

HAMPSHIRE COUNTY COUNCIL

Report

Committee:	Health and Adult Social Care Select Committee
Date of Meeting:	15 March 2017
Report Title:	Issues Relating to the Planning, Provision and/or Operation of Health Services
Reference:	8187
Report From:	Director of Transformation & Governance

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1. **Summary and Purpose**

- 1.1. This report provides Members with information about the issues brought to the attention of the Committee which impact upon the planning, provision and/or operation of health services within Hampshire, or the Hampshire population.
- 1.2. Where appropriate comments have been included and copies of briefings or other information attached.
- 1.3. Where scrutiny identifies that the issue raised for the Committee's attention will result in a variation to a health service, this topic will be considered as part of the 'Proposals to Vary Health Services' report.
- 1.4. New issues raised with the Committee, and those that are subject to on-going reporting, are set out in Table One of this report.
- 1.5. The recommendations included in this report support the Corporate Strategy aim of maximising wellbeing through the overview and scrutiny of health services in the Hampshire County Council area.

Topic	Relevant Bodies	Action Taken	Comment
Evaluation of the closure of the Kings Worthy branch surgery <i>(Monitoring item)</i>	West Hampshire CCG Friarsgate Surgery	An update report is at Appendix One .	The HASC considered this item in June 2016, where a number of recommendations were made. Papers relating to these can be accessed here .
Recommendations:			
That Members:			
<ol style="list-style-type: none"> 1. Note the evaluation update following the closure of the Kings Worthy branch of the Friarsgate Surgery, Winchester. 2. Request any additional information required. 			
Topic/ inquiry	Source	Action Taken	Comment
Temporary closure of Hamtun Ward, Antelope House	Southern Health NHS FT	Update report attached as Appendix Two	
Recommendations:			
That Members:			
<ol style="list-style-type: none"> 1. Note the progress by Southern Health NHS Foundation Trust to reopen the Hamtun Ward, Antelope House, and to recruit to staff vacancies. 2. Request a future update on staffing in six months' time. 3. Request any additional information required. 			

CORPORATE OR LEGAL INFORMATION:

Links to the Corporate Strategy

Hampshire safer and more secure for all:	yes
Corporate Improvement plan link number (if appropriate):	
Maximising well-being:	yes
Corporate Improvement plan link number (if appropriate):	
Enhancing our quality of place:	yes
Corporate Improvement plan link number (if appropriate):	

Section 100 D - Local Government Act 1972 - background documents

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document

Location

None

IMPACT ASSESSMENTS:

2. Equality Duty

- 1.1 The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:
- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act;
 - Advance equality of opportunity between persons who share a relevant protected characteristic (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it;
 - Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- a) The need to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic;
 - b) Take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it;
 - c) Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity which participation by such persons is disproportionately low.
- 1.2 **Equalities Impact Assessment:** This is a covering report for items from the NHS that require the attention of the HASC. It does not therefore make any proposals which will impact on groups with protected characteristics.

2 Impact on Crime and Disorder:

- 2.1 This paper does not request decisions that impact on crime and disorder

3 Climate Change:

- 3.1 How does what is being proposed impact on our carbon footprint / energy consumption?
- 3.2 How does what is being proposed consider the need to adapt to climate change, and be resilient to its longer term impacts?
- No impacts have been identified.

Friarsgate Practice: Report to Hampshire Health and Adult Social Care Select Committee



Quality services, better health



Background

- Friarsgate Practice in Weeke serves a patient population of 24,717. It's branch surgery (serving a population of 1,794), located 3 miles away in Kings Worthy closed on 31 May 2016.
- As requested by the Hampshire Health and Adult Social Care Select Committee on 21 June 2016, this report provides an update on:
 - the evaluation of the Wellbeing Café – a new model of care for frail and vulnerable patients
 - actions taken to improve access to appointments at Weeke
 - transport from Kings Worthy to Weeke



Evaluation of the Wellbeing Café

- A new holistic service, a Wellbeing Café has been provided for frail and vulnerable patients every Wednesday morning from June 2016
- A proactive approach is taken, with patients (typically aged over 65 years with two or more long term conditions) invited to attend the café so that their needs can be addressed in a holistic and integrated way in one visit
- From June to December 2016, over 250 patients have attended the Wellbeing Café
- Key features include extended 20 minute GP appointments, nurse appointments and access to blood tests as required. Care is tailored to individual need and patients and their carers are actively involved in joint decision making
- Social prescribing is a key component provided by a volunteer recruited by Community First who gives advice and actively signposts patients to a range of local community services, charities, clubs and voluntary organisations



Evaluation of the Wellbeing Café

- The Practice Patient Participation Group is fully engaged with the Wellbeing Café and has provided help to guide patients to their various appointments, giving them a cup of tea or coffee and introducing patients to Social Prescribing.

Going Forward into 2017

- The Practice has reviewed the model and learning to date, and from February 2017 has commenced a cycle of bi-weekly condition led clinics. This will extend the holistic wellbeing approach to a wider cohort of patients within the Practice, as well as the social prescribing aspect of the service (recognised as one of the 10 national high impact actions to release time for care within general practice). Each clinic, to which patients will continue to be proactively invited, will be supported from a social prescribing perspective by a relevant body or charity to provide signposting and advice.



Evaluation of the Wellbeing Café

- Wellbeing clinics will include:
 - **Frail and vulnerable people:** These will continue – GP led and nurse clinics with access to blood tests. Social prescribing provided by Age UK
 - **Mental Health and Dementia:** GP led with access to blood tests if required; mental health and dementia reviews completed. Social Prescribing provided by Andover Mind and Quit4life
 - **Learning Disabilities:** GP led review; Social Prescribing to be identified
 - **Sexual Health:** Nurse led at the University. Social Prescribing provided by 'let's talk about it'
- The Practice will continue to evaluate the wellbeing café clinics to understand what works best from a patient and practice perspective and to inform the model going forward. This will include a review of patient reported outcome measures and feedback on patient experience. The Practice will also continue to develop social prescribing so that patients have access to signposting advice and support, including the Hampshire County Council website 'Connect to Support'

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Improving Patient Access

Additional actions taken by the Practice to improve access to appointments:

- **Reducing “did not attend” (DNAs):** Implementation this month of an IT solution, MJOG, which automatically sends an appointment text reminder to patients with the ability, at one touch, for them to cancel the appointment. This system has saved up to 60% of DNAs in some practices, which would make a further 89 sessions available throughout the year for patients registered with Friarsgate. The impact will be monitored.
- **eConsult:** Implementation of a web based tool which gives patients, via the practice website, access 24/7 to medical advice. The patient effectively triages themselves by choosing from a range of options depending on the condition or query they have. There is a comprehensive range of self-help guides for many conditions and some patients may be directed to a pharmacist in the first instance. Those who do require advice from their GP receive a response the same day with what the GP feels is the most appropriate action to take. This may include on-line advice, a telephone consultation or face to face appointment.

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Improving Patient Access

- Currently on average 150 patients are using e-consult every week with a combination of self – help, administration type enquiries, and e-consultations with either a member of the Nursing team or a GP providing immediate access.
- Also under consideration are ways in which the skill mix of the extended care team can be expanded to include a Pharmacist and Advanced Nurse Practitioners to lead the on the day acute care service.
- The results of the latest national GP Patient Survey will be published in July 2017. The survey assesses patients experience of healthcare services provided by GP Practices, including access to GP surgeries and making appointments. The results will help to assess the impact of the actions taken to improve access for patients.



Transport

- To ease transition and determine the real demand for transport, the following were implemented from 1 June 2016:
 - Daily Dial a Ride service at a discounted return fare of £3.80
 - Promotion of the Good Neighbours Scheme
 - Free Wednesday morning mini-bus service
- The free mini bus service between Kings Worthy and Weeke was promoted to all 1,794 patients who were written to with details of the service. All patients invited to attend the Wellbeing Café were also offered the service. Only 10 people utilised the mini bus service between June – August and the decision was therefore taken to stop the service in September.
- The Dial a Ride Service and Good Neighbours Scheme continue to be available and to be actively promoted.
- At the 21 June HASC meeting, the Chairman also agreed to write to the Executive Member for Environment and Transport on issues relating to public transport from the Worthies to Weeke, Winchester

HASC is asked to note the update on Friarsgate Practice in Winchester.

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**Hampshire County Council
Health and Adult Social Care Select Committee
March 2017**

Briefing note: Re-opening of Hamtun ward (PICU) at Antelope House, Southampton

Background

Antelope House is a mental health hospital in Southampton, providing care to 52 patients who are acutely unwell. There is a female ward which supports 21 women, a male ward which supports 21 men, and a mixed Psychiatric Intensive Care Unit (PICU), Hamtun ward, which supports 10 men and women.

We aim to support patients as close to home as possible, so Antelope House is mostly used by people from Southampton. The PICU, however, is used by patients from across Hampshire.

Due to ongoing staffing issues and difficulties to recruit qualified staff, and in order to maintain safe staffing levels, Hamtun ward was temporarily closed on 8 July 2016 for an interim period of 8 months. The aim of the closure was twofold:

1. To swiftly bring staffing to adequate levels by redistributing staff from the PICU to the hospital's other two wards.
2. To utilise the 8-months closure period for targeted and sustainable staff recruitment.

During the temporary closure, the majority of patients requiring PICU treatment were cared for at Huntercombe unit in Roehampton, London, where the Trust purchased 10 beds.

This decision had been made in conjunction with our commissioners at Southampton City Clinical Commissioning Group, and we had also communicated with a number of other stakeholders and interested parties, including local MPs, Healthwatch groups, and Health and Wellbeing Boards.

The plans were presented to HASC members on 20 July 2016.

Management of temporary situation

Throughout the temporary closure of Hamtun ward, we worked closely with the Huntercombe unit in Roehampton, with monthly visits, weekly clinical calls, and clinical discussions taking place daily as appropriate. This allowed us to jointly agree the way forward and maximise on using our local expert knowledge. We also supported carers financially to visit their loved ones.

Progress update

Through the development of a new staffing model and a subsequent targeted recruitment drive, the team were able to recruit to full strength. Although we would be able to fully open

the ward week commencing 6 March, the clinical team have decided to move patients in several phases to ensure all patients and new staff feel safe and well supported throughout the transition. The first patients will move back to Hamtun ward week commencing 6 March, and the ward will be fully operational again by the end of March.

New staffing model

In order to establish Antelope House as a desirable place to work and in order to improve staff retention, a full skills mix review was undertaken involving existing staff, and a new staffing model was developed. A number of new roles were created to enhance the career pathways within the unit from band 2 to band 7 posts. Staff can now choose between three seamless specialist pathways to work towards – clinical leadership, psychological interventions, and advanced nurse practitioners.

The aim is to support all staff in thinking about their development and planning their experience and training to meet their career aspirations. We have also developed tailored training to support people in advancing their skills and knowledge.

Following positive and encouraging feedback from applicants and existing staff we are now looking to use this model in other services across the Trust, in particular in our other PICU at Parklands Hospital in Basingstoke.

Targeted recruitment

We created a number of short films to support the recruitment campaign (please see links below) – one about working at Antelope House, one about people's experiences of using our services, and one about our new career path model and our work with students.

Working at Antelope House: <http://www.southernhealth.nhs.uk/work-for-us/current-vacancies/mentalhealth/>

Receiving care at Antelope House: <https://vimeo.com/199646233>

Career pathways at Antelope House: <https://vimeo.com/198677086>

A four-month social media campaign encouraged potential candidates to work at Antelope House, with adverts, quotes and films posted on a weekly basis. As this approach significantly increased the number of applications for the positions, we will be looking to replicate this for other targeted recruitment drives.

Other activity included adverts in local and regional Scottish papers and establishing links with Scottish universities, as well as recruitment events in other counties.

We have also been working closely with three key agencies to identify a group of temporary staff who can work within our service consistently, so they know the services, the patients, and the team. This will provide a buffer in the future to mitigate vacancies.

Mark Morgan

Director of Operations for Mental Health, Learning Disabilities and Social Care