

# Advisory Information

A guide to producing NHS Consultation Documents in Yorkshire and the Humber.

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## Introduction

This guide & associated templates have been produced to aid NHS organisations in Yorkshire and the Humber in producing consultation documents. Consultation with patients and the public is an important part of NHS's role to involve patients and the public in planning and developing NHS services as identified in Section 242 & 244 of the National Health Service Act 2006.

This guide is not definitive and will evolve over time but we hope will provide organisations with helpful hints and tips, drawing on experience across the NHS in involvement and engagement. It should be read in conjunction with the NHS YAH Service Change Assurance Process.

Suggestions on how this guide and templates could be improved should be directed to: Olivia Bucknall – Tel: 0113 295 2148

NHS Yorkshire and the Humber would advise all NHS organisations to seek independent legal advice on consultation in addition to utilising this guide.

NHS Yorkshire and the Humber – August 2007

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## Advice

In formulating consultation documents organisations will wish to:

- Consult national evidence for change. For example, National Tsars Reports or the NHS Service Improvement – Communications Resource Pack ([www.osha.nhs.uk](http://www.osha.nhs.uk))
- Refer to the Cabinet Office Good Practice Guide on Consultation ([www.cabinetoffice.gov.uk/regulation/consultation/code/introduction.asp](http://www.cabinetoffice.gov.uk/regulation/consultation/code/introduction.asp))
- Consult the organisation's legal team
- Include key stakeholders, including the third sector, at an early stage in the process. Public & Patient Involvement Forums and Overview and Scrutiny Committees are an invaluable resource in working up consultations
- Demonstrate effective Patient and Public Involvement through the consultation and how this involvement has influenced the options being presented for consultation
- Consult all relevant guidance on consultation from the Department of Health advice ([www.dh.gov.uk](http://www.dh.gov.uk))
- It should be noted that the summary document is provided as a guide only. The Summary Document should provide clarity and not obscure the consultation, be consistent with the main document, describe the options clearly and contain enough information to enable any questions posed by the consultation to be answered by the public and include the same questions for the public as the main document

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## General design

- We suggest you use a graphic designer to input text into the template for a professional appearance
- For photos you can use the NHS photo library ([www.photolibary.nhs.uk/](http://www.photolibary.nhs.uk/)) or NHS Yorkshire and Humber photo library ([www.yorksandhumber.nhs.uk/photolibary](http://www.yorksandhumber.nhs.uk/photolibary)). If you use your own photographs, make sure these are of high quality (eg. taken by a professional photographer)
- We recommend that you use appropriate photos of positive situations and positive demeanours in non-traumatic situations. They don't necessarily have to be patients but must be representative of the local community
- The printed summary document should be widely available within the community. Send plenty of copies to a wide variety of audiences including health (doctor's surgeries, clinics, hospitals) and the wider community (libraries, community centres etc.)
- Alternative innovative formats of the consultation document should be available particularly large print. This might also include webspaces videos. This is particularly important if the consultation is aimed at a particular user group (e.g. Audio copies should be readily accessible for visually impaired)
- Always have the capability to produce the document in different formats or other languages (especially large print)
- Reports should always be uploaded to the Trusts websites for the start of the consultation
- It should be obvious how people can respond. People should be able to respond using a variety of means. If you include a telephone number ensure the line will be answered
- Maintaining the NHS identity is very important when we produce documents. Full details of the NHS identity, values and communication principles can be found on [www.nhs.uk/nhsidentity](http://www.nhs.uk/nhsidentity)

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## Writing style

- Use simplified but not simplistic language
- Do not use acronyms and jargon, ensure the document is 'plain english'
- Try not to be too wordy. Your consultation should provide clarity but not obscure the point
- Please do not use footnotes
- Use a friendly, personal tone
- Use tables and graphs to show figures and break up the text

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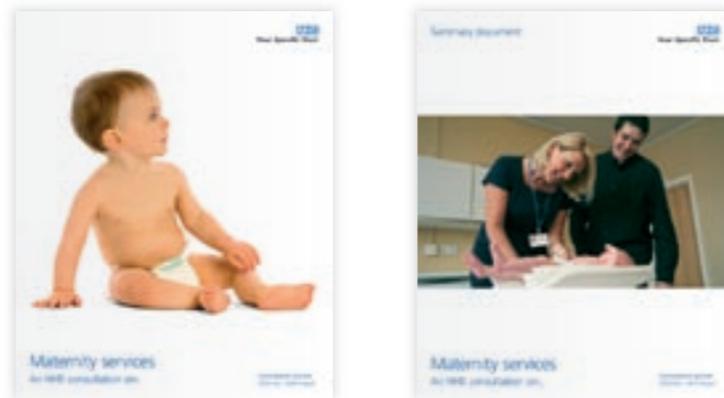
## Ideas for accessing the consultation

- Trust websites
- Printed versions across the community
- Web space eg YouTube films
- Audio-visual tapes in libraries
- Public meetings
- Request a hard copy or digital copy user friendliness of the document

## The front

The front cover must include:

- Clear logo of PCT or Trust following brand guidelines
- Appropriate photos of people from the community either on a white background or in a strip (see examples below)
- Title of consultation – this should be clear and concise
- Subtitle – ‘An NHS consultation on the future of...’ so as to ensure the objective of the consultation is immediately clear
- Consultation period – this should be at least three months (taking into account public holidays) for a written consultation, in accordance with the Cabinet Office Code of Conduct. Notice should be taken of other consultations, national and local elections, as such activities may influence timings of consultation processes



### Inner front cover

There should be an introduction to the document. If other languages are widely used in the consultation area ‘Copies available in different formats’ should be translated into the popular languages next to the English version.

### The NHS in...

The affected area should be pictured in a clear simple map possibly with affected health facilities marked. There should also be a description of the affected area above and the current position.

## Introducing the consultation

Please fill in two or three lines about the section.

### A letter from the lead clinician

A lead clinician, who will champion the proposals and the figure head for the consultation should be identified. He/She will be the public face of the consultation. The letter should be written clearly and cover why we are consulting, key points for the consultation and what feedback we need. Make sure you have clarified what a consultation is and that the introduction is consistent with the consultation options. Be clear who has developed the proposals and of patient involvement. Lastly ensure the lead clinician approves the text.

### Context

This section should discuss the background to the consultation such as existing services, facts and figures and prove the need for change.

It is worth while mentioning nation and local policy, priorities, and performance. However these should be presented as relevant considerations, but not as factors that have preordained the outcomes of the consultation.

### Involving patients, carers and the public

#### How we've involved patients and the public:

This section should identify how patients and the public have been involved in developing proposals. It might include meetings that have been held, specific patient groups who have been involved etc. Include how you have demonstrated effective Patient and Public Involvement throughout the consultation and how this involvement has influenced the options being presented for consultation.

### What you've told us

This section should identify key messages from patients and the public in pre consultation and engagement. The section should make clear what is important to patients and the public. It should be clear how these important issues have influenced the criteria the organisation will use to assess options following this conclusion of the consultation. The assessment criteria should be set out in this section.

### How you're involvement has influenced our vision

This section should identify how public involvement has influenced the trust's vision and these proposals. This section should include how the options have developed from important themes and key messages identified by patients and the public.

## Our vision for the future

Please include your organisation's vision for future services to set the scene.

### Why is change needed?

This section should explain why change is necessary with a clinical focus. You should provide a solid case for change. Make sure you are persuasive in your wording to engage the audience, but ensure that no case is advanced that cannot be supported. You should emphasise the human case for change not just facts and figures. Do not overstate any position.

### Options – including what will happen if nothing changes

You need to describe each option. This should include demonstration of the positive and negative points of the options particularly relating to your assessment criteria. You should also include how sustainable are the options overall.

You need to include reference to the broad patient safety implications, resource implications, financial and work force. Make sure that the options presented are assessed as affordable, feasible and taking into account patient safety.

Alternate between white and blue backgrounds to help differentiate between options.

## Preferred option

This section is intended to explain why the option is the favoured option. The preferred option should be linked to the assessment criteria, clearly identifying how the preferred option meets your criteria.



### What will not change

This may not be appropriate but there may be consultations where you wish to highlight certain factors involved with the consultation that will not be affected. This may help combat local concerns.

### What will improve

You should identify the benefits change will bring to the affected area.

### Key points

This should highlight key points from the vision for the future section.

### Glossary

Make sure terminology is simple – try not to make the glossary too long as you should be avoiding acronyms and use laypersons terms within the document.

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## Responding

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### Public meetings

This section should include details of public meetings. Ideally the lead clinician or a medical representative should lead public meetings and be named in this section. You may wish to consider different formats for public meetings, for example 'traditional' public meetings, discussion groups, 'data rooms' etc.

### Consultation timetable

This should include what stages the consultation has gone through to get to this stage, deadlines for responding and releasing results of the consultation and when decisions will be formed. Meeting dates can be included here.

### Who we are consulting

It is good practice to outline key organisations and groups you would like feedback from. Do not just focus on public stakeholders, commercial organisations and other official public bodies, recognise that the public and groups of the public are equally or more important.

### The assessment criteria

This section should include what decision criteria the organisation will use to agree which proposal should be pursued following consultation. This will have been included earlier in the document and should be consistent.

### The outcome

This section needs to identify:

- Who will make the decision and when
- How the organisation will communicate the decision to the public and those who have commented specifically
- That all consultation responses will be taken into account in reaching a decision
- That the decision will be made applying the criteria set out in the consultation document to assess options

### Have your say

This section should include contact details for who to respond to formally as well as general comments and enquiries. Formal responses would usually be to the lead clinician as it is more personal than a general organisation or team and the public feel like they will be listened to. However general enquiries/comments may be a team telephone number. Make sure this line will be answered. How to respond will include options such as fill in the form opposite, telephone number or personal email address. Make sure you encourage respondents to include evidence to support their case.

In the Feedback section you should outline how and when you would like feedback. Be clear if you want people to answer specific questions as it makes evaluation easier.

You should also make clear what criteria you will use to review the responses. Make clear this may change slightly as the consultation progresses. It is useful to have clear assessment guidelines to ensure continuity throughout the consultation.

It is a good idea to include Patient and Public Involvement and Freedom of Information contact details.

Freedom of Information (FOI) and data protection arrangements should be included. You should include a specific data protection clause, offering 'opt in' or 'opt out' as appropriate, within your consultation documents.

List the criteria that will be used to assess the responses and select the best option (This is a legal requirement).

### Questions

Make sure the questions on the response form are as precise as possible as it makes evaluation more simple. Ensure wording is clear and to the point.

Questions could be general or directly relating to certain options. Provide opportunity for those being consulted to suggest an alternative option.

Remember to allow time (usually at least two months) for collating responses. Make sure the figures are easy to get hold of and clearly presented.

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## Templates

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Adobe InDesign files have been set up to use as templates for both the Main and Summary Documents.

Don't move away from the design of the templates. Work over the top of these files duplicating pages when necessary.

Sections should start with full colour blue spreads with the title and a short introduction to the section.

Use images throughout to help break up the document, we recommend, roughly, a 1 to 4 ratio. When using text or quotes over an image make sure that they remain legible.

Paragraph and Character Styles have been set up in InDesign – these should always be used.

Leave clean 'white space' on every page – keeping the left margin clear. You can utilise the margin, with consideration, for The Summary Document.

Tables, graphs, quotes and highlighted text should be used to break up copy. If alternative colours have to be used on graphs or diagrams then be sympathetic to the colour palette.

Graphs should be clean and clear with plenty of surrounding space.

## Specifications

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Dimensions: w210mm by h257mm

Print: 4 colour CMYK

The document has to be set up in multiples of 4 pages. Use full page images if you are short on pages.

Maintaining the NHS identity is very important when we produce documents. Full details of the NHS identity, values and communication principles can be found on [www.nhs.uk/nhsidentity](http://www.nhs.uk/nhsidentity)



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