# Appraising the Options in the 2012 Review of In-Patient Paediatric Services at the Royal Alexandra Hospital, Paisley

In 2011/2012 NHS Greater Glasgow and Clyde conducted a pre-consultation process during which it informed potentially affected people, staff and communities of a review of paediatric [children's] in-patient services at the RAH and involved them in the development and appraisal of options for the future of children's in-patient services.

This pre-consultation and options appraisal were fully compliant with the guidance, Informing, Engaging and Consulting People in Developing Health and Community Care Services, CEL 4 (2010) and Involving Patients, Carers and the Public in Option Appraisal for Major Health Service Changes (March 2010).

This report describes the options appraisal undertaken for the review of in-patient services at Ward 15, RAH.

- The background to the options available for Ward 15
- How patients and families helped to develop and assess the options
- How the options were assessed and ranked
- What was chosen as the preferred option and why

# **Developing and Appraising the Options**

In line with the guidance on options appraisal NHSGG&C conducted an options appraisal on the 28<sup>th</sup> November and 5<sup>th</sup>/6<sup>th</sup> of December 2011.

31 participants from potentially affected people and communities participated. These were:

- Families of children who use or have used Ward 15
- Public partners from the PPFs of the following CH(C)P areas Renfrewshire,
  East Renfrewshire, Argyll & Bute, Inverclyde and West Dunbartonshire
- Public partners from the NHSGG&C Acute Services Patients Panel
- Representatives from the children's charities Action for Sick Children and PAMIS
- Members of staff from the Women's & Children directorate including Ward 15
- Members of staff from the RAH Emergency Department

Before and during the exercise participants were offered a range of support mechanisms to participate including:

- dedicated telephone and email support
- paper copies of all relevant presentations and documentation
- a choice of day of attendance for Day 2
- child care

- transport and overnight hotel accommodation for those travelling long distances
- an on-site crèche was provided
- travel costs

The Scottish Health Council observed each day of the option appraisal and at the end of each day issued questionnaire evaluations to family and public representatives.

## Day 1: Setting the Scene for the Options Appraisal

There were 23 participants on Day 1. This session consisted of a series of presentations followed by facilitated question & answer sessions to allow participants to interrogate the key NHS officers responsible for service planning and provision. Presentations covered a range of topics including:

- What to expect during the options appraisal exercise
- A background to the review including an explanation of the main driver
- A description of the current services at Ward 15 and Yorkhill
- Challenges in medical staffing, including information on Modernising Medical Careers, the European Working Time Directive, the supply of locum junior doctors and other junior medical paediatric staffing pressures
- Developments in paediatric care and the wider context of children's services including the new Royal Hospital for Children
- Results of a survey of families' travel to Ward 15 and an analysis of transport and access to the RAH and Yorkhill

Day 1 included a facilitated discussion to produce a long list of all options for service configuration followed by further group discussion to sift these into a shortlist. This produced 4 options for appraisal.

#### **Short List of Options**

Option 1	Maintain the current paediatric inpatient service at Ward 15, RAH
Option 2	Transfer of all inpatient services from Ward 15, RAH to RHSC in 2012
Option 3	Provision of a dedicated facility for short-stay medical assessment and
	planned medical and surgical day-care adjacent to the outpatient
	department, RAH. There would be no inpatient beds in this option.
Option 4	Maintain the current paediatric inpatient service at Ward 15, RAH
	until 2015, and then transfer inpatient services to the New Children's
	Hospital

The shortlisting discussion produced an additional option for consideration that had not previously been identified Option 4. Option 4 was proposed by public partners and families of Ward 15 patients; it was reviewed by the group during shortlisting and accepted as a suitable option for further appraisal.

## **Day 2: Evaluation of the Options**

For Day 2 participants were given a choice of joining a group on the 5<sup>th</sup> December 2011 (Group 1) or 6<sup>th</sup> December 2011 (Group 2). There were 11 participants in group 1 and 8 participants in group 2. Each group consisted of a mix of stakeholders.

Each group participated in a set of structured exercises including:

- 1. Group discussion to clarify the meaning of the appraisal criteria
- 2. Group discussion to rank and weight the criteria
- 3. Individual scoring of each option with reasons given

For the Ward 15 options appraisal exercise the Board proposed that the internationally recognised six dimensions of healthcare quality, developed by the Institute of Medicine, be adopted as the criteria for assessing the options. These dimensions are:

- Person-centred
- Safe
- Effective

- Efficient
- Equitable
- Timely

These criteria were chosen to ensure we found a solution that was fair, good for patients and families, affordable, sustainable and which could meet the challenges we faced.

Paired and group discussion gave participants an opportunity to express their views on each criterion. This part of the exercise included a process to prevent double counting of issues.

Each group then ranked and weighted the criteria. Where there was disagreement rank and weight was achieved through consensus or majority voting.

This exercise was then followed by individual scoring.

At this stage each option was read out and participants were given an opportunity to clarify language and ask questions. Members of the Women & Children's Directorate Senior Management Team were available to provide any additional information requested by participants and to answer questions.

Following this, all participants completed a scoring sheet which allowed them to score each of the option against the agreed criteria. Participants were encouraged to record their reasons for the scores they allocated. The overall scores and weighted scores for each option for each group are in the table overleaf.

## **Total and Weighted Scores for Each Option**

Option	Group 1			Group 2		
	Total	Weighted	Rank	Total	Weighted	Rank
	Score	Score		Score	Score	
1. Status Quo	389	6395	2	266	4376	2
2. Move to RHSC	331	5616	3	228	3824	3
3. Day Service at RAH,	181	3070	4	157	2685	4
overnight beds to RHSC						
4. Move to new	407.5	6872	1	316	5304	1
hospital in 2015						

## **The Preferred Option**

The preferred option was Option4: maintain the current paediatric inpatient service at Ward 15, RAH until 2015, and then transfer inpatient services to the new children's hospital.

All groups of participants scored option 4 highly against all criteria, with the exception of 1 PPF member who felt that it was doubtful that this could be delivered owing to the immediate pressures on medical staffing in Ward 15.

A key element of an options appraisal is the qualitative information provided by participants that assists in developing an understanding of their perspective on the options. The following provides a summary of the reasons given by participants for their scores for option 4.

- there was agreement that option 4 was safe but that medical staffing would remain challenging, albeit easier to deliver than the status quo given the deadline for transfer to the new children's hospital
- some staff and representatives of children's charities noted the opportunity that this option presented for planning the transition to the new children's hospital with patients and families and identified this as a strength
- there was agreement that option 4 was person-centred and would offer less disruption for patients and carers as it would result in 1 move: from RAH to the new hospital whereas option 2 would require 2 moves: RAH – Yorkhill – the new hospital
- there was general agreement that the new children's hospital offered benefits in terms of effective medical staffing, family support services and enhanced transport provision

#### **Outcome of the Options Appraisal**

The preferred option was shared with participants at the end of the options appraisal. Public partners and staff were supportive of the preferred option. The views of families were mixed. Some families remained unconvinced that it was necessary to change from the status quo while others demonstrated that their thinking had changed as a result of the debate and discussions over the two days.

Two participants who were families who used Ward 15 were surprised that they had voted for and agreed with option 4; expressing the view that they wouldn't have thought at the beginning of the options appraisal that they would have voted that way and yet now they were confident that this was the best option.

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