HEALTHY WESTON ⇔





Agenda



- Introduction and icebreaker
- Context for public meetings
- Facilitation training
- Lunch
- Final practice sessions (with case studies)
- Next Steps

Public and Community meetings are part of a broader plan to gain feedback on the Healthy Weston Consultation

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Feedback >

What?	How Many?	Who?			
Face to Face Survey	1,000	Representative sample of WGH catchment			
Qualitative Focus Groups / Paired Depths	38-40	ritical patient groups – Elderly / Frail, Disabled, Parents ith Young Children and those experiencing social / conomic deprivation			
Online & postal Survey	c.500	Attendees of public and community meetings; people who visit website – likely to be mix of staff, key patient and interest groups and organisations. (Pre consultation survey female / 50+ bias)			
Social Media	c.250	Twitter and Facebook users			
Emails and Letters	c.20-200	Any members of public or organisations			
Phone calls	TBC	Any members of public or organisations			
Stakeholder meetings	1 with c. 60 attendees	Key stakeholders / partners / providers			
Public Meetings	11 with c. 50- 120 attendees	Any members of public. More likely to be more invested / interested public / organisations			
Pop Up Roadshow / Open drop ins	7 with flow of visitors all day	Any members of public. More likely to be broader population than public meetings			
Community Outreach Meetings	c. 50 meetings	Members of Community groups – specific interest or demographic			

Meetings and drop-ins intended to share information and gain feedback



Meetings:

- Presentation of proposed model with a long Q&A
- Followed by table feedback and discussions
- Opportunity to complete questionnaire / website address to complete online



Drops ins / pop ups:

- Information stand
- Questionnaires
- Chance to for brief (less structured) feedback
- Advertisement of upcoming events and how to get involved.



Meeting feedback key part of consultation Wis process



- Prior to engagement event a word template with required 'areas' of feedback will be provided
- This feedback needs to transferred to excel template log and sent along with word document to Insight team
- The full notes plus the completed excel templates will be used as part of the independent audit of consultation feedback – so important to provide both formats to central collection point

Location of Meeting		Date of Meeting			No. of people at Table		
Reason for views	Reason for A&E	Reason for GPs in	Reason for HDU			Comments about	Comments about
about Integration	view	A&E view	view	Reason for	Alternative	other planned	long-term vision
, and the second				emergency surgery	options/other	improvements to	
				view	changes	services	
Why support or oppose having more joined up (integrated) working between the hospital, out of hospital care and other services?	Why support or oppose having the A&E department open 8am to 10pm, seven days a week, as it has been temporarily since July 2017?	Why support or oppose having GPs (family doctors) work alongside hospital staff at the A&E?	Why support or oppose providing 'critical care' for very ill people in a high dependency unit at Weston Hospital, with the most seriously unwell people who need an intensive care unit being cared for in Bristol or Taunton?	Why support or oppose providing emergency surgery where possible during the day at Weston Hospital. People who need immediate surgery overnight or more complex cases would have surgery in Bristol or Taunton before being returned to Weston Hospital for ongoing care, once they are well enough?	Any other changes that the NHS should consider to address the issues facing healthcare in the Weston area	Anything about the NHS plans to improve other services in Weston, Worlde, and the surrounding areas, both in hospital and in the community? (frailty, children's services, more planned operations and GP practices working more closely together in larger groups)	Anything about the longer-term vision of healthcare in the Weston area which includes more changes to Weston Hospital and other services?

Running feedback sessions In this session we'll be covering...

- At the start of the session...
- The role of the facilitator
- The 'shape' of focus groups and feedback sessions: designing the process
- Active listening: what is it and how to do it
- Understanding and managing group dynamics, covering:
 - Facilitating discussions
 - Putting participants at ease
 - Managing dominating and quiet participants
 - Accepting and managing personality differences
- In summary...



Running feedback sessions

At the start...

Briefly introduce...

- Yourself
- The purpose of the session
- How the feedback will be used
- The format of the discussion

Get respondents to introduce themselves...

- Go round the circle: ask for...
 - Name
 - Anything directly relevant to the discussion
 - Anything else they would like to tell us about themselves

Set the ground-rules, e.g...

- No right or wrong answers
- Say what's on your mind
- Don't be afraid to disagree but respect other views
- Don't necessarily wait for questions from the facilitator
- Try not to speak over each other
- Try to give everyone air-time





The role of the facilitator

- Every group will be different
- The facilitator will play a critical role in the discussions

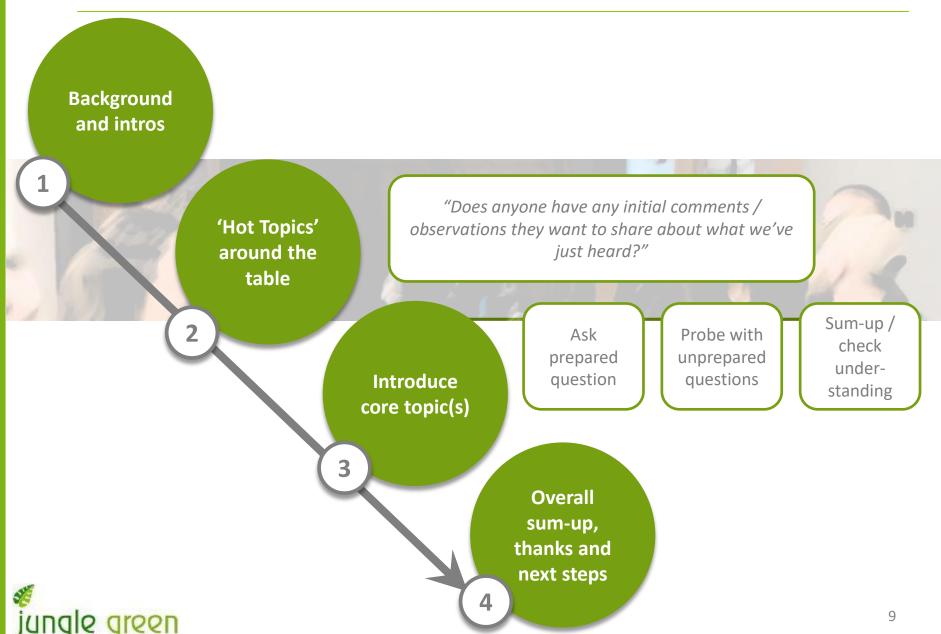
BUT...

Aim to minimise your influence

- Your role is to:
 - Guide discussions through the agreed topics
 - Ensure that satisfactory feedback is collected probing as necessary
 - Put respondents at ease so that; (a) all contribute and (b) respondents are open and honest
 - Check that a balanced 'group view' is achieved rather than the views of one or two strong members of the group
 - Manage time



The 'shape' of focus groups



Active listening: what is it and how to do it



- Really it's common sense and good manners!
- It's about comprehensive, dynamic listening, not just hearing words
- Key components of active listening:
 - Pay attention
 - Show you're listening
 - Provide feedback
 - Defer judgement
 - Respond accordingly (e.g. probe based on what's been said, sum-up, play it back to the group for comment etc.)

TIP

Try to remember what individuals have previously said – including intros: use it when probing

Guiding discussions

- Ask open questions
- Prepared questions are a good way to introduce a topic
- Unprepared questions are important to probe responding to what is said
- Aim to establish a group view or least understand the range of different views and experiences within the group
- Sum-up discussions frequently: This is helpful on several levels...
 - Respondents can correct your interpretation if necessary
 - Reassures the group that you are listening validates their input
 - Allows the facilitator time to think about the next steps
- Stay neutral and empathetic

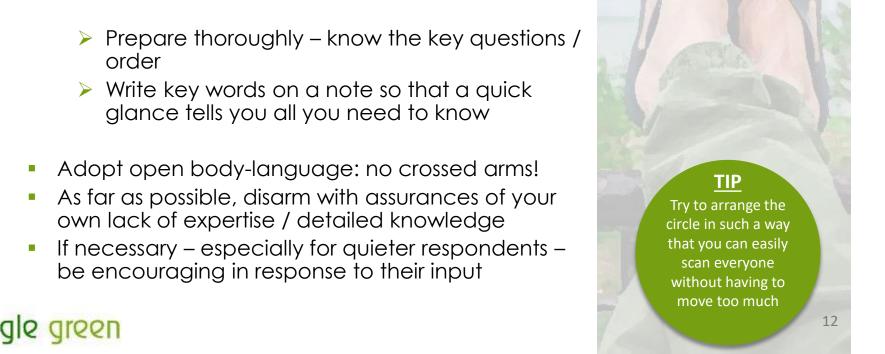


Putting respondents at ease



This is absolutely critical to obtaining good feedback

- The environment is important (temperature, room size, seating, layout etc.)
- Smile!
- Constantly scan and maintain eye-contact throughout...
- ...which means NOT burying your head in the list of questions or your watch:



Managing dominating and quiet respondents

Highlight the issue at the start of discussions

Hints and tips

- Initially, don't be too quick to close respondents down
- Use body-language: a subtle turning away from a respondent can work wonders
- Tackle the issue directly, e.g. "We've heard from Jim on this, now I'd like to hear other views..."
- Trust the group: they often deal with the issue on their own



- Be vigilant for quiet respondents from the start...the longer they go without saying anything, the more difficult it becomes for them
- Look for the slightest sign that they have something to say – seize the chance
- Remember something they've said in their intro and use it to ask a direct question to them
- Use break-out groups or pairs to ensure everyone feels they are participating
- Similarly, don't be afraid to go round the circle, asking for individual views / experiences

Accepting/exploiting personality differences

- Everyone is different
- Don't treat qualitative discussion groups as a survey: don't expect to obtain an equal input from every respondent
- Some respondents will be quicker to express their views;
 some will be more considered or less vocal
- Use the more opinionated respondents to provoke others



In summary...

The facilitator should aim to be...









Encouraging

Vigilant

Flexible

Don't share personal opinions;

React to what is being said without agreeing or disagreeing

Unless necessary, don't correct

People will talk over each other; ensure that that the person who backs down is immediately given their chance

Constantly scan the circle, looking for body-language, cues that someone has something to say etc.

Discussion can go 'off-piste': be prepared if discussions take an unexpected turn





Next Steps

- Public consultation runs to 14th June
- A range of ways for people to have their say
- All feedback evaluated
- Further report to BNSSG Governing Body in autumn 2019

Looking after ourselves



- We recognise some of this will be challenging
- You may speak to people who are angry, difficult, unwell or all of the above
- We will build in time to debrief
- You can escalate any issues
- Draw on help if you are uncomfortable at any point
- Remember: you are always an ambassador for the CCG

HEALTHY WESTON 令



Q & A

