accessible for communities
- Not being available, or being planned for other developments

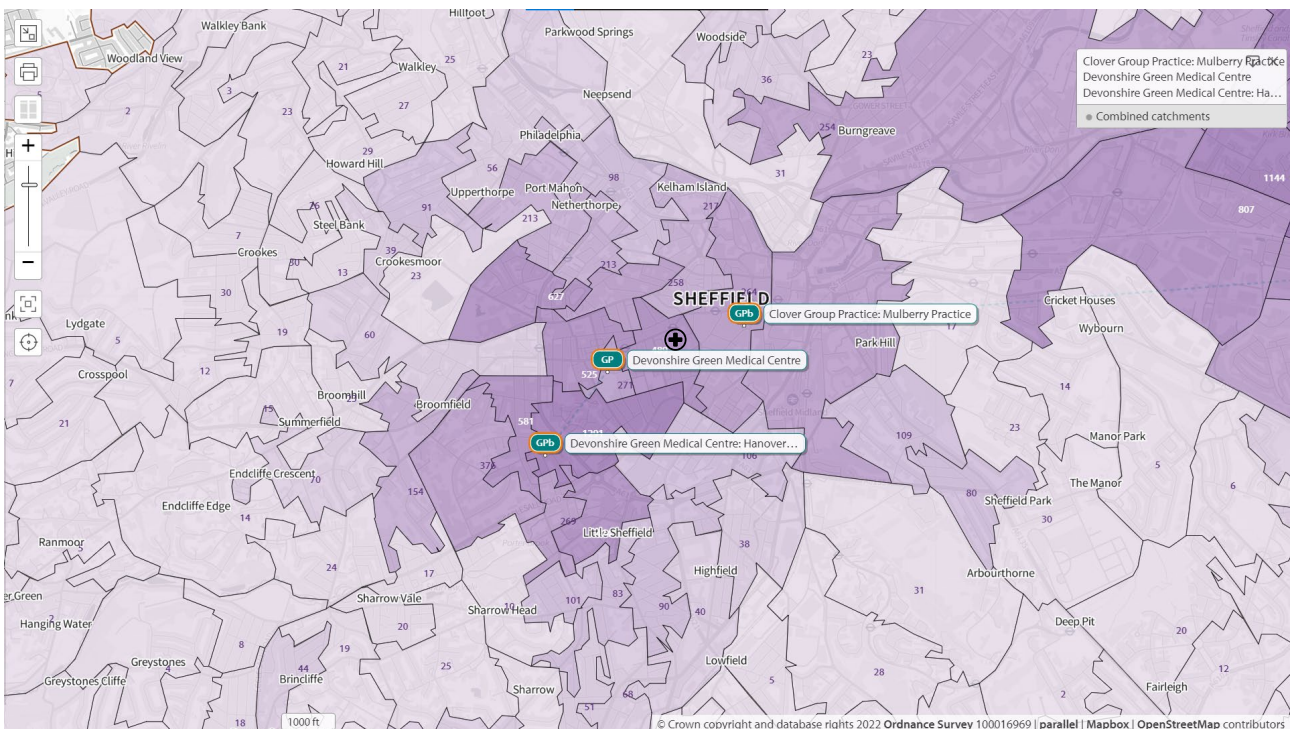
#### 4.1. City Hub

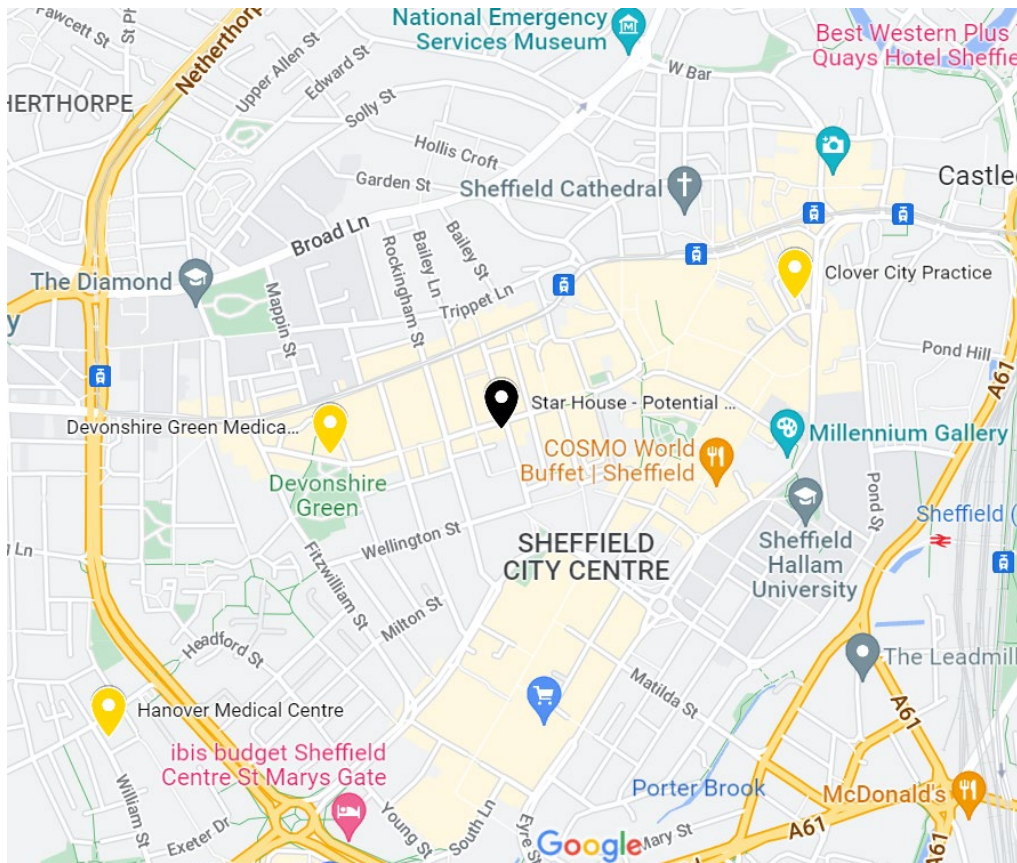
The following practices have shown an interest in possibly pursuing these plans further with their patients and the CCG.

- Devonshire Green Medical Centre
- Clover City Practice
- The Mulberry Practice
- Hanover Medical Centre (branch of Devonshire Green Medical Centre)

The following map shows the distribution of where registered patients of these practices live. The large area of patients to the top right of this map is most likely to be patients registered at Darnall Health Centre, an additional site of Clover Group Practice. Unfortunately, it is not possible to differentiate patients at branch sites from main sites.

The location of the site being considered for a new GP health centre in this area is at Star House, Carver Street. This has been marked on the maps below.





#### 4.2. Foundry Hub 1

The following practices have shown an interest in pursuing these plans further with their patients and the CCG.

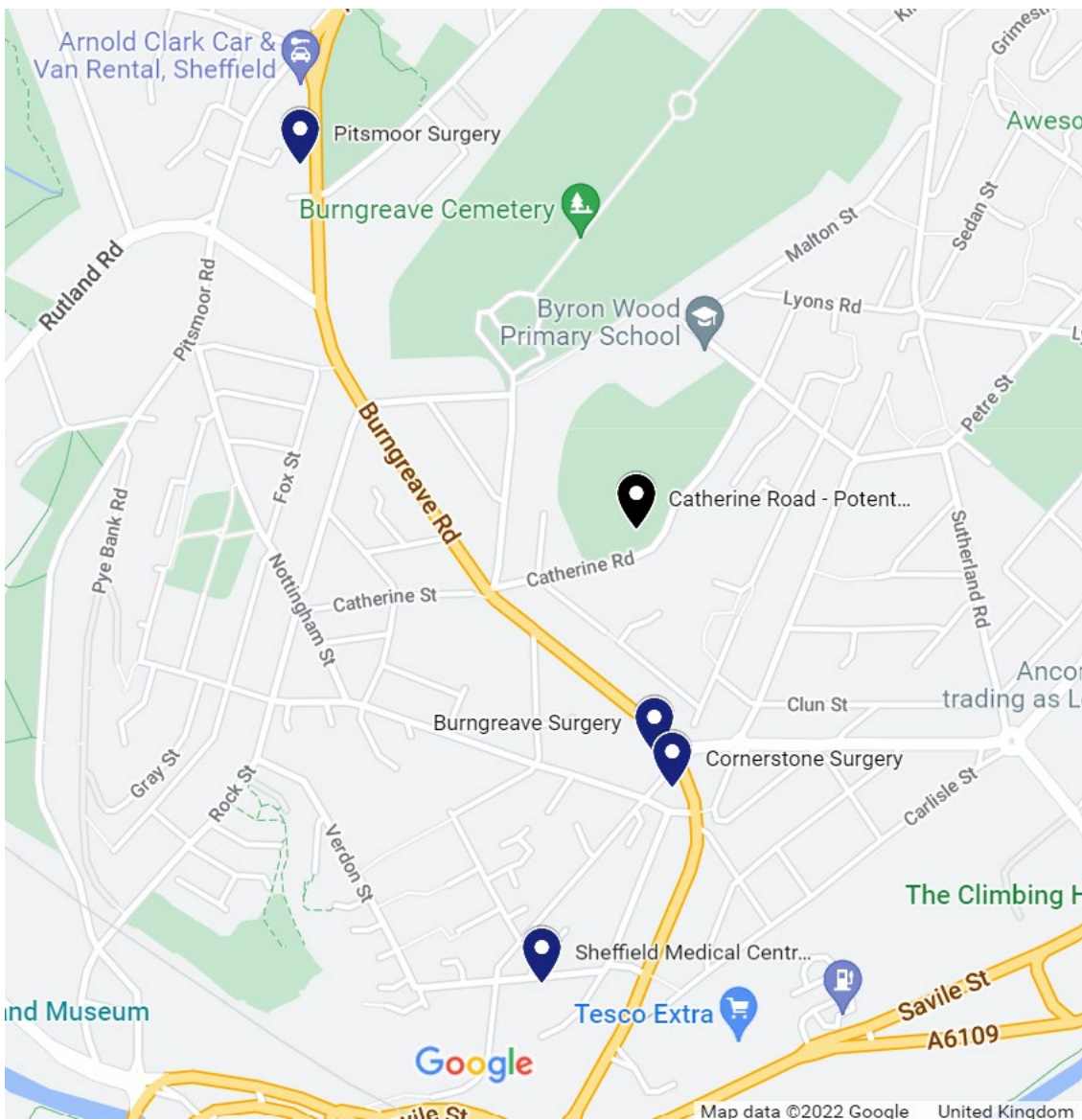
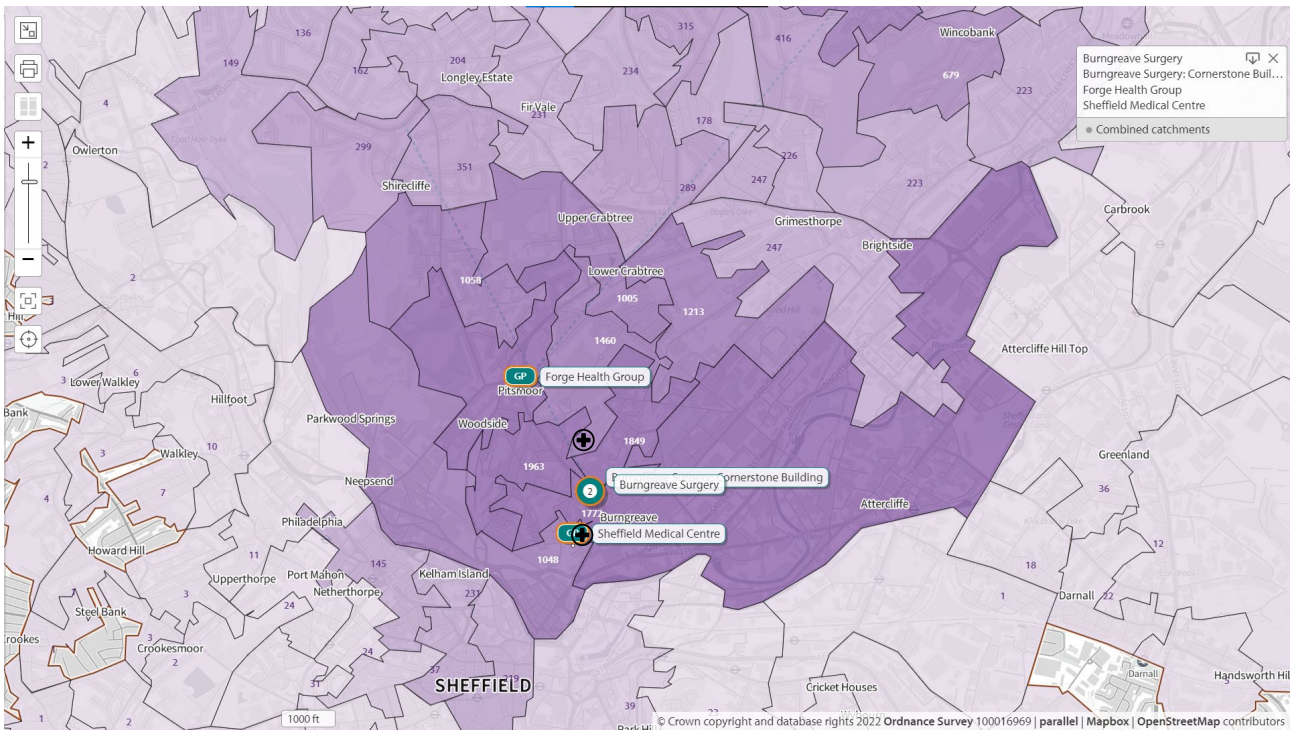
- Pitsmoor Surgery
- Burngreave Surgery
- Cornerstone Surgery (branch site of Burngreave Surgery)
- Sheffield Medical Centre

The following map shows the distribution of where registered patients of these practices live. The large area of patients around Wincobank on this map is most likely to be patients registered at Flowers Health Centre, the main site of Pitsmoor Surgery. Unfortunately it is not possible to differentiate patients at branch sites.

The locations of the site being considered for a new GP Health Centre in this area are at:

- Sheffield Medical Centre
- Catherine Road

These has been marked on the maps below.

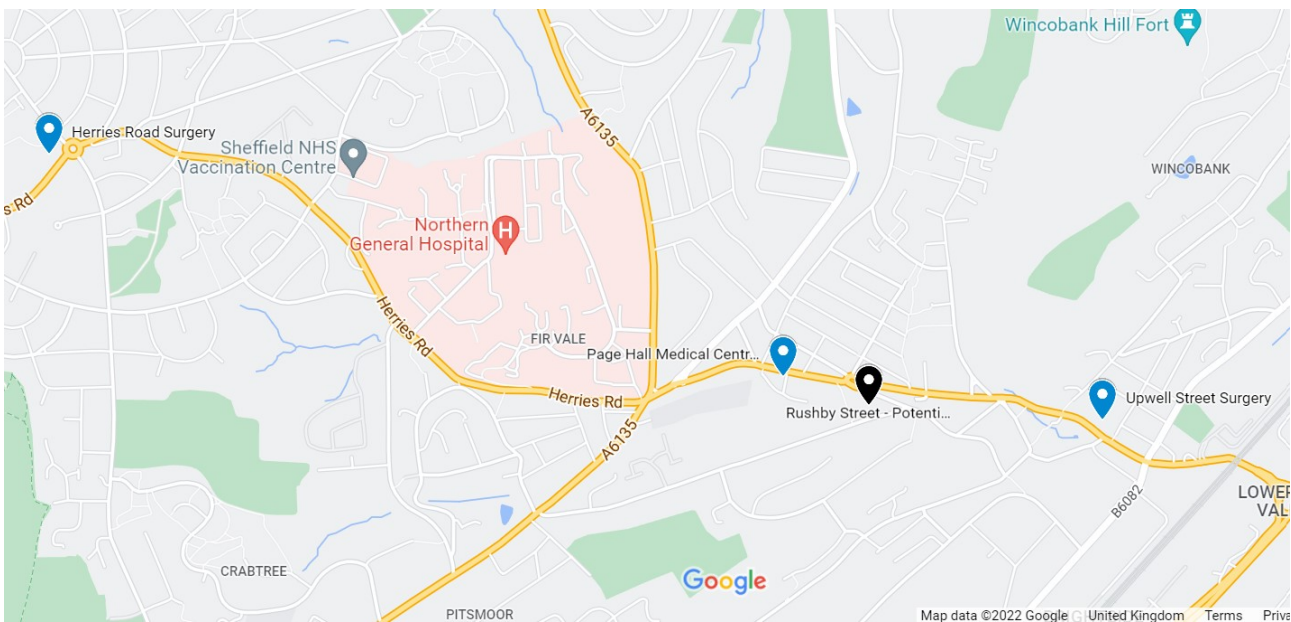
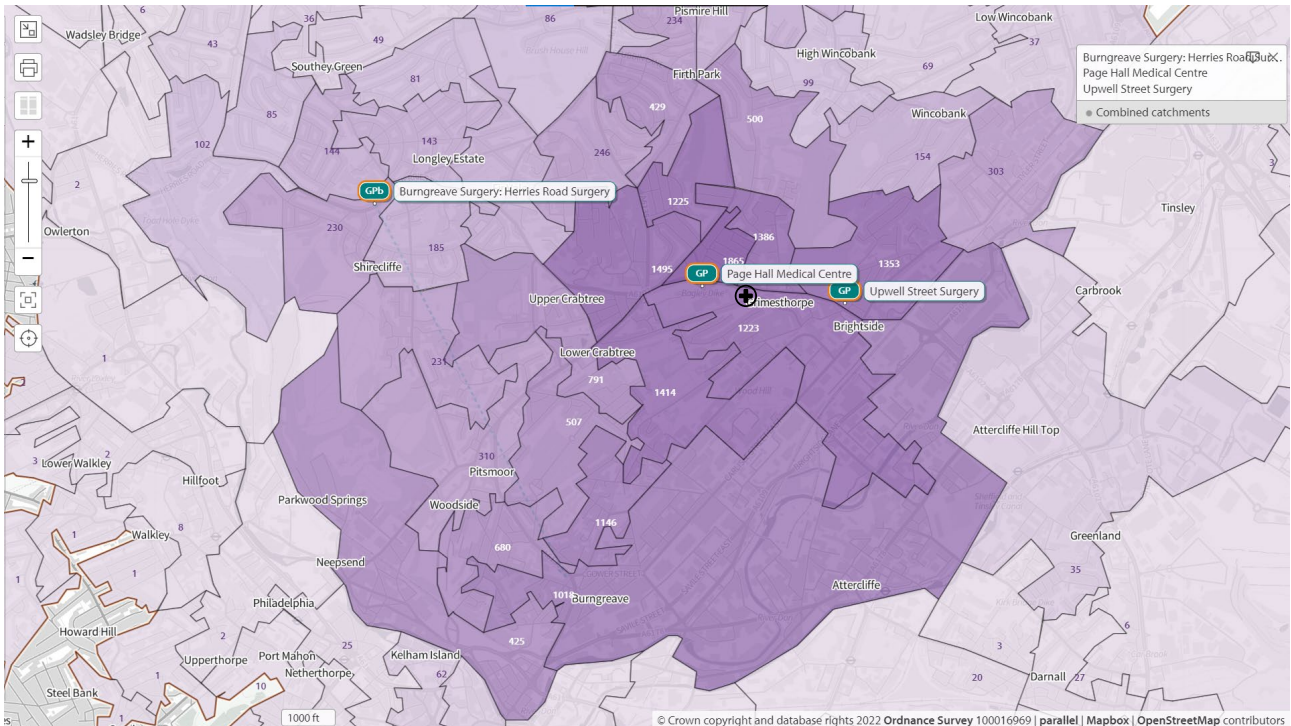


### 4.3. Foundry Hub 2

The following practices have shown an interest in pursuing these plans further with their patients and the CCG.

- Herries Road Surgery (branch site of Burngreave Surgery)
- Page Hall Medical Centre
- Upwell Street Surgery

The following map shows the distribution of where registered patients of these practices live. The location of the site being considered for a new GP health centre in this area is at Rushby Street. This has been marked on the maps below.





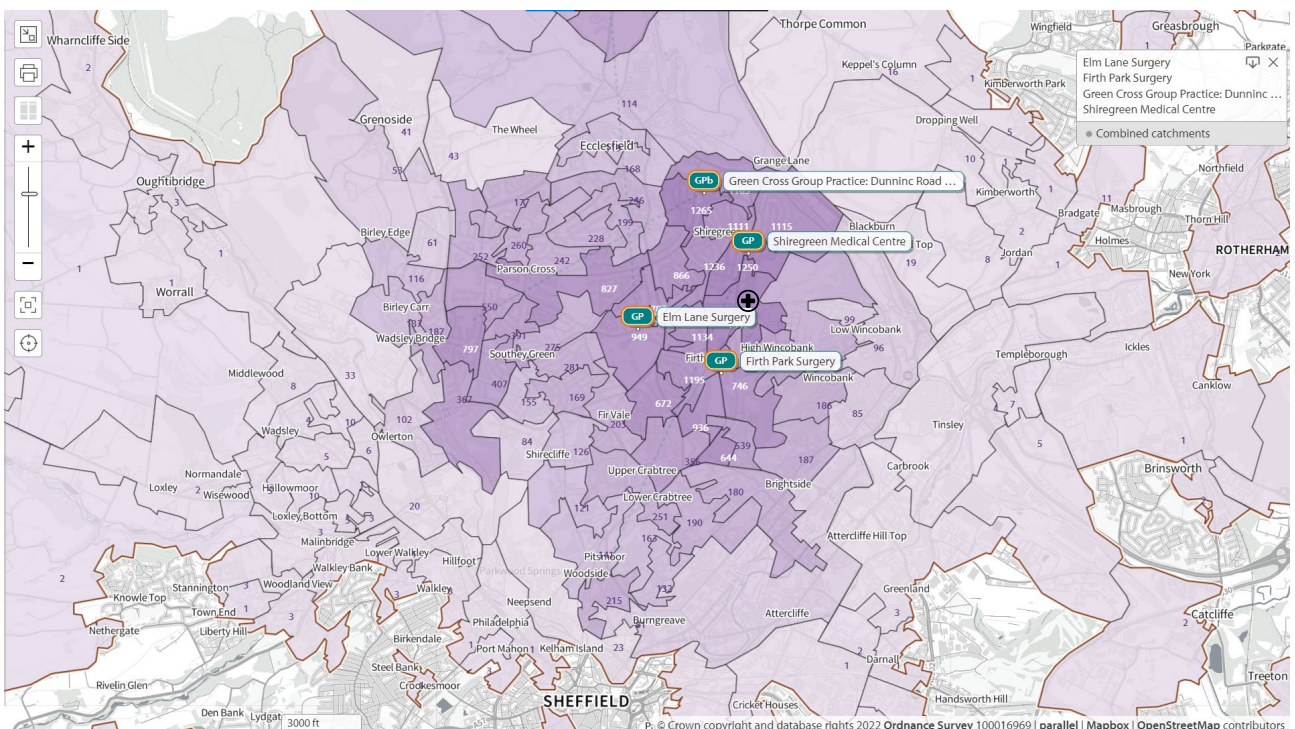
#### 4.4. SAPA Hub 1

The following practices have shown an interest in pursuing these plans further with their patients and the CCG.

- Shiregreen Medical Centre
- Elm Lane Surgery
- Firth Park Surgery
- Dunninc Road Surgery

The following map shows the distribution of where registered patients of these practices live. The large area of patients in the Southey Green area of this map is most likely to be patients registered at The Health Care Centre, the main site of Dunninc Road Surgery. Unfortunately, it is not possible to differentiate patients at branch sites.

The location of the site being considered for a new GP Health Centre in this area is at Concord Sports Centre. This has been marked on the maps below.





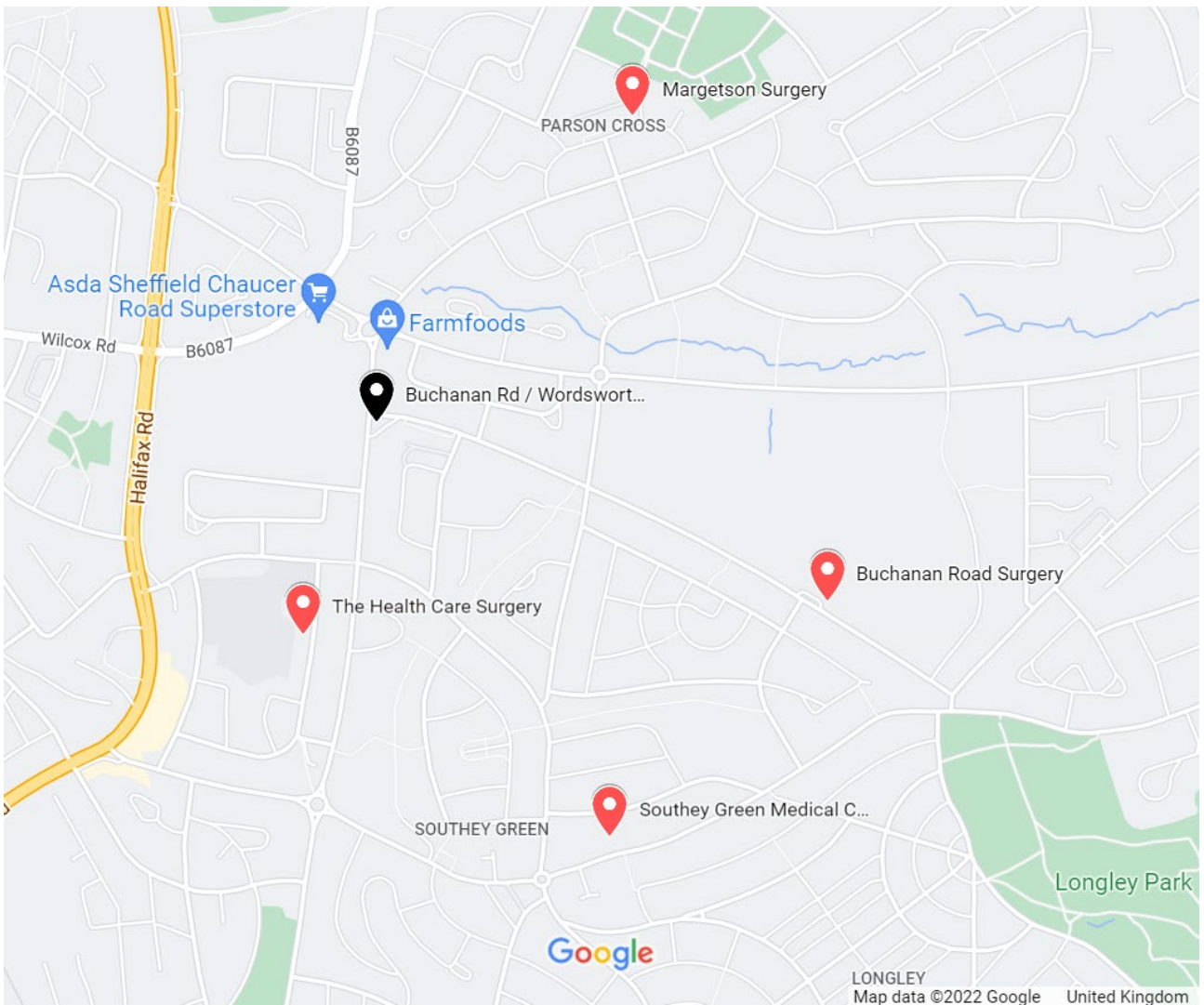
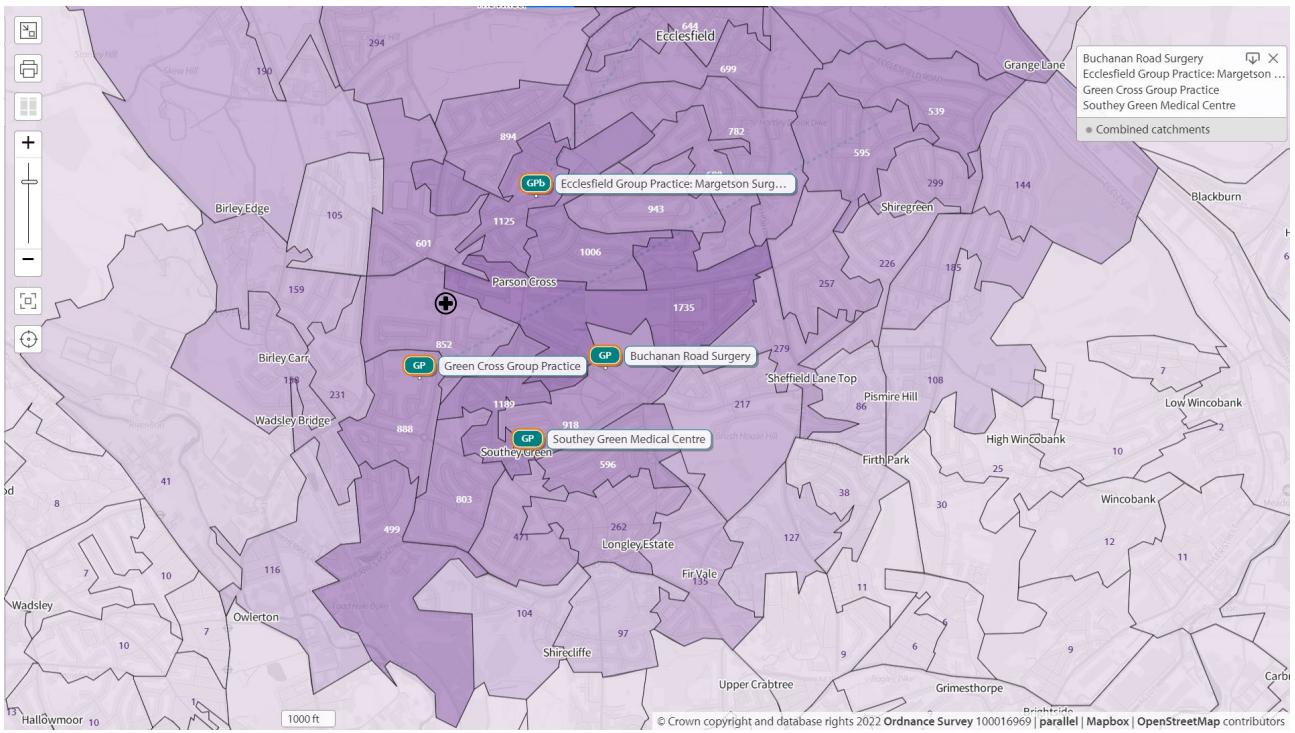
#### 4.5. SAPA Hub 2

The following practices have shown an interest in pursuing these plans further with their patients and the CCG.

- The Health Care Surgery
- Buchanan Road Surgery
- Southey Green Medical Centre
- Melrose Surgery (branch site of Shiregreen Medical Centre)
- Margetson Surgery (branch site of Ecclesfield Group Practice)

The following map shows the distribution of where registered patients of these practices live. The large area of patients around and above Ecclesfield on this map are most likely to be patients registered at Ecclesfield Group Practice, the main site of Margertson Surgery. Unfortunately, it is not possible to differentiate patients at branch sites.

The location of the site being considered for a new GP Health Centre in this area is at Buchanan Road / Wordsworth Avenue. This has been marked on the maps below.



## 5. Aims and objectives

The consultation aims to ensure the public voice is heard, shapes the final plans, and provides sufficient insight into the impact the plans may have on local people and patients. This will be achieved through the following:

- Building trust with clear, regular, and accessible communications with the public.
- Being open and clear about the reasons, scope, and limitations of the involvement activity from the start.
- Overcoming barriers to engagement
- Maintaining governance arrangements through the CCG's Strategic Patient Involvement, Experience, and Equality Committee to ensure all involvement activity is appropriate, proportionate, and meets statutory duties. This is a sub-committee of our governing body.
- Working with primary care networks and local area committees to reach communities, avoiding duplication and overloading the public.
- Supporting local VCSE organisations by identifying funding and having early conversations with them to allow them to plan their workload effectively.
- Putting resources into involving people with the greatest health needs and those in the poorest health.
- Recognising and utilising the unique skills and experience of the public within the project e.g. involving the public in accessibility and transport audits of premises or designs.
- Using accessible formats, translations and a range of activities to ensure equality of opportunity.
- Building long term, sustainable links with communities to maintain a dialogue beyond the project.
- Raising awareness of investment in Sheffield
- Raising awareness of why current services need to transform
- Ensuring balanced media coverage and reducing the likelihood of adverse publicity
- Ensuring that practices, VCS, and key stakeholders are briefed before any media
- Encouraging key stakeholders and practices to publicly support the programme
- Produce versions of the main involvement document into a minimum of six main community languages.
- Meeting legal duties on involvement and equality for CCG and practices
- Deliver activity within the agreed budget.

## 6. Background on hub areas

The 3 PCNs identified for the new hubs include:

- City - Broomhall / Hanover / City centre areas
- SAPA - Shiregreen / Firth Park / Parson Cross areas
- Foundry - Fir Vale / Burngreave / Wincobank / Pitsmoor areas

Using numerous sources of insight and information, the following overviews of the affected areas have been produced.

Sources of information used include:

- Insight from the Primary Care Capital Estates Communications and Engagement workstream
- Sheffield City Council Community Knowledge Profiles - <https://www.sheffield.gov.uk/home/your-city-council/community-knowledge-profiles>
- Sheffield City Council Ward Profiles - <https://www.sheffield.gov.uk/home/your-city-council/ward-profiles>
- NHS Sheffield CCG Equality Profiles - <https://www.sheffieldccg.nhs.uk/equality-profiles.htm>
- Acorn profiles

- NHS Digital GP Practice Data Hub - <https://digital.nhs.uk/data-and-information/data-tools-and-services/data-services/general-practice-data-hub>
- Shape Atlas - <https://shapeatlas.net/>

A summary of each of these areas can be seen below.

### 6.1. City

Communities: White English, Indian, Bengali, Pakistani, Chinese, Roma, carers, new arrivals (asylum seekers, refugees), students, young people, homeless, isolated people living on own

Languages: English, Punjabi, Urdu, Hindi, Arabic, Romanian, Slovak, Chinese

The top 5 Acorn type descriptions for this PCN are:

Acorn type description	%
Educated young people in flats and tenements	24.3
Student flats and halls of residence	17.9
Deprived areas and high-rise flats	10.8
Term-time terraces	6.5
First time buyers in small, modern homes	5.5

Issues raised for area:

- Consider how to reach those with no GP practice – students/asylum seekers/refugees
- Consider how to reach seldom heard groups such as the homeless community
- Mulberry Practice specialises in new arrivals to the city and treats people in a personalised and holistic way. Integrating new arrivals and mainstream patients within the same building should be considered to prevent conflict.

### 6.2. Foundry

Communities: White English, Pakistani, Roma, Slovak, Somali, Yemeni, new arrivals (asylum seekers, refugees).

Languages: English, Arabic, Roma Slovak, Urdu

The top 5 Acorn type descriptions for this PCN are:

Acorn type description	%
Poorer families, many children, terraced housing	10.2
Deprived areas and high-rise flats	10.1
High occupancy terraces, culturally diverse family areas	9.2
Young people in small, low cost terraces	8.8
Suburban semis, conventional attitudes	8.6

Issues raised for area/important to note:

- PCN with the highest percentage of patients from an ethnic minority background.
- GPs embedded in communities/neighbourhoods and practices all within walking distance.
- Majority of people don't leave their areas and don't use public transport – practices are on the doorstep/convenient.
- Deprived areas with teen pregnancies/young families/ people don't navigate the system well.
- Need comms on the bigger picture although often these communities don't like change.
- Roma Slovak community are not as familiar with the use of relative time formats such as quarter past, half past. These should be avoided in favour of a digital clock format.
- Some communities don't read in their spoken language.  
Issue of digital exclusion – social media/web/digital can't be accessed.

### 6.3. SAPA

Communities: White English, small dispersed BAME communities

Languages: English

The top 5 Acorn type descriptions for this PCN are:

Acorn type description	%
Singles and young families, some receiving benefits	25.7
Poorer families, many children, terraced housing	17.3
Low income large families in social rented semis	11.2
Post-war estates, limited means	9.8
Low income older people in smaller semis	9.4

Issues raised for area:

- High working age population.
- Less densely populated area.
- Residents often shop out of area, so going beyond boundaries of PCN is advised.
- Large Methodist Church following

### 7. Overall potential issues

As well as the potential issues by each hub area, we believe the following could also be potential issues overall:

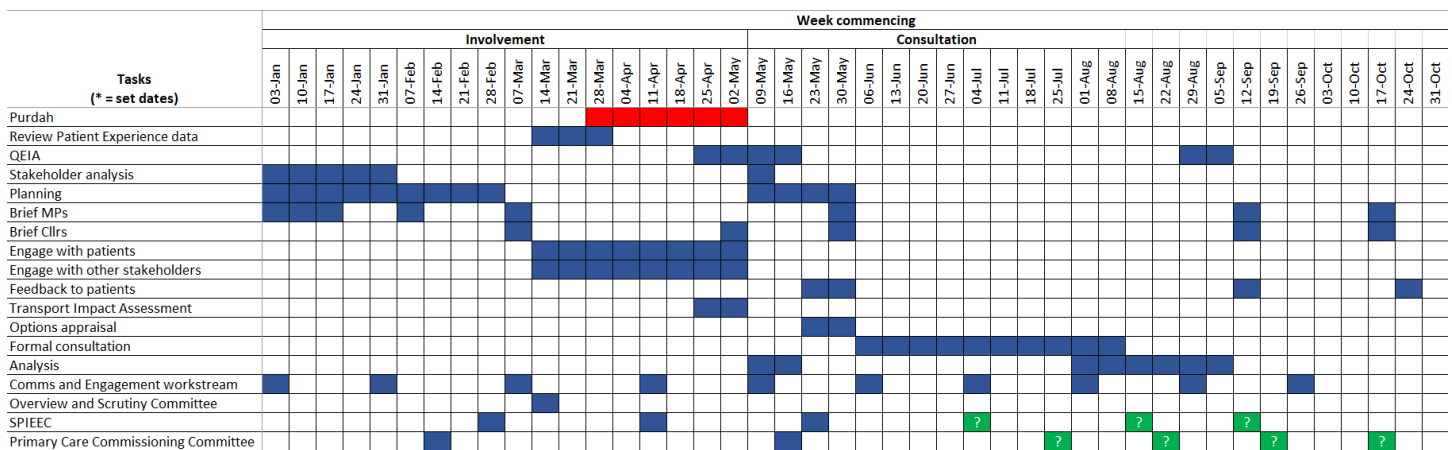
- Language barriers
- Cultural differences
- To avoid conflicts of interest and to retain trust within communities, community organisations will be asked to act as a critical friend and a conduit to reaching communities, not as agents for the proposals
- Communities would prefer to hear from their practice directly, rather than through the media or CCG
- GP practices are already under considerable resource strain. Every effort should be made to ensure that this activity does not impact on the resource to deliver patient care
- The announcement of these plans could result in patients choosing to move practices
- We need to be consistent – communities talk so they all should all be informed at the same time

### 8. Timeframe

The engagement of this Programme will be split into 3 phases.

- Pre-consultation engagement – 14 March 2022 to 5 June 2022
- Consultation – 6 June 2022 to 17 October 2022
- Post-consultation – 18 October 2022 and continues until after health centres have been built and practices relocate

The timeline below shows the planned engagement and consultation activity for the Programme. The green blocks are dates that have not yet been confirmed due to changing structures, but follow the frequencies of current meetings.



The milestones from the timeline above are shown in the table below.

Milestone	Date
Consultation start	6 June 2022
Consultation end	14 August 2022
Consultation report considered	19 September 2022
Consultation report shared with Overview and Scrutiny	19 September 2022
Final decision	17 October 2022
Contracts signed	November 2022
Development starts	November 2022
Completion of sites	December 2023

## 9. Phase 1 – Pre-consultation engagement

### 9.1. Communications and engagement workstream

A workstream of the programme was set up in January 2022 to oversee stakeholder communications, public involvement and consultation plans, and to raise awareness of the programme ensuring the public voice is heard in the planning and development of business cases and plans.

It brings together people from the CCG, primary care networks, practices, voluntary and community sector, and Healthwatch Sheffield with the purpose to oversee the communications and engagement of this programme.

The workstream has been instrumental in helping to design engagement and consultation activity, including this consultation plan. It will continue to support the programme until the completion of the consultation analysis.

### 9.2. Engagement activity

Pre-consultation engagement activity commenced on 14 March 2022 running through to 8 May 2022. This has involved starting the conversation with the public and stakeholders, gathering insights on identified viable locations, and finding out what the most important factors are about primary care provision in each area. There is also an opportunity for people to share their contact details so they can be directly informed about future ways of being involved in the programme.

A pre-election period between 28 March and 6 May 2022 will be observed before local elections. This will restrict how NHS Sheffield CCG can communicate with the public during these times, but feedback will continue to be received during this time.

Activity includes:

- Text message or letter to all patients dependent on communication preference
- Online and paper survey
- Dedicated webpage to the programme including FAQs to respond to common enquiries and concerns
- Existing community group activities
- Community organisations' staff and volunteers are asking for feedback
- Posters for GP practices, pharmacies, community venues
- Videos created by community organisations and key community influencers (Imams, GPs, other community leaders)
- WhatsApp groups - Using community groups existing groups to share messages / survey link / videos
- Community radio stations – e.g. Link FM
- Social media – CCG, council, practices and community groups

The engagement survey can be found in the appendices of this plan.

The findings from this activity will be analysed and will help inform the pre-consultation business case. There will be opportunities in May for members of the public to be directly involved in the options appraisal. People who have shared their details, along with practice patient group (known as PPGs) members and individuals identified by community organisations will be invited to be a part of this work.

### **9.3. Strategic Patient Involvement, Experience and Equality Committee**

NHS Sheffield CCG's Strategic Patient Involvement, Experience and Equality Committee (known as SPIEEC) has delegated responsibility from governing body for approval of the arrangements for discharging the CCG's statutory duties relating to public involvement and consultation and equality, specifically to:

- Gain assurance that public involvement, patient experience and equality, diversity and inclusion activity is being carried out in line with statutory requirements and to a high standard by the CCG
- Gain assurance that information from this activity is used appropriately to influence commissioning
- Oversee equalities, involvement and experience, not covered by QAC assure work in these areas is effectively joined up with partners

On 1 March 2022, SPIEEC assured a communications and engagement plan for the programme. SPIEEC will continue to receive updates and provide assurance throughout the programme.

### **10. Phase 2 - Consultation**

A consultation will be carried out with affected patients and communities into the impact that any proposals would have, including the impact of retaining the status quo. Due to time restrictions with the pre-election period and the time required to build the sites, the consultation period will be 10 weeks. The impacts of this reduced period have been negated by the inclusion of a robust pre-consultation engagement period and targeted community approach.

Appropriate timescales for consideration and approval have been built into the timeline to ensure that CCG's primary care commissioning committee or successor ICB committee have sufficient time to scrutinise the feedback received from the consultation before a decision being made.

The findings of the consultation will be shared with the successor committee of Healthier Communities and Adult Social Care Scrutiny and Policy Development Committee so they can make a formal response knowing the views of the public and patients.



### **10.1. Communications channels**

To ensure a robust consultation, we want it to be far reaching, so have a comprehensive communications plan to ensure those potentially affected and those interested know about the plans and have an opportunity to be heard.

The methods we will use will differ for audiences. We will use a blanket approach for everyone and a targeted approach for key stakeholders and seldom heard communities.

Channels include:

- Through community organisations – trained volunteers asking for feedback
- Face to face drop-ins in community venues and groups (e.g. Local community orgs/venues)
- Text messages from GP practices to all patients who have a telephone number registered
- Letters from GP Practices for those without mobiles
- Posters in GP practices, pharmacies, community venues
- Videos created by community organisations and key community influencers (Imams, GPs, other community leaders)
- WhatsApp groups - Using community groups existing groups to share messages / survey link / videos
- Community radio stations – e.g. Link FM
- Community newsletters
- Dedicated webpage to the programme including all documents and FAQs to respond to common enquiries and concerns
- Social media – CCG, council, practices and community groups
- Broadcast and print media
- Local area committees
- Advertisements in local areas

### **10.2. Documents and materials**

To ensure that people can make a considered response to the consultation, they must have access to all the relevant information. NHS Sheffield CCG is committed to being transparent throughout the process and will publish the following documents on the CCG website.

The business case will include information on the case for change, options appraisal, financial information, how the public have been involved have been involved and shaped the options, and details of equality impact assessments.

- Pre-consultation business case
- Quality and equality impact assessments for each site

The CCG will produce a summary of the business case which clearly and simply tells the story of why the plans are being proposed, the advantages and disadvantages, and how we arrived at the final options for consultation. This document will also explain how people can have their say and how and when a decision will be made by the ICB.

This will be translated into key community languages, including BSL, and also Easy Read.

### **10.3. Methods for feedback**

#### **10.3.1. Survey**

An online survey will be the key method for collating responses. The survey will be translated into the main community languages as well as Easy Read.

A weblink for the survey will be sent via a text message from GP practices to their patients. This has proven to be an effective method of reaching a wide range of patients and achieving a high return of responses.

Paper copies will also be made available within GP practices and for community organisations. These will be entered into the same dataset as the online survey to ensure all information is recorded.

All surveys will include equality monitoring questions so responses can be monitored by protected characteristics. This will ensure that:

- We monitor which groups are responding and be responsive with our activity to ensure we gain insight from all groups. If we aren't hearing from certain communities, we will review what we have done and put resources into reaching them
- We understand the differences in views from different groups

A copy of the consultation survey will be shared with MPs and councillors prior to the commencement of the consultation for information once signed off.

### 10.3.2. Community conversations

Community organisations are being funded to support the distribution of messages and gain feedback from communities to ensure people with the greatest health needs and underrepresented voices are heard.

Three main community organisations have been funded for the duration of the programme. They are SOAR (SAPA), Firvale Community Hub (Foundry) and Shipshape (City).

Further community organisations will be funded as part of the consultation to ensure a wider reach. These are likely to include.

City hub	Foundry hubs	SAPA hubs	City wide
Shipshape	Fir Vale Community Hub	SOAR	Disability Sheffield
Refugee Council	ACT	Flower Estate Family Action	ISRAAC
Unity Gym	Reach Up Youth	Binstead TARA	SADACCA
Cathedral Archer Project	Brushes TARA		Mencap
Ben's Centre	Burngreave TARA		
Lansdowne TARA	Lower Wincobank TARA		

The methods used by the community organisations will be tailored to the needs of the communities, they will use their knowledge and expertise of working in these organisations to create culturally appropriate tools to reach as many people as possible.

### 10.3.3. Independent telephone and face to face survey

During the consultation phase, an independent social research company will be commissioned to gain a representative sample of 1,000 people per hub via a telephone and face to face survey.

This will provide a 95% confidence level with approximately a 3% margin error. This is a robust sample size and means if 70% of respondents said they agreed with a statement, we could be confident in 95% of cases that if we asked everyone in the population, as opposed to a sample, that between 68% and 73% of them would agree.

#### **10.3.4. Public meetings**

The importance of a two way dialogue between the public and representatives of the programme is recognised. There will be a minimum of two public meetings per hub, held in a community venue, and publicised at least 3 weeks in advance. Representatives from GP practices and CCG will attend to give an overview of the plan and answer questions.

Interpreters will be available at the meetings.

There will also be Programme representation at relevant Local Area Committees to give briefings, invite questions and comments, and signpost people to the survey. This will give another opportunity for a two way dialogue.

#### **10.3.5. Other methods of feedback**

The survey will be encouraged as the main route for feedback due to the ability to equality monitor and gain comparable data, however, it is recognised that some individuals may not be able to feedback in this way, therefore other methods will be available and promoted including:

- Freepost postal address
- Email address
- Conversation with community organisations

Any petitions will be received and reflected on, but these have limited value in understanding impact on communities, so other methods will be encouraged to the originators of these petitions.

#### **10.3.6. MPs and Councillors**

The support of MPs and councillors of affected areas within the consultation process is essential to ensuring that there is a strong public voice within the decision making of this Programme. Full briefings will be made to them throughout the consultation process, and their individual responses will be welcomed and included as part of the overall analysis.

The voice of the Healthier Communities and Adult Social Care Scrutiny and Policy Development Committee and its successor committee will be considered as a separate body, distinct from its individual councillor membership, as part of the consultation.

### **11. Analysis**

An independent analysis will be commissioned by NHS Sheffield CCG to ensure an unbiased interpretation of the responses. The analysis will be based on responses gathered across all methods and will include an equality analysis by protected characteristic. An individual report will be produced for each health centre to ensure that they can be considered in their own right and influence each project separately.

### **12. Governance**

Following the completion of the consultation, a report will be provided to the committee with responsibility for approval of the arrangements for discharging statutory duties relating to public involvement, consultation and equality. This will detail the activity undertaken alongside the independent analysis.

If assurance is given, the consultation report including the independent analysis will then be provided to the primary care commissioning committee of South Yorkshire Integrated Care Board for their consideration on week commencing 19 September 2022. All responses will also be available to the committee to read and review before they make their decision. A period of one month will then be given to members of the committee to carefully consider the insight from these documents prior to a final decision being made.

A final business case will be presented to the primary care commissioning committee of South Yorkshire Integrated Care Board for their decision on week commencing 17 October 2022. This meeting will be held in public.

### **13. Phase 3 – Post-consultation**

If proposals are approved, arrangements will be made to continue informing and involving patients and communities about the development. The purpose of this continued involvement is to help connect communities with the new buildings. Efforts should be made to build upon these relationships to develop an ongoing relationship between practices and communities. There are expected to be opportunities to be involved in the following areas:

- Design and accessibility of the building
- Community project to name buildings
- Community project through schools and community groups for artwork for buildings

### **14. Audiences**

A list of all stakeholders can be seen below.

Some of the stakeholders by nature of their levels of interest and potential influence will be communicated and/or involved more than others. Below lists all the stakeholders we will communicate with and involve.

(\*key stakeholders)

#### **14.1. External**

##### **14.1.1. Citywide**

- Healthier Communities and Adult Social Care Scrutiny and Policy Development Committee\*
- Healthwatch chair and CEO\*
- Public
- South Yorkshire ICB CEO and Chair
- ICS programme board
- Trusts
- LMC chair
- VAS
- Cabinet member for health\*
- Citywide community groups
- Health and wellbeing board
- All MPs\*
- All councillors and parties\*
- Media – Star, Radio Sheff, Calendar, Look North, Hallam, Tribune\*
- South Yorkshire Mayor and prospective candidates
- David Blunkett
- PCS
- SADACCA
- Disability Sheffield
- Faithstar
- Citizens Advice Bureau Sheffield
- Sheffield Save our NHS
- Carers Centre
- Young Carers
- Age UK
- Alzheimer's Society
- Mencap
- Community Pharmacy Sheffield

- SYPTE

#### **14.1.2. Foundry PCN**

- PCN staff\*
- Gill Furniss MP\*
- Firvale Community Hub\*
- Local Area Committee (LAC) chair\*
- Reach Up
- The Furnival
- Patients\*
- Practice Patient Groups (PPGs)
- ACT\*
- ISRAAC\*
- Ward councillors\*
- Faith centres
- Schools
- Supported living/temporary accommodation/care homes
- TARAs

#### **14.1.3. SAPA PCN**

- PCN staff\*
- Gill Furniss MP\*
- LAC chairs\*
- Ward councillors\*
- Faith centres
- Foxhill Forum
- Schools
- SOAR\*
- Flower Estate Family Action
- Patients\*
- PPGs
- Sheffield Wednesday Football Club
- TARAs

#### **14.1.4. City centre PCN**

- Paul Blomfield MP\*
- Shipshape\*
- City of Sanctuary
- Refugee Council
- Archer Project
- Ben's Centre
- Chinese Community Centre
- Unity Gym
- Salvation Army
- St Wilfrid's Centre (out of area, but clients include homeless population)
- LAC chair\*
- Patients\*
- PPGs
- Student unions
- Walk in centre
- Sheffield Futures (will be moved)
- Supported housing in centre
- Hostels in city
- Sheffield United Football Club

- TARAs
- Ward councillors\*
- Faith centres
- Schools

#### **14.1.5. Internal**

- CCG Governing body\*
- SMT
- PCCC\*
- All staff
- Practices – GPs\*/Practice managers\*/Reception staff\*
- SPIEEC\*
- CCG Clinical directors
- Zak McMurray, Medical Director\*
- Terry Hudson, Chair
- Brian Hughes, Deputy Accountable Officer
- Jackie Mills, SRO
- Locality managers\*
- Sheffield City Council Comms, Engagement and Equality teams
- Sheffield City Council executives
- Other SCC staff to be identified

### **15. Communications targeted to stakeholders**

#### **MPs, councillors, community and voluntary sector**

- Targeted briefings face to face and email
- Survey
- NHS Sheffield CCG website and social media
- Online zoom briefings

#### **Citywide key stakeholders**

- Targeted briefings
- Emails
- Local and regional media
- Online zoom event

#### **Internal**

- Targeted written briefings
- Spoken briefings at meetings
- Emails
- Practice bulletin
- CCG intranet
- Internal comms

#### **Patients and wider public**

- Local and regional media – media releases / broadcast interviews
- NHS Sheffield CCG website and social media
- Copy for voluntary sector newsletters
- Texts from GP practice
- Posters in primary care premises
- LACs
- PPGs

### **15.1. Media**

We will be open and transparent and work proactively with local and regional media, and as the programme progresses with the national trade press.

As well as giving the citywide view we will work with practices to offer case studies and insights into how the investment will transform services in local areas.

## Appendix A – Engagement survey

Please note that this survey uses branching to direct people to the relevant questions based on which GP practice they are registered with.



# Changing the way we deliver services in new health centres in Sheffield

\* Required

## Introduction

Sheffield has been awarded £37m to transform Sheffield GP practices across the city. This money could be used to build up to 5 new health centres bringing together GP services, other health services, and some voluntary and council services all under one roof.

The 3 areas of the city where these health centres could be built are.

- 1 in the City Centre
- 2 in the Shiregreen, Firth Park, Southey Green and Parson Cross areas
- 2 in the Burngreave, Pitsmoor, Page Hall and Firth Park areas

These areas have been chosen as they haven't benefited from previous funding for GP buildings, so many of the practice sites are in need of modernisation. Some GP practices in these areas have shown an interest in potentially moving into the new buildings.

If you live in one of the areas where a new health centre could be built, we would like to hear your views on your current practice site, the potential new health centre locations, accessibility, and new services that could be available. Your answers will help us to work out what to do next.

No decision has yet been made about whether these plans will go ahead. We will keep you informed, and there will be more opportunities for you to share your views.



1

How much do you agree with the following statements?

	Strongly agree	Agree	Neutral	Disagree	Strongly disagree
My GP practice site provides a good environment for healthcare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
More investment is needed in GP services in my area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am willing to travel further if it will mean I get better care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Building new GP health centres is a good idea	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would not be able to get to my GP Practice if it was further away	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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One of the benefits of these new health centres is the ability to have other services and facilities located together in the same place as your GP practice.

The following services may be available in the new health centres. Which of these services would you like to see in these new health centres?

- Community Mental Health
- Children's Health
- Interpreting services
- Changing places toilets
- Rapid testing and diagnostics
- Privacy rooms
- Talking therapy rooms
- Group session rooms
- Council services
- Spaces for community organisations

3

Which GP Practice site do you usually go to? \*

- Buchanan Road Surgery
- Burngreave Surgery
- Clover City Practice
- Cornerstone Surgery
- Devonshire Green Medical Centre
- Dunninc Road Surgery
- Elm Lane Surgery
- Firth Park Surgery
- Hanover Medical Centre
- Herries Road Surgery
- Margetson Surgery
- Melrose Surgery
- Mulberry Practice
- Page Hall Medical Centre
- Pitsmoor Surgery
- Sheffield Medical Centre
- Shiregreen Medical Centre
- Southey Green Medical Centre
- The Health Care Surgery
- Upwell Street Surgery
- None of these GP Practices

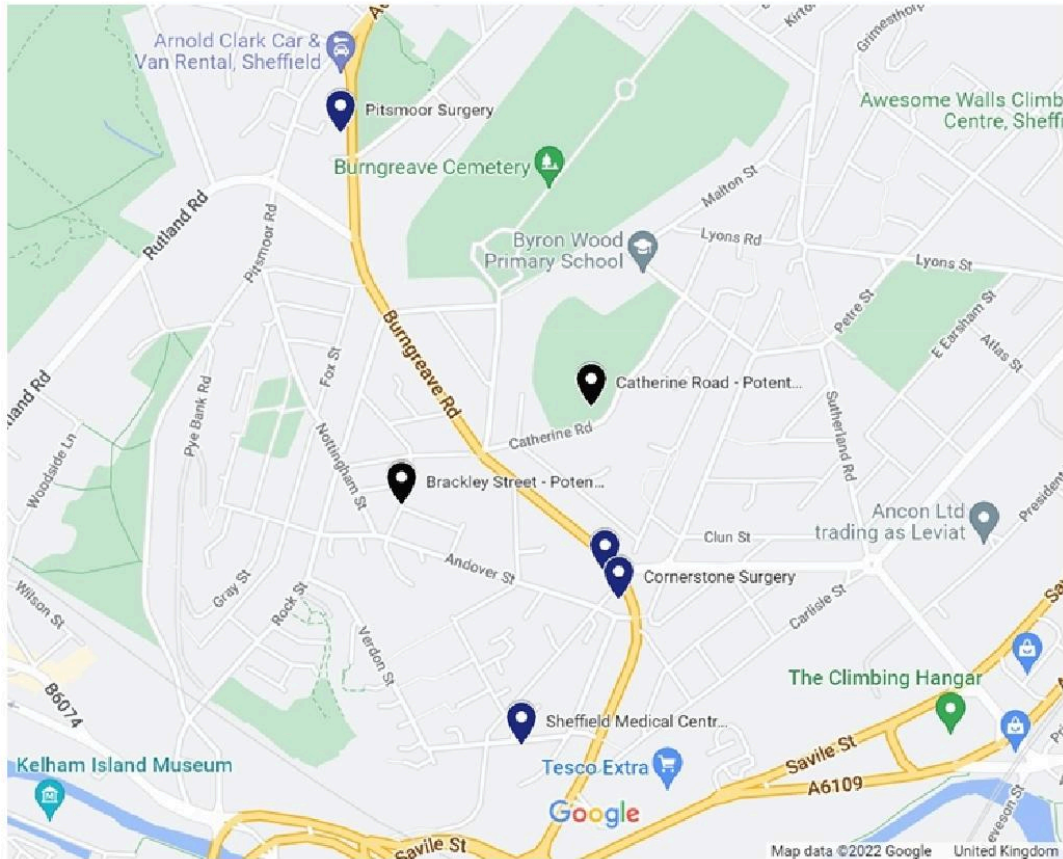
3/10/2022

## Foundry Hub 1

Many other sites have been considered, but through a rigorous process these potential sites have been narrowed down as the only viable options. There are currently two sites being considered for a new GP Health Centre in your area.

These are:

- Sheffield Medical Centre
- Catherine Road



4

How long would it take for you to travel from your home to...?

	Less than 10 minutes	10 - 20 minutes	20 - 30 minutes	More than 30 mins
Your current GP Practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sheffield Medical Centre	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Catherine Road	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5

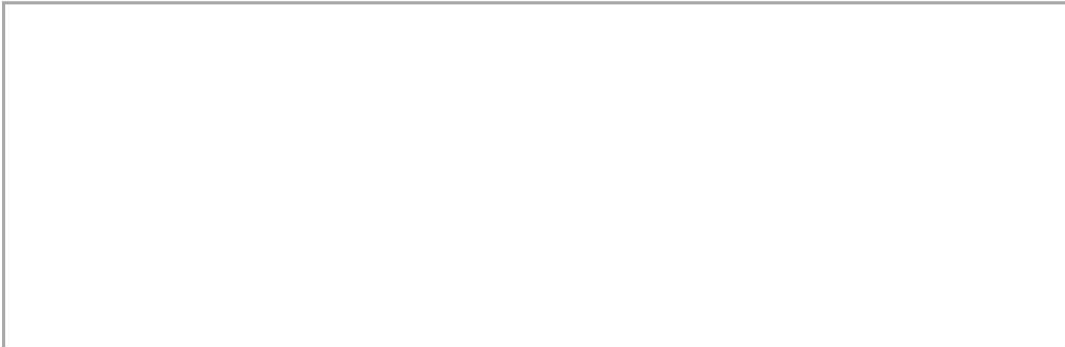
How would you travel to...?

	Car	Bus or Tram	Taxi	Walk	Other
Your current GP Practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Catherine Road	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sheffield Medical Centre	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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6

What are your thoughts about Sheffield Medical Centre location?

A large, empty rectangular box with a thin black border, intended for a user to provide their thoughts on the Sheffield Medical Centre location.

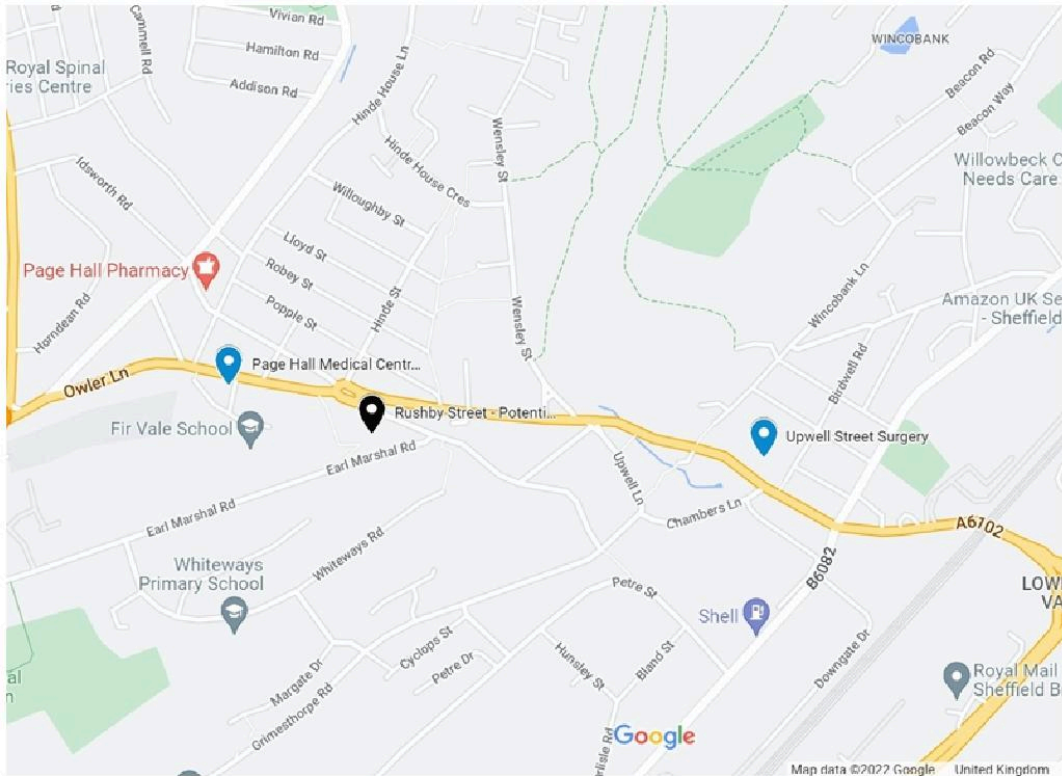
7

What are your thoughts about the Catherine Road location?

A large, empty rectangular box with a thin black border, intended for a user to provide their thoughts on the Catherine Road location.

## Foundry Hub 2

Many other sites have been considered, but through a rigorous process one potential site has been narrowed down as the only viable option. The site being considered for a new GP Health Centre in your area is at Rushby Street.



8

How long would it take for you to travel from your home to...?

	Less than 10 minutes	10 - 20 minutes	20 - 30 minutes	More than 30 mins
Your current GP Practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rushby Street	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3/10/2022

9

How would you travel to...?

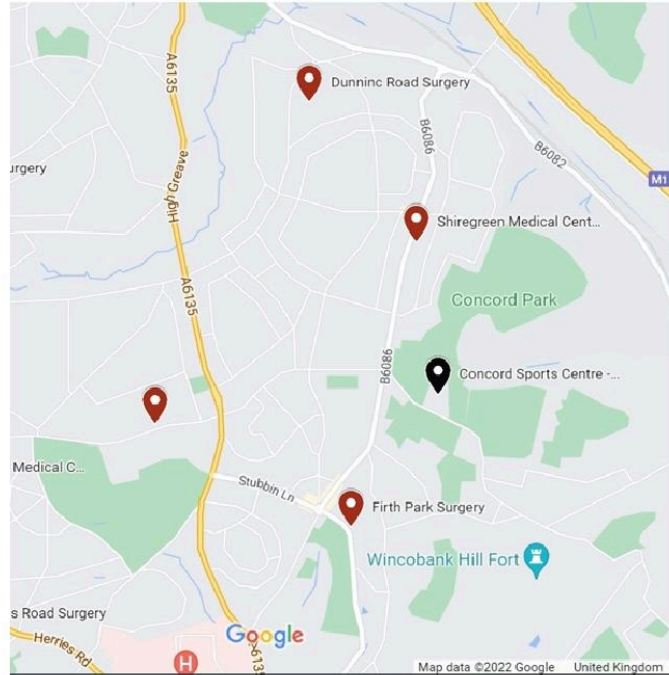
	Car	Bus or Tram	Taxi	Walk	Other
Your current GP Practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rushby Street	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10

What are your thoughts about the Rushby Street location?



## SAPA Hub 1



Many other locations have been considered, but through a rigorous process one potential site has been narrowed down as the only viable option. The site being considered for a new GP Health Centre in your area is at Concord Sports Centre.

11

How long would it take for you to travel from your home to...?

	Less than 10 minutes	10 - 20 minutes	20 - 30 minutes	More than 30 mins
Your current GP Practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concord Sports Centre	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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12

How would you travel to...?

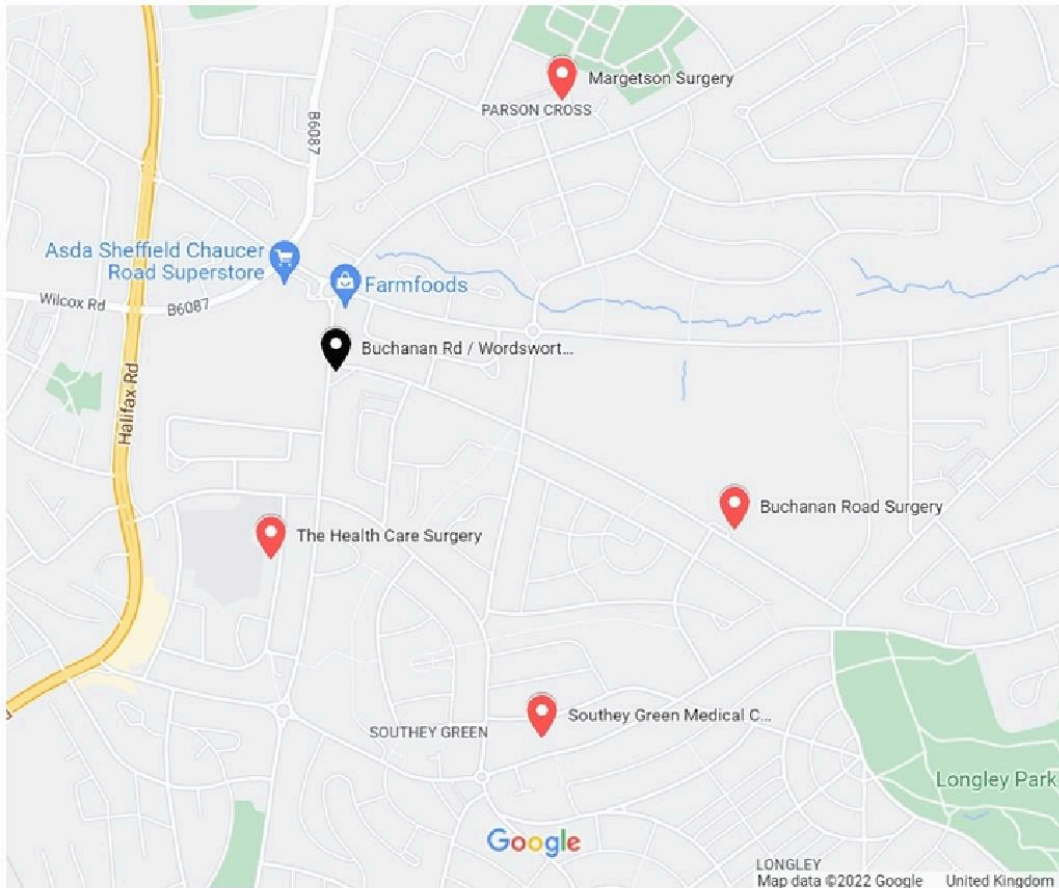
	Car	Bus or Tram	Taxi	Walk	Other
Your current GP Practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concord Sports Centre	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13

What are your thoughts about the Concord Sports Centre location?

## SAPA Hub 2

Many other locations have been considered, but through a rigorous process one potential site has been narrowed down as the only viable option. The site being considered for a new GP Health Centre in your area is at Buchanan Road / Wordsworth Avenue.



14

How long would it take for you to travel from your home to...?

	Less than 10 minutes	10 - 20 minutes	20 - 30 minutes	More than 30 mins
Your current GP Practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Buchanan Road / Wordsworth Avenue	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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15

How would you travel to...?

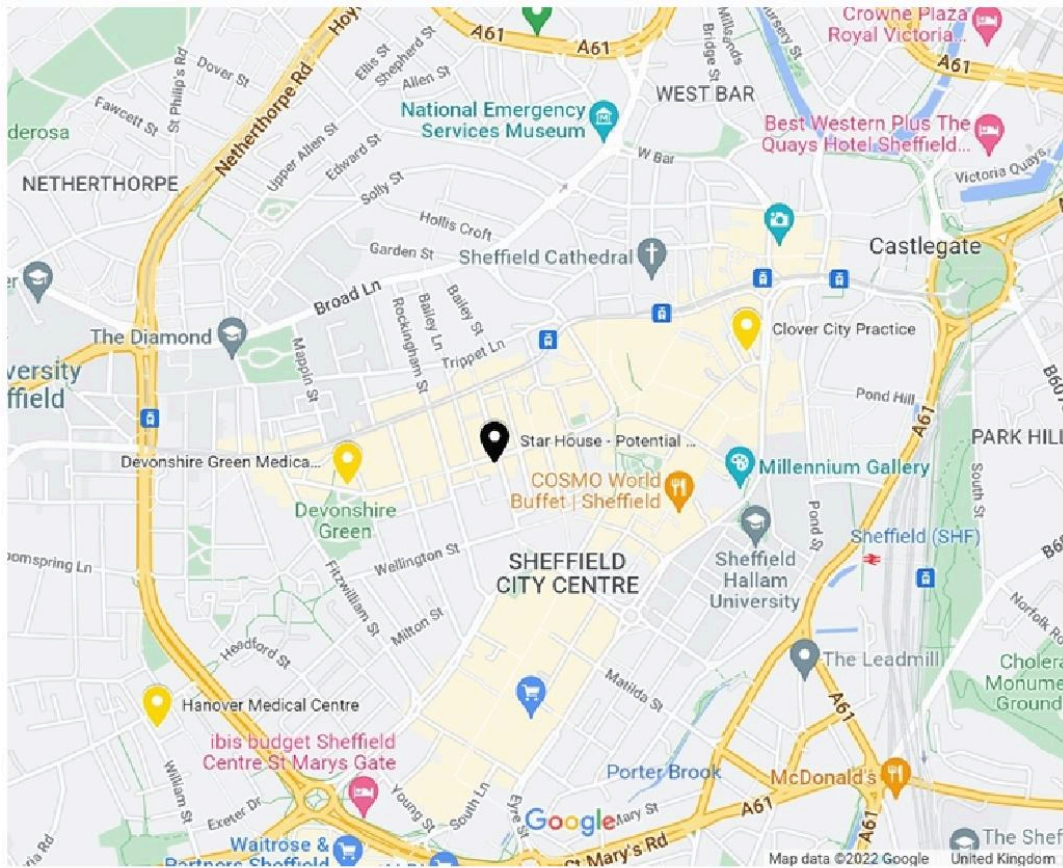
	Car	Bus or Tram	Taxi	Walk	Other
Your current GP Practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Buchanan Road / Wordsworth Avenue	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16

What are your thoughts about the Buchanan Road / Wordsworth Avenue location?

## Sheffield City Hub

Many other locations have been considered, but through a rigorous process one potential site has been narrowed down as the only viable option. The site being considered for a new GP Health Centre in your area is at Star House, Carver Street.



17

How long would it take for you to travel from your home to...?

	Less than 10 minutes	10 - 20 minutes	20 - 30 minutes	More than 30 mins
Your current GP Practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Star House	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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18

How would you travel to...?

	Car	Bus or Tram	Taxi	Walk	Other
Your current GP Practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Star House	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19

What are your thoughts about Star House?

20

If your GP practice was to move to one of these new sites, how do you think the following things would be?

	Much better	Better	No difference	Worse	Much worse
Travel - getting there	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Waiting areas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to additional services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Care provided by your practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accessibility of the building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Size of the building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accessing care in a modern building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21

What are your thoughts about these plans to potentially build 5 new GP health centres across Sheffield?

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## Your current GP Practice

Thinking about the current location and building of your GP Practice...

22

What do you think about the following elements of your current GP practice?

	Very good	Good	OK	Poor	Very poor
Travel - getting there	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Waiting areas	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accessibility of the building	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Additional services available	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to offer modern healthcare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

23

Please tell us anything else you would like to say about your current GP Practice site.

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## Continuing to be involved

If you would like to continue to be kept informed about these plans as they develop, please share your preferred contact details below.

24

Name

25

Email address

26

Postal address

27

Telephone number

28

Please tell us about any communication needs you have e.g. methods, formats, languages

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## Out of scope

Your GP Practice is not currently part of these plans to build 5 new GP hubs. However, some other GP practices are receiving extra money to refurbish or extend their current buildings, including:

- Park Health Centre
- Shoreham Street
- Heeley Green
- Porterbrook Medical Centre
- Ecclesall
- The Hollies Medical Centre
- Dovercourt Surgery
- Gleadless Medical Centre
- Uppertorpe Medical Centre

## Equality monitoring - OPTIONAL

In order to ensure that we provide the best services for **all** of our communities, and to ensure that we do not knowingly discriminate against any section of our community, it is important for us to gather the following information. No personal information will be released when reporting statistical data and all information will be protected and stored securely in line with data protection rules.

This information will be kept confidential and you do not have to answer all of these questions, but we would be very grateful if you would.

29

Please tell us the first part of your postcode (e.g. S9, S35)

30

What is your sex?

Female

Male

Prefer not to say

Other

31

### Gender reassignment

Is your gender identity now different to the sex you were assumed to be at birth?

- Yes
- No
- Prefer not to say

32

What is your age?

The value must be a number

33

What is your sexual orientation?

- Bisexual
- Heterosexual
- Homosexual
- Prefer not to say

Other

What is your ethnic background?

- Arab
  - Asian or Asian British - Chinese
  - Asian or Asian British - Indian
  - Asian or Asian British - Pakistani
  - Asian or Asian British - Any other Asian background
  - Black or Black British - African
  - Black or Black British - Caribbean
  - Black or Black British - Any other Black background
  - Mixed - Asian and White
  - Mixed - Black African and White
  - Mixed - Black Caribbean and White
  - Mixed - Any other mixed background
  - Roma
  - White - British
  - White - Gypsy or Traveller
  - White - Any other White background
  - Prefer not to say
  -
- Other

35

Do you consider yourself to belong to any religion?

Christianity

Hinduism

Islam

Judaism

Sikhism

No religion

Prefer not to say

Other

36

Do you consider yourself to be disabled?

Yes

No

Prefer not to say

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37

If yes above, what type of disability, impairment, or condition do you have? (Tick all that apply)

- Autism
  - Learning disability
  - Mental Health condition
  - Hearing
  - Visual
  - Long-standing health condition or illness
  - Prefer not to say
  -
- Other

38

Do you provide care for someone?

Such as family, friends, neighbours or others who are ill, disabled or who need support because they are older.

- Yes
- No
- Prefer not to say

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