

Public and Patient Engagement Report: Relocation of RNHRD's Bath Centre for Pain Services, Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation services.

Background to the engagement

The Royal National Hospital for Rheumatic Diseases' (RNHRD) Bath Centre for Pain Services (BCPS), Complex Regional Pain Syndrome (CRPS) and Complex Cancer Late Effects Rehabilitation (CCLER) services operate from the Mineral Water Hospital site in Bath, known locally as the 'Min'. These are national, specialised services for people with chronic pain – where pain is persistent, disabling and not adequately helped by other treatments.

BCPS is one of the few providers of residential, group-based pain management programmes for adults, young people and children in the UK. The service aims to achieve significant improvements in patient functioning and self-management, particularly for people with long illnesses and who have tried many different treatments which have had little or no impact. Where patients attend residential programmes, accommodation is currently provided within the Mineral Water Hospital building.

The Trust is proposing to relocate this service, along with clinicians and staff to a specially refurbished building (Bernard Ireland House) on the RUH's Combe Park site in autumn 2019. This building will be separate from the acute hospital building, in response to feedback from patients and staff, and in keeping with the ethos of this service. It will include specially designed residential accommodation, group treatment areas including therapy and group rooms, office space for the BCPS team and a dedicated therapeutic courtyard area.

Complex Regional Pain Syndrome (CRPS) is a chronic pain condition that often affects the limbs. It can cause a variety of symptoms, with pain starting following injury to the limb or sometimes for no obvious reason.

Complex Cancer Late Effects can include uncontrolled pain and poor movement. It can also include brachial plexus nerve damage as a result of radiotherapy treatment given for breast cancer in the past. The RNHRD offers a specialist rehabilitation service to people affected by Complex Regional Pain Syndrome or Complex Cancer Late Effects.

The Trust is proposing to relocate the CRPS and CCLER services along with clinicians and support staff, to a purpose built RNHRD and Therapies Centre at the RUH's Combe Park site. The Centre will also house the RUH's therapies and pain services, and the RNHRD Rheumatology and Therapies services.

The same range of CRPS and CCLER services would be provided from the RNHRD and Therapies Centre, and patients will continue to be seen and treated by the same teams to the

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same high standards, only the location will change. The new Centre will provide a supportive environment, designed in conjunction with patients and clinicians taking into account psychosocial needs. The Centre will provide therapeutic surroundings to support patient recovery, treatment, wellbeing and the management of long-term conditions.

Residential accommodation for those attending group programmes is proposed to be provided in a specially refurbished building (Bernard Ireland House), also on the RUH's Combe Park site. Transport between the onsite residential accommodation and the Centre will be provided for patients accessing these programmes.

These are national services accessed by patients in England and Scotland. The RUH's Combe Park site is located less than two miles from the Mineral Water Hospital site so differences for patients in the cost or time associated with travelling will be minimal, although for some patients this will be an inconvenience. For some patients the new location will be easier to access, due to the availability of onsite parking. The RUH provides over 600 visitor and patient spaces across the site, and around 70 blue badge spaces.

In order to ensure the continued sustainability of the services currently provided at the Mineral Water Hospital site, the ability to fully integrate and align services on a single site was a core component of the original business case for the acquisition of the RNHRD by the Royal United Hospitals Bath (RUH). It will improve efficiency and effectiveness, improve patient experience, ensure continuity of care, and quality of service delivery as well as increase value for money from the public purse. Clinicians continue to be integral to planning the future of their services to ensure the delivery of high quality effective services.

This report outlines what the Bath Centre for Pain Services and CRPS and CCLER services currently provide and the outcomes of the engagement work carried out to inform relocating these services.

What does the Bath Centre for Pain Services Currently Provide?

BCPS is one of the few providers of residential, group-based pain management programmes for adults, young people and children in the UK. The service aims to achieve significant improvements in patient functioning and self-management, particularly for people with long illness who have tried many different treatments which have had little or no impact. Where patients attend residential programmes, accommodation is currently provided within the Mineral Water Hospital building, located in Bath City Centre.

The majority of activity is delivered in the Mineral Water Hospital building, although residential programmes for adults or adolescents (11-18), outreach assessments and consultancy are available in exceptional cases for those patients who are unable to attend an assessment or for teams treating complex pain patients who would welcome an opinion from the chronic pain team.

As a specialist, national service, patients are referred to these services from CCGs across the country. The table below outlines the number of new referrals and number of patients attending the Bath Centre for Pain Services during 2017/18:

	Bath Centre for Pain Services
New attendance	534

What do the CRPS and CCLER Services Currently Provide?

These services are recognised as national specialist commissioned services by NHS England. Referrals are accepted locally, nationally and internationally.

These services are tailored to those with a diagnosis or symptoms where physical rehabilitation may still be helpful even for those with long-term symptoms. The needs of patients are assessed on an individual basis and patients participate in rehabilitation as part of a residential programme which they continue to adhere to once they leave.

Patients are initially referred as an outpatient before a decision is made as to whether an inpatient programme is appropriate. If appropriate, patients attend a two week residential programme where they receive individual rehabilitation programmes from a multi-disciplinary team with an emphasis on optimising function and promoting self-management, allowing patients to return to activities that are important to them, whether their pain is reduced or not. Patients are currently provided with residential accommodation within the Mineral Water Hospital Building.

The table below outlines the number of new referrals attending for assessment at the Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation services on the Mineral Water Hospital site for 2017/18

	CRPS	CCLER
New attendance	179	12

As a specialist, national service, patients are referred to these services from CCGs across the county, patient numbers are too low to report on based on individual CCGs.

What service changes are being proposed for the future?

Subject to the outcome of engagement activity, the RUH is proposing to relocate the RNHRD's Bath Centre for Pain Services from the Mineral Water Hospital site to a specially refurbished building on the RUH's Combe Park site.

Subject to the outcome of engagement activity, the RUH is proposing to relocate the RNHRD's CRPS and CCLER services from the Mineral Water Hospital site, to a purpose built RNHRD and Therapies Centre on the RUH site. This building will bring together a number of outpatient services from the RNHRD and RUH which support patients to live independently in the community.

For all services, there will be no change in service provision and patients will still have access to the same clinical teams. There will be no adverse impact on patient choice.

The design of the new and refurbished buildings have been developed in conjunction with clinicians, staff and patients, over a two year period, to provide an improved environment, with better facilities for providing treatment, care and education for patients to recover from episodes of illness or injury, or to manage their long-term condition.

Methodology

A programme of Public and Patient Engagement (PPE) was carried out to seek the views of patients, staff, local health care providers and anyone with an interest in these services using a variety of channels to capture:

- benefits,
- concerns,
- what is good about the current service,
- how the service could be improved in the future,
- anything else people would like us to consider ahead of moving the service.

A questionnaire was also developed to address these key issues, and capture open ended information from stakeholders. Engagement activities on the plan to relocate these services ran for a ten week period, from 25 November to 20 December 2017, to allow people to share their views on the proposed move.

Engagement activities included;

- Writing to BaNES, Wiltshire and Somerset scrutiny bodies, to advise of plans and intention to carry out PPE and to invite additional questions.
- Providing information (posters, paper questionnaires, display boards, flyer with website link) at the RNHRD and to patients attending BCPS, CRPS or CCLER services, outlining the plan to relocate the Bath Centre For Pain Services and CRPS and CCLER services and inviting feedback.
- Providing information in GP matters newsletter, outline the proposal and inviting feedback.
- Providing information on the RUH and RNHRD websites, outlining the plan and encouraging feedback via an on online survey or comments via a dedicated engagement email.
- Providing a website link and poster to relevant stakeholders, for sharing with their staff groups, key individuals and associated groups including support groups, and offering opportunities to provide feedback or find out more.
- Discussing with service leads most appropriate ways to engage with patient and stakeholder groups.

- Providing information via social media, to outline the plans and encourage people to provide feedback.
 - Providing a dedicated email address to provide feedback.
 - A detailed list of all engagement activities can be found at the end of this report.
 - Providing information at the RUH's Annual General Meeting, including a display board and feedback boxes.
 - Providing information in the RUH's community magazine, Insight, and outlining opportunities to provide feedback.
- Media release and local media coverage to highlight proposal and opportunities to provide feedback.

Engagement Feedback (you said)

Despite efforts to engage with stakeholders, there was very little public or patient feedback provided during the formal engagement period. These are national, specialised services seeing relatively low numbers of patients from a wide geographical area each year.

Engagement Events

We recognise that for many of this patient group, due to the nature of their condition, travelling to and attending a feedback session can be a significant challenge. We took advice from service leads on the best way to engage with their patient groups, which centred around making patients aware of the proposal during their programme, and highlighting opportunities to provide feedback, including providing an online questionnaire (paper copies were also available).

A total of nine people completed at least some of the engagement questionnaire. As the number of respondents is low, it is not possible to provide detailed analysis of the results, and data is therefore presented qualitatively in this report to give an indication of stakeholder views.

There were positive opinions on the proposed relocation:

"This can only be good - the premises at the moment are very old would be great to have new up to date facilities" (BCPS stakeholder)

"More modern building so possibly better shower facilities, hydro pool not having so many issues etc." (CRPS/CCLER stakeholder)

"Don't know until i get there, hopefully everything will be new and easier." (BCPS stakeholder)

"I think that it's a great idea and could benefit the whole hospital and also update the service." (BCPS stakeholder)

"These people know what they are doing and do it well so leave the people who run it to plan and steer it's future development." (BCPS stakeholder)

Mixed with some sadness at leaving the Mineral Water Hospital site:

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“Sad to leave town and the loss of the historic building for NHS use is also sad.” (BCPS stakeholder)

Respondents could identify a range of benefits as a result of relocating services including newer facilities, better integration with other services, better access and easier parking.

“Purpose built accommodation. Better physio and hydro - when I was an inpatient there were problems with the lift that made me worry would be good to have modern up to date place” (BCPS stakeholder)

“better parking. Able to access clinical services on one site. Older building was difficult to get to.” (BCPS stakeholder)

“Updated building with working facilities like showers etc.” (BCPS stakeholder)

Potential or perceived disadvantages raised by respondents and the actions the RUH has taken or will take to address these concerns include:

“Parking at RUH is not good, even with new car park. Will have to drive to the park and ride and then get the bus to the RUH, which is only every 30 mins so will make my appts very long winded.” (BCPS stakeholder)

The Trust has taken steps to improve parking facilities on the RUH site and has taken into account the increase in people visiting the Combe Park site when the new Centre is opened. The RUH provides over 350 visitor and patient spaces across the site, and around 100 blue badge spaces.

“Removing it from the city centre environment removes the option for “real world” rehabilitation and turns it into acute hospital based rehabilitation which may not carry over into patients real lives when they return home.” (BCPS stakeholder)

These specialised pain services will not be delivered from an acute hospital setting. The Bath Centre for Pain Services proposed location is Bernard Ireland House, on the RUH Combe Park site but separate to the acute hospital building.

Complex Regional Pain Syndrome and Complex Cancer Late Effects Rehabilitation services proposed location is the RNHRD and Therapies Centre. The vision for the new RNHRD and Therapies Centre and Bernard Ireland House is to create a supportive environment with dedicated facilities for providing high quality care. The buildings are being designed in conjunction with clinicians and patients. The RNHRD and Therapies Centre will operate exclusively as a day patient centre, with a separate entrance to the acute hospital. The interior design will sensitively reflect its heritage and the specific needs of its patient groups. The environment is an integral part of the design to reduce stress and ensure a healing environment, for patients and their families, acknowledging the importance of addressing psychosocial needs and will include:

- Use of natural light – to give bright, spacious interiors not dependent on harsh artificial lighting.

- Reduction of noise – (including ventilation and plumbing) and use of sound absorbent surfaces.
- Art, nature and greenery – appropriately located for a positive impact on patient recovery.
- Garden areas – creating an ‘oasis’ and offering a calming view / place to sit, reducing stress and providing a sense of normality.
- Improved staff links with research centres.

The RUH have taken a phased approach to public and patient engagement to support the proposed relocation of all RNRHD services, beginning with a period of engagement around the overall proposal to relocate all services out of the Mineral Water Hospital site. Staff and clinicians have played a key role in shaping the future of these services, There have been numerous opportunities over the last three and a half years to hear more or provide feedback on the RUH’s plans and information has been available to patients and the public throughout this time.

The Trust has engaged with stakeholders at every stage, from the lead up to acquisition, acquisition and planning for service relocations. Stakeholders have also be involved in developing the design of the proposed new home for each service, and have help shaped the design of the RNHRD and Therapies Centre and Bernard Ireland House. Local media has reported extensively on the Trust’s plans to all relocate services out of the Mineral Water Hospital site and the development of the proposed new home for many of these services, The RNRHD and Therapies Centre. The low number of people choosing to provide feedback at this stage during the final formal engagement period, despite the opportunities provided, may indicate that many stakeholders are sufficiently reassured that services will continue to be delivered to the same high standard, in a new location.

Next Steps

This report will be provided to the appropriate Scrutiny committees for noting the proposal to relocate these services. Following the appropriate approvals services will relocate to Bernard Ireland House or the RNHRD and Therapies Centre in autumn 2019 subject to completion of the new build.

We would like to thank all of the people who took part in this programme of engagement and provided feedback on the planned relocation.

Summary of communication and engagement activities:

Activity	Purpose
Throughout 2016/17/18 – information available on RUH and RNHRD website, outlining proposal to relocate specified RNHRD services to a purpose built RNHRD and Therapies Centre on the RUH site. Opportunities to provide feedback at any time.	To raise awareness of proposed relocations, and provide opportunities for feedback.
August – September 2018 meetings with service leads to develop Public Patient Engagement Template and discussion re most appropriate way to engage with patient groups.	To ensure the relevant clinical teams had input in engagement activity, so that engagement activity was meaningful and relevant. To develop a stakeholder list to ensure relevant individuals/groups could be informed of the plan to relocate and have the opportunity to provide feedback and to agree on the best way to reach stakeholders.
August - September 2018 Public Patient Engagement Template developed to support engagement activity circulated to LHE communications working group.	To gain feedback from group and agreement on engagement approach and key stakeholders to engage with.
September 2018 Informal engagement session as part of the RUH Annual General Meeting.	Opportunity for members and wider public to hear more about the plans for a purpose built RNHRD and Therapies Centre on the RUH's Combe Park site/refurbished Bernard Ireland House and to provide feedback on the proposal to relocate pain service to the RUH site Over 100 attendees.
September/October	PPE template and approach shared with NHS England South Supplier Manager Specialised Commissioning for review, input and endorsement of approach.
25 October 2018, letter to BaNES CCG Wiltshire CCG Somerset CCG Swindon CCG	Update on the next stage of the RUH's planned service relocations - relocation of Bath Centre for Pain Services, CRPS and CCLER services from the RNHRD. Request to cascade information within organisation as appropriate, and with scrutiny officer.

	Request for scrutiny to suggest any further questions to feed into PPE activity
October 2018 Information about the proposal to relocate BCPS, CRPS and CCLER services to the RUH available and opportunities to provide feedback, including via an online questionnaire, available on the RUH website.	Inform current patients, stakeholders and wider public of proposals and signpost opportunities to feedback and influence. 9 respondents completed questionnaire.
October 2018 Posters, display boards and paper copies of feedback questionnaires distributed and displayed at the Mineral Water Hospital site. Information about the proposal to relocate services to the RUH available and opportunities to provide feedback.	Inform current patients of proposals and signpost opportunities to feedback and influence.
October, information/weblink/poster circulated to relevant groups for onward cascade: Banes Healthwatch North Somerset Healthwatch Wiltshire Healthwatch Swindon Healthwatch Action on Pain CRPS UK Burning Nights (CRPS)	Outline proposal and invite feedback. To request onward cascade to other relevant stakeholders, to ensure broad reach of engagement
October 2018 media release circulated to local media	Outline proposal and invite feedback.
Winter Insight Magazine – article in RUH community magazine	Outline proposal and invite feedback.
October – December Information update and sharing via RUH/RNHRD social media and relevant stakeholders. Information on digital screens at RUH and RNHRD. Information available to patients attending programmes.	Outline proposal and invite feedback

Information in GP Matters newsletter.