

Fit for the Future (FFTF) Public Consultation January 2021 Citizens' Jury Jury Report

15 February 2021

Commissioned by:



Designed and delivered by:



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Management Summary

The NHS in Gloucestershire has developed a “Centres of Excellence” approach which could mean that certain services currently provided at both Gloucestershire Royal and Cheltenham General Hospitals will be re-organised and may be provided from a single centre in future. Proposals for change were published as part of One Gloucestershire’s Fit for the Future consultation and responses sought from the Gloucestershire public and local NHS staff between October and December 2020. A citizens’ jury was held online in January 2021 about the public consultation; this is the report of that citizens’ jury.

The citizens’ jury was designed and carried out by Citizens’ Juries c.i.c. in partnership with the Jefferson Center (the founders of the citizens’ jury method). A Jury Commissioning Group of representatives from the NHS in Gloucestershire oversaw the project and set the questions which the jury tackled but not involved in the jury process design. The jury design and materials were reviewed in advance for potential bias by an independent oversight panel.

The jury of 18 citizens, broadly reflecting the Gloucestershire public, was recruited through advertising and came together on Zoom for eight afternoons between 19 and 28 January 2021. They heard evidence from a total of 12 expert and community witnesses about the public consultation processes and information, and deliberated together to answer the questions they were set. The jury worked extensively in small groups, developing and refining their conclusions which are captured in a separate Jurors’ Report.

Overall, the jury:

- Was neither confident nor not confident that the consultation process enabled the public to contribute meaningfully to decision making;
 - Gaining in confidence from the clear, concise language and limited jargon in materials
 - Losing confidence from running the consultation during the pandemic thus reducing participation;
- Was more confident than neutral that the information provided as part of the consultation enabled residents to be adequately informed about the proposed service changes thanks to use of plain English and information made accessible across multiple platforms;
- Overall, the jury considered the most important findings from the consultation to be:
 - Though 713 completed surveys may appear unsatisfactory to the general public, it is approximately double the number predicted by sample size calculation software;
 - Respondents did not necessarily reflect the demographics of the county: a significant number of the survey results came from Cheltenham;
 - There are concerns from both staff and patients about bed numbers and the increase of patients to Gloucestershire Royal which is already deemed to be overstretched.
- And a jury majority wanted the NHS Governing Bodies to know:
 - They were concerned about the number of Royal Mail mailshots actually delivered to homes and wondered if there were better ways to market the initial engagement process¹;
 - It would have helped if the FFTF consultation materials incorporated a response to the pandemic;
 - That the proposals should have focused more on patient experience.

¹ Note that the jury heard that the mailshot was one of a range of communication methods used including social media, radio, local newspapers etc.

Report of the jury

Between 19 and 28 January 2021, 18 people from across Gloucestershire met online for a “[citizens’ jury](#)”. The task for these citizens was to tackle a set of [jury questions](#) about the public consultation on [Fit for the Future, One Gloucestershire](#)’s programme proposing potential changes to certain specialist hospital services.

Over eight afternoons (each 1 – 5.30PM), the citizens heard from, and asked questions of, 12 [witnesses](#) and carried out group exercises to explore the jury questions. The jury deliberated and found answers to the [jury questions](#) together about:

- how confident they were in the public consultation process and the information that was distributed about the proposed service changes
- what they considered to be the most important findings from the public and staff responses to the consultation
- messages that a majority of the jury wanted to send to One Gloucestershire Governing Bodies.

The 18 jury members were selected randomly from 332 applicants to broadly represent the demographic mix of Gloucestershire (according to the 2011 census) in terms of age, gender, ethnicity, educational attainment, employment status and county district.

This report explains [why](#) the jury was held, how it was [designed](#), [how the jurors were recruited](#), [what they did](#), the [jury’s answers to the jury questions](#), and the [results of the end-of-jury questionnaires](#) completed at the end of the last day.

The report from the jurors themselves, and many detailed documents about the jury can be found at <https://citizensjuries.org/gloucestershire-hospitals-consultation-2021-jury/>. Witness slides and recorded presentations are at: <https://www.onegloucestershire.net/yoursay/fit-for-the-future-developing-specialist-hospital-services-in-gloucestershire/citizens-jury/>.

Why the citizens’ juries were run

This was the second of two citizens’ juries about the Fit for the Future programme in Gloucestershire, the first being in January 2020. Both were commissioned by NHS Gloucestershire Clinical Commissioning Group on behalf of One Gloucestershire. One Gloucestershire is an “[integrated care system](#)” which aims to provide more joined-up care for NHS patients. It comprises seven partner organisations: Gloucestershire County Council; Gloucestershire Care Services NHS Trust; Gloucestershire Health & Care NHS Foundation Trust; NHS Gloucestershire Clinical Commissioning Group; Gloucestershire primary care providers; and South West Ambulance Service NHS Foundation Trust. One Gloucestershire has developed a “[Centres of Excellence](#)” approach to providing specialist services from Gloucestershire’s two main hospitals (Gloucestershire Royal and Cheltenham General Hospitals). This approach aims to organise resources and services across the two hospital sites so as to enable better and more efficient patient care.

One Gloucestershire must consult the public about any significant changes to services, and is doing this as part of its “[Fit for the Future](#)” Programme. A public and staff engagement exercise was carried out through autumn 2019, to inform the development of “potential solutions” – changes to some specialist hospital services, and to develop evaluation criteria for assessing these potential

solutions. The citizens' jury in January 2020 contributed to this process.

A public consultation about the change proposals was run between October and December 2021. As the public consultation took place during the Covid-19 pandemic, face-to-face events were restricted. A leaflet about the consultation was delivered door-to-door across Gloucestershire and a variety of information booklets were distributed providing varying degrees of detail. Public and staff feedback was captured using a variety of methods including online surveys, social media, and drop-in events.

The citizens' jury was carried out in order to inform the cross-section of the public on the jury about the public consultation process, information and responses, and ask the jury a variety of questions to assess the process and information. The outputs from the jury were designed to inform the decision makers as they consider the case for implementing a set of potential service change solutions carried into the 2020 public consultation.

An earlier citizens' jury was carried out in January 2020 to gain public feedback on the approach and service changes being considered by One Gloucestershire to inform what change proposals were chosen. A report and other documents about the 2020 jury can be found at: <https://citizensjuries.org/371-2/>.

Planning and designing the citizens' jury

The January 2021 citizens' jury was planned, designed and refined over a period of approximately six months by Citizens' Juries c.i.c. and the Jefferson Center (with the exception of the jury questions which were set by the [commissioners of the jury](#)). The main aspects of the jury design were:

- the [jury questions](#);
- the jury [demographics and recruitment](#) approach;
- the brief and selection of individuals to act as [expert witnesses](#);
- the brief and selection of individuals to act as members of the [oversight panel](#);
- the [programme of jury activities](#) across the five days; and
- the design of the [questionnaires](#) completed at the end of the jury.

The design documentation is published and available at:

<https://citizensjuries.org/gloucestershire-hospitals-consultation-2021-jury/>

Bias, both conscious and unconscious, is a risk to consider in planning citizens' juries.[2] For example, it is very difficult to know what constitutes "impartial information" or balanced argument, and almost every design choice, even down to a bullet point on a presenter's slide, could be challenged on grounds that it might manipulate the citizens' jury towards one outcome or another.

Bias can be monitored and minimised but not eliminated. To monitor and minimise bias on this project, an [oversight panel](#) was appointed to review the jury design and materials, and report potential bias. They were chosen to be people with relevant topic knowledge, and no conflict of interest in the outcome of the jury. Members of the panel each completed a bias evaluation form after the jury, published at: <https://citizensjuries.org/gloucestershire-hospitals-consultation-2021-jury/>.

The [end of jury questionnaire](#) also asked about bias.

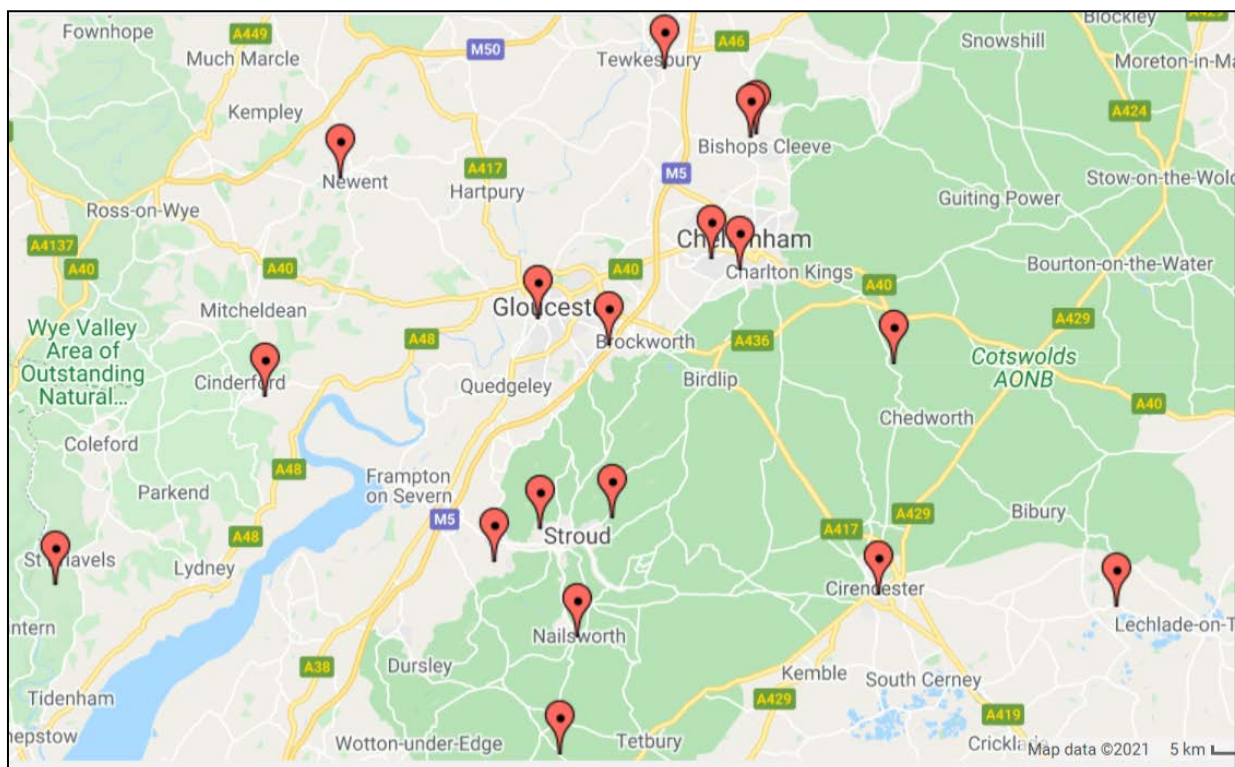
Other design controls used to monitor and minimise bias included:

- The [commissioners of the jury](#) were involved in setting the jury questions and advising on NHS witnesses but were independent from the design of the jury process and outcomes;
- The jury worked with independent facilitators from the [Jefferson Center](#) to construct and agree their own [Jurors' Report](#) of their findings; and
- The detailed jury design and results documentation were [published](#).

Jury recruitment

In total, 332 people applied to be part of the jury. They applied by entering their personal details, including relevant demographics, into an on-line survey. Candidates were shortlisted based on their demographics alone using an algorithm supplied by the [Sortition Foundation](#). Shortlisted candidates had a brief telephone or Zoom interview so that any ineligible candidates (e.g. current NHS professionals) could be identified and excluded. Some jurors were recruited by email or word of mouth, but the majority came through the “Indeed” jobs website. In order to guard against any bias from using a jobs website, the sample was controlled for employment status to ensure the majority were employed or self-employed. Each juror was paid £480 for eight afternoons. Paying participants is an important way to limit self-selection bias.

One week before the jury, 18 jurors and three reserves had been recruited. The jury demographics were all within target ranges, broadly reflecting the population of Gloucestershire (in 2011 census) in terms of age, gender, ethnicity, and educational attainment, District (in Gloucestershire), and employment status. One person withdrew just before the jury began, and two people withdrew during the first two jury days, all because of unforeseeable changes to personal circumstances. The three reserve jurors were able to step in. Despite these late withdrawals a good demographic mix was still achieved. The geographical distribution of the 18 jurors across Gloucestershire was affected by the late withdrawals but there was still a fair spread (see map below). There were 4 jurors from Cotswold District, all chosen at random, but by chance none was from the north of the District.



The jury process and jurors' report

The jury took place online using Zoom from 19 to 22 January, and from 25 to 28 January 2021 (13.00 to 17.30 each day) with:

- Two facilitators: Kyle Bozentko and Sarah Atwood of the Jefferson Center
- 12 [expert witness](#) presentations (a mix of expert and community witnesses);
- Group exercises and deliberation; and
- The [Jurors' Report](#) in the jurors' words, and the [End-of-jury questionnaire](#), produced on the end of day five.

The jury met in private to protect the identity and privacy of jury participants from people recording and publishing their images and voices through the internet. For this reason, the transparency of the jury design and process is particularly important. The outline jury schedule and the slides and audio recordings from expert witnesses are published on the [One Gloucestershire webpage](#) dedicated to the jury. More detailed jury documents are available on the [Citizens Juries c.i.c. website](#).

A full description of the 12 witness presentations, plus the questions posed to the jury and their conclusions, are set out within the [Jurors' Report](#). The results are expressed in their own words using the outputs of the group work over the two weeks. The Jurors' Report was shown to, and agreed by, the jury on the final day of the jury. It was collated by the jury facilitators and contains the main conclusions of the jury in the jurors' own words plus a summary of each day's activities. The jurors were led page-by-page through the report, which was displayed to the group on Zoom, to gain the jurors' acceptance that it fairly represented their work and conclusions. The report was formatted and the final version published by Citizens Juries c.i.c. without external review on 1 February 2021, two working days after the jury ended.

Jury questions and answers

The jury was charged with tackling the six questions set out in [Appendix B](#). In order to provide reasoned answers to those questions, the jurors listened to witness presentations, asked questions of those witnesses, and deliberated together in small groups in Zoom breakout rooms throughout the week. Their answers were developed and prioritised through group work, other than for questions 1b and 2b ("how confident are you...?") where results were achieved through individual online voting.

The full jury results are published in the [Jurors' Report](#). The summary below aims to capture the main answers to the jury questions (but see the Jurors' Report for the full detail including the reasoning behind priorities). Unlike the full Jurors' Report, it only includes reasoning that was supported by at least a third of the jury (i.e. a minimum of 6 votes). Each juror had multiple votes so the total votes often exceed 18. The narrative reasoning in the tables below is taken directly from the Jurors' report and is in the words of the jurors.

The jury questions are shown below *in italics*.

Q1. How good was the FFTF consultation process?

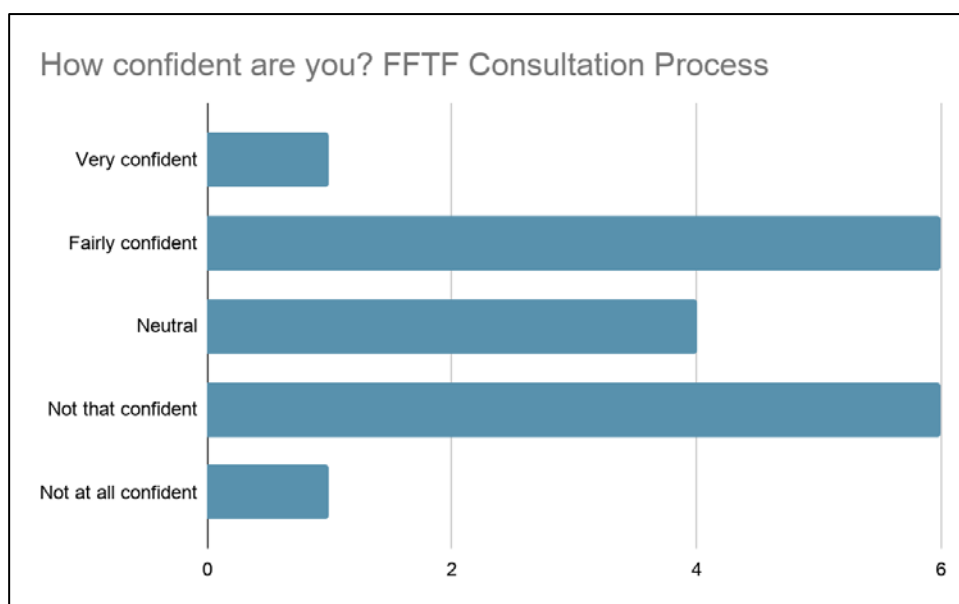
In order to enable the jury to assess the quality of the FFTF consultation process, they heard evidence from an expert witness about what constitutes a good consultation process and developed their own thinking on this question (set out below).

Q1a. What are the characteristics of a good consultation process?

Quality / Characteristic of a Strong or Good Consultation Process	Why It Matters
Consultation seeks to incorporate guidance from relevant bodies, involves a wide variety of the public in its decisions, engages with all sections of society, including groups that are harder to hear, and is inclusive regarding location, access, and geography. - 16 votes	<p>- It is important to ensure all members of the public have the chance to have their say because everyone should be able to have the information available to be able to make an informed decision.</p> <p>- Shows that the consultation attempts to reach as many of the public as possible and aims to make sure changes made are in the best interest of as many people as possible.</p>
Process uses clear, concise and targeted information and materials. - 11 votes	<p>- This explains why proposed changes are necessary, informs the public with reasoning behind the decisions, and enables the public to evaluate the proposals and make informed decisions.</p>

Q1b. Based on what you have learned, how confident are you that the consultation process has allowed all residents to contribute meaningfully to the decision-making process?
 [Very confident/Fairly confident/Neutral/ Not that confident/Not at all confident]

The results indicate that overall the jury was neither confident nor not confident about the consultation process with a symmetrical split in voting:



- What are the most important reasons to be confident [that the consultation process has allowed all residents to contribute meaningfully to the decision-making process]?

Reasons to be confident that the consultation process has allowed residents to contribute meaningfully to the decision-making process.

Clear, concise language and limited jargon in materials - 11 votes

Range of platforms and options for participating and responding - 9 votes

Variety of versions of documents with varying detail was provided - 8 votes

Significant effort made to reach and involve harder to hear groups - 6 votes

- *What are the most important reasons to not be confident [that the consultation process has allowed residents to contribute meaningfully to the decision-making process]?*

Reasons to not be confident that the consultation process has allowed residents to contribute meaningfully to the decision-making process.

Conducting consultation during Covid-19 pandemic compressed timeline, made it more difficult to participate, limited options for engagement and reduced quality - 12 votes

Marketing and advertising strategy did not raise awareness of consultation - 10 votes

Relying on Royal Mail Postal leaflet as primary outreach led to reduced awareness and participation - 9 votes

Overemphasis on targeted groups may have reduced awareness among and participation among general public - 8 votes

2. How good was the consultation information?

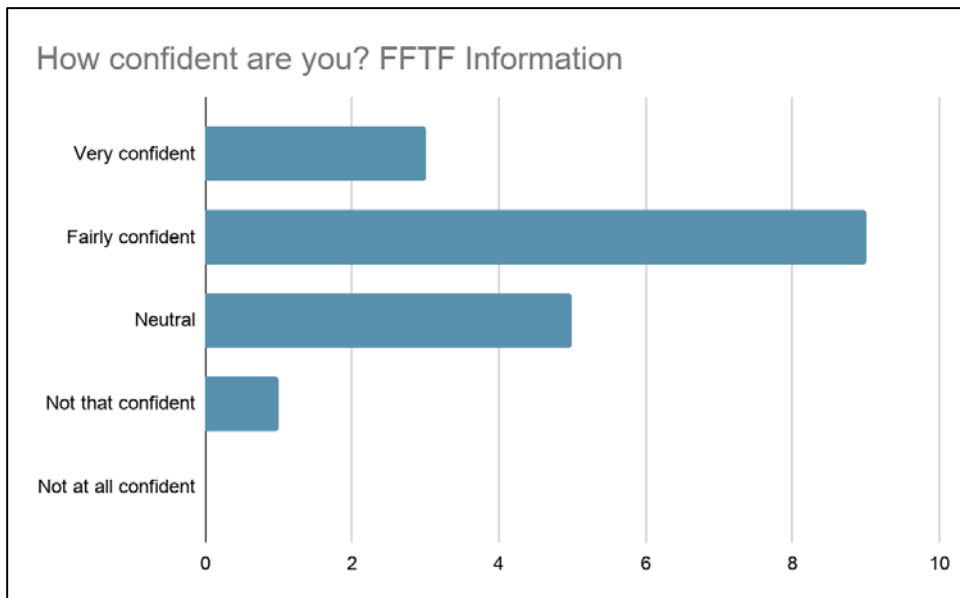
In order to enable the jury to assess the quality of the FFTF consultation information, they heard evidence from an expert witness about what constitutes a good consultation information and developed their own thinking on this question (set out below).

2a. What are the characteristics of good consultation information?

Quality / Characteristic of Strong or Good Consultation Information	Why It Matters
<p>Clear and consistent presentation of information using "Plain English." - 10 votes</p>	<ul style="list-style-type: none"> - Demonstrates an understanding by the process organisers that they acknowledge what is required by the service users and that information is being shared among the public. - Matters because participants need to properly understand the proposed changes so they can make relevant contributions and understand the information they are asking to opionate on. - Matters because overly complicated language/ technical jargon can be off putting/confusing to

	some people and be difficult for those w/disabilities and dyslexia, etc.
Information is accessible across multiple platforms and tailored to specific audiences. - 9 votes	- To ensure it reaches a wide audience, allowing as many people to be aware of it as possible and because different audiences will have differing capacities to understand and feedback on information
Data is accurate, specific, and up-to-date or responsive when appropriate. - 7 votes	- Demonstrates that the consultation is credible and reliable.

2b. Based on what you have learned, how confident are you that the information provided through the consultation enabled residents to be adequately informed about the proposed service changes?
 [Very confident/Fairly confident/Neutral/ Not that confident/Not at all confident]



- What are the most important reasons to be confident?

Reasons to be confident that the information provided through the consultation enabled residents to be adequately informed about the proposed service changes.
Uses "plain English" and provides supplemental glossary to explain jargon - 15 votes
Information was accessible across multiple platforms and formats - 14 votes
Included the rationale for why proposed changes were being considered and the reasons these changes would be beneficial - 10 votes

- What are the most important reasons to not be confident?

Reasons to not be confident that the information provided through the consultation enabled residents to be adequately informed about the proposed service changes.
Alternatives to proposals not easy to find in consultation, nor explanation of why alternative

options were not chosen or available to preferred options - 16 votes
Methods used to distribute information (and solicit feedback) was inadequate - 11 votes
Continuing the consultation during COVID-19 pandemic hindered advertisement of information - 11 votes
Easy Read materials and survey were difficult to access and did not provide enough relevant information about proposed changes - 9 votes

Q3. What are the most important findings from the FFTF consultation results?

Q3a. What are the most important findings from the consultation for the NHS Governing Bodies to consider (such as impact on local community, and suggestions to reduce any negative impacts)?

- Why?

Important Findings from FFTF consultation results for NHS Governing Bodies to consider	Why It Matters
It is important to know that although the number of 713 completed surveys appears to be a small countywide response, this is approximately double the number survey models recommend. The Fit For the Future consultation group were happy with the overall response, double than what was predicted with response software. However, due to the population being approx 650,000, the number of completed surveys may appear unsatisfactory to the general public. - 11 votes	<ul style="list-style-type: none"> - Suggests the general public is pretty apathetic and the FFTF are happy not pushing to get the numbers higher in all age demographics. Whilst some members of the jury felt it was a low number. - This helps us to know that the response rate, and therefore results, is robust enough to base decisions. This is because it shows that most areas were represented.
There was a range of respondents however this did not necessarily reflect the demographics of the county. A significant number of the survey results came from Cheltenham with relatively small proportions from elsewhere. - 10 votes	<ul style="list-style-type: none"> - This demonstrates that the consultation results captured different sections of the community (including 20% from people who considered themselves to have a disability), but some groups were under-represented (few responses from under 45 year olds). - This is important because it could mean that the consultation results are inappropriately biased toward Cheltenham where evidence has suggested there is concern that the hospital in Cheltenham may be closed. The survey results may therefore be skewed and biased in favour of proposed changes and therefore do not reflect the views of the residents of Gloucestershire as a whole.
There are concerns from both staff and patients about bed numbers and the increase of patients	<ul style="list-style-type: none"> - A plan should have been provided to ensure concerns were heard and addressed as well as

to GRH which is already deemed to be overstretched (pre-Covid-19). - 8 votes	potential negative effects on other areas of the hospital are mitigated against.
Despite the level of participation being deemed as sufficient, we feel it is not representative. - 7 votes	- The results are not a true representation of the population of Gloucestershire because of the low response rate.
The overall level of support for the proposals was around 70% for all options from the general public and staff that responded to the survey and staff consultation. - 6 votes	- This suggests the proposals are acceptable to the general public and the NHS staff.

4. Any other messages for the Governing Bodies?

Is there anything else about the consultation that a majority of the jury would like the NHS Governing Bodies to consider in the decision-making process?

Something still missing, needs to be addressed, or requires further clarification re: the FFTF consultation	Why It Matters
We are concerned regarding the number of Royal Mail mailshots actually delivered to homes and wonder if there are better ways to market the initial engagement process, to get more people to know about the consultation, and hopefully contribute to the results. 16 Yes votes / 2 No votes)	This will get more peoples' opinions and a better representation of the people in Gloucestershire, and would help us to know the majority have had a chance to be part of the consultation.
The Covid-19 pandemic has changed our way of life considerably - it would have helped for the FFTF consultation to incorporate a response to the pandemic in their presented material. (15 Yes votes / 3 No votes)	This matters because the plans drawn up before the pandemic may not be relevant anymore and the pandemic directly affects the day-to-day running of the services.
We have been assured that the golden thread of patient experience is the reason for this project, but there is nothing about that in the proposals. It is important that at the same time as any reorganisation of medical services, there is a review of the way patients are treated, their dignity and the facilities offered associated with new medical proposals. There is always something about this in external audits. (16 Yes votes / 2 No votes)	It's about the patients!

Jury questionnaire results

All jury members completed a daily feedback questionnaire at the end of the first seven jury days. When asked whether staff were conducting themselves in a neutral manner, over 99% of responses from jurors over the seven days were either "very satisfied" or "satisfied" with over

80% being “very satisfied”. Participants also responded each day on whether they agreed that they were being allowed to fully participate in the process. Satisfaction rates were again very high (97%) but slightly lower than those around staff neutrality.

The 18 jurors completed a fuller end-of-jury questionnaire at the end of the jury. The full questionnaire design and the results are available at: <https://citizensjuries.org/gloucestershire-hospitals-consultation-2021-jury/>. An end-of-day bias questionnaire was also completed by jury members and the results of these are available on the same webpage.

Three questions in the end-of-jury questionnaire concerned potential bias.

When asked “Did you ever feel that the expert witnesses (other than the community representatives on Friday) tried to influence you towards particular conclusions?”

- 11 said “not at all”;
- 5 said “perhaps occasionally”
- 2 said “sometimes”
- No one answered “often” or “very often”.

On the organisers:

- 17 jurors said that the facilitators exhibited no bias (one said “perhaps occasionally”); and
- Similarly, 17 said that no one else outside the jury exhibited bias
- 17 said they were given a fair balance of information (one said there was “some bias” in information presented).

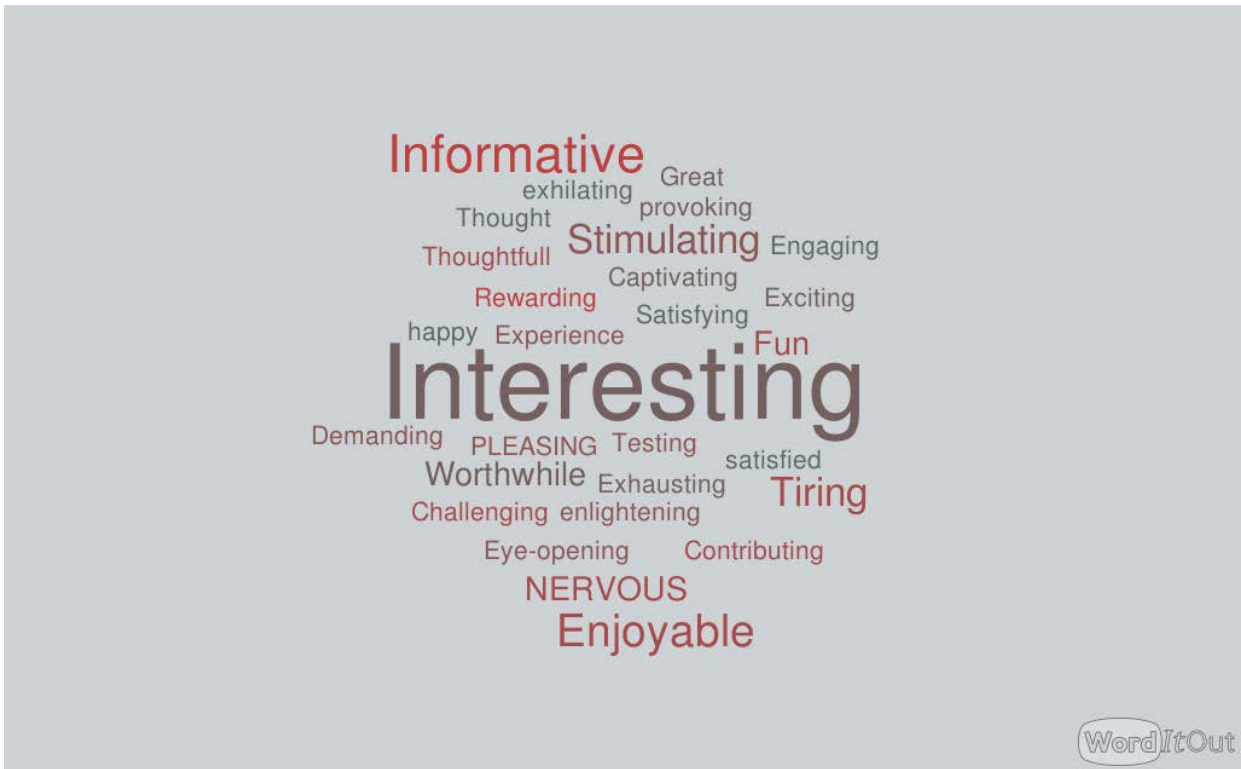
When asked “How easy or difficult did you find doing the jury remotely and online?”

- 12 said “very easy”
- 4 said “mostly easy”
- 2 said “neither easy nor difficult”
- No one said it was “mostly difficult” or “very difficult”.

Asked how interesting they found the jury (on a five point scale from “very interesting” to “very dull”), 17 jurors said they found it “very interesting”, and one said “mostly interesting”.

In another question, each jury member was asked to provide three words to sum up their experience of the jury. The words of the 18 jury members are constructed in a “word cloud” below (large words were said more often).

“Word cloud” of jurors’ experience of the citizens’ jury



Appendix 1: further information about the juries

The Citizens' Jury Method

Like much public policy, assessing a public consultation about how specialist services should be delivered across two hospitals is complex with a lot of information and many arguments to consider. Surveys and focus groups provide useful information about what the public thinks, but they are not mechanisms to inform people. A citizens' jury can tell policymakers what members of the public think once they become more informed about a policy problem. In a citizens' jury, a broadly representative sample of citizens are selected to come together for a period of days, hear expert evidence, deliberate together, and reach conclusions about questions they have been set. The method was devised by Dr Ned Crosby in 1971. He went on to set up the Jefferson Center, which produced the Citizens' Juries Handbook[3], the method followed by Kyle Bozentko and Sarah Atwood of the Jefferson Center when designing and running the jury in Gloucestershire in partnership with Citizens Juries ci.c.

Citizens' Juries are a form of "deliberative democracy", based on the idea that individuals from different backgrounds and with no special prior knowledge or expertise can come together and tackle a public policy question. A citizens' jury is a particularly relevant method for informing public bodies making value judgements. [Melbourne City Council](#) appointed a citizens' jury to determine how to allocate its A\$5 billion budget, and the council is implementing virtually all of the jury's recommendations. A [Citizens' Assembly](#) (the same method but with more participants than a citizens' jury) was commissioned by the Irish government on whether to change the Irish Constitution on abortion recommended change, leading directly to the [national referendum](#) on the subject. Mostly citizens' juries or assemblies *inform* policy decisions, although there are examples of these bodies being constituted to [make decisions](#).

Witnesses

Witnesses were chosen to provide relevant information to the members of the jury to enable them to answer the jury questions. Each witness gave a presentation and then answered questions posed by the jurors.

The expert witnesses were issued with a brief prior to preparing their presentations. The witness brief is published at: <https://citizensjuries.org/gloucestershire-hospitals-consultation-2021-jury/>. The witness slides were reviewed in advance to check for potential bias by the [oversight panel](#). The panel identified whether changes were "required" or "advisory". All "required" changes, and most "advisory" changes were made prior to the start of the jury.

Date	Witness presentation topic	Witness
19 Jan	Where are we now, how did we get here and what happens next?	Micky Griffith, One Gloucestershire (NHS)
20 Jan	a) What is Fit for the Future (FFTF)?	a) Prof. Mark Pietroni, One Gloucestershire (NHS)

	<p>b) What does a good NHS consultation process look like?</p> <p>c) What does good consultation information look like?</p>	<p>b) Frances Newell, NHS England</p> <p>c) Frances Newell, NHS England</p>
Jan 21	<p>a) What has the FFTF engagement and consultation process been?</p> <p>b) What information has the NHS provided for the public consultation?</p>	<p>a) Micky Griffith and Becky Parish, One Gloucestershire (NHS)</p> <p>b) Becky Parish, One Gloucestershire (NHS)</p>
Jan 22	<p>What in your view were the strengths and weaknesses of the FFTF public consultation?</p>	<p>Five separate presentations from community representatives all on same topic:</p> <p>Russell Peek, Staff Governor, Gloucestershire Hospitals NHS Foundation Trust</p> <p>Chris Hickey and Julius Marstrand, REACH</p> <p>Angela Gilbert, Know Your Patch Networks</p> <p>Trevor Rawlinson, Patient Participation Group from Church Street Medical Practice</p> <p>Vicci Livingstone-Thompson, Inclusion Gloucestershire</p>
Jan 26	<p>a) What can we learn and where should we be cautious when interpreting consultation results?</p> <p>b) What were the results of the consultation?</p>	<p>a) Richard Stockley, Surrey Heartlands Health and Care Partnership</p> <p>b) Becky Parish, One Gloucestershire (NHS)</p>

The oversight panel

The oversight panel was appointed by Citizens Juries c.i.c. to help monitor and minimise bias. The panel reviewed the citizens' jury design, and much of the detailed jury documentation, including the end-of-jury questionnaire, and the slides from the presentations by the expert witnesses, including the video produced by the NHS to be presented alongside Mark Pietroni's slides. Issues identified by the panel were marked as either "advisory" or "required" and fed back to presenters resulting in changes to these materials where appropriate. The three oversight panel members, chosen for their lack of conflict of interest in any particular jury outcome, were:

- Karen Newbiggin, Reader in Healthcare Policy and Management, Health Services

- Management Centre, University of Birmingham;
- Ben Stokes, Chair of Health and Wellbeing Board, South Gloucestershire Council;
 - Helen Webb, Healthwatch Gloucestershire Manager.

The brief for the oversight panel is available at: <https://citizensjuries.org/gloucestershire-hospitals-consultation-2021-jury/> Each member of the oversight panel completed a questionnaire about bias, published at the same webpage.

Two panel members was “fully satisfied” and one panel member was “mostly satisfied” that the jury was designed with the *aim* of minimising bias. Two of the three panel members were “mostly satisfied” that this aim was achieved, and one was “fully satisfied”.

Citizens’ jury project team and commissioners

The project manager was Malcolm Oswald, Director of [Citizens Juries c.i.c.](#) and an Honorary Research Fellow in Law at The University of Manchester. He worked closely with the jury commissioners, the jury facilitators, [oversight panel](#), and [expert witnesses](#). Kyle Bozentko, Executive Director of the [Jefferson Center](#) and his colleague Sarah Atwood led the jury design process and facilitated the juries. Chris Barnes and Amanda Stevens recruited and supported the jurors.

The juries were commissioned and paid for by NHS Gloucestershire Clinical Commissioning Group. A Jury Commissioning Group comprising Micky Griffith, Becky Parish, Ellen Rule, Simon Lanceley, all from One Gloucestershire oversaw the project and particularly the setting of the jury questions. Malcolm Oswald provided three-weekly highlight reports to the Jury Commissioning Group, and had liaison meetings with Becky Parish and Micky Griffith through the project.

Appendix 2: The Jury Questions

The jury was tasked with responding to a number of questions set out below. The jury was designed to prepare, inform and otherwise enable the jurors to provide reasoned answers to these questions (the latter being set out in full in the [Jurors' Report](#)).

The questions for the citizens' jury are:

1. How good was the FFTF consultation process?

1a. What are the characteristics of a good consultation process?

1b. Based on what you have learned, how confident are you that the consultation process has allowed all residents to contribute meaningfully to the decision-making process?

[Very confident/Fairly confident/Neutral/ Not that confident/Not at all confident]

- What are the most important reasons to be confident?
- What are the most important reasons to not be confident?

2. How good was the consultation information?

2a. What are the characteristics of good consultation information?

2b. Based on what you have learned, how confident are you that the information provided through the consultation enabled residents to be adequately informed about the proposed service changes?

[Very confident/Fairly confident/Neutral/ Not that confident/Not at all confident]

- What are the most important reasons to be confident?
- What are the most important reasons to not be confident?

3. What are the most important findings from the FFTF consultation results?

3a. What are the most important findings from the consultation for the NHS Governing Bodies to consider (such as impact on local community, and suggestions to reduce any negative impacts)?

- Why?

4. Any other messages for the Governing Bodies?

Is there anything else about the consultation that a majority of the jury would like the NHS Governing Bodies to consider in the decision-making process?

Appendix 3: Bibliography

1. Armour, A., *The citizens' jury model of public participation: a critical evaluation*, in *Fairness and competence in citizen participation*. 1995, Springer. p. 175-187.
2. Jefferson Center. *The Citizens' Jury Handbook*. 2004 [cited 09 Feb 2016].