

# Voluntary Sector Health Forum

Notes of the

## Fareham and Gosport Voluntary Sector Health Forum

6 September 2016, Town Hall, Gosport

The meeting was hosted by Gosport Voluntary Action and a list of those who attended and those who sent apologies is appended to these notes.

### **1. Welcome – Nicky Staveley**

Nicky Staveley welcomed attendees and introduced the Health Forum topic:

‘Our Health Service Provision – Today and Tomorrow’.

Nicky commented that the voluntary sector and the statutory sector work as a partnership of equals to meet local health service needs.

### **2. Understanding the Health Service Part 2 – Paul O’Beirne**

Paul O’Beirne displayed the board presented and discussed at the previous Health Forum, which showed a diagram of the organisations, sectors and services that make up the Health Service.

Attendees were directed to a booklet [Understanding The New NHS](#) written by Bruce Keogh. This was written in 2014, however is still very relevant and includes information on how local services work for local people for effective service and what the role of the voluntary sectors is in helping to achieve this.

### **3. Role of the CCG, How it commissions, Changing for the future, STP Development – Elizabeth Kerwood**

The Fareham and Gosport CCG works with health and social care partners as well as patients and local people to ensure the health services meet local needs. The group includes some elected GPs, who are responsible for commissioning services, which includes planning, designing and buying the following health care services:

- Regular planned hospital care
- Urgent and emergency care in hospital and out of hours primary medical services
- Community health service
- Mental health and learning disability services
- GP Services

There are 21 constituent member GP practices. The CCG has a budget of £254 million, and with a population of 203,284 people this equates to about £1,500 per person each year

The CCG has a governing body made up of six local GPs, five officers, three lay members and a secondary care consultant.

The CCG has five strategic goals:

1. Staying healthy and preventing ill health
2. Integrated care outside hospital
3. Urgent and emergency care
4. Improving elective care
5. Improving quality and reducing variation

The Fareham and Gosport CCG is a partner in the development of the Multi-speciality Community Provider (MCP/Vanguard) and one of six pilot sites for developing a new capitated, outcomes based contract for the MCP.

A question was raised about which area had the highest spend and the CCG advised this was acute care. Further to this the CCG advised if the acute care spend is split down by speciality level the top three areas are:

- Trauma and Orthopedics (surgery concerned with injuries and conditions that affect the musculoskeletal system (bones, joints, ligaments, tenders, muscles and nerves)
- Medical Admissions Unit (MAU) – bedded ward which takes short stay admissions from, Ambulatory Care and GPs
- Accident and Emergency

Some of this is down to the high volume of patients i.e. high levels of activity.



Introducing your  
local CCG.pptx

#### **4. The MCP (Multi-speciality Community Provider) Plan – Kerry Cooper**

Kerry Cooper asked attendees to share a few words to describe accessing the Health Services – Attendees shared the words ‘muddled’, ‘confusing’ and ‘time consuming’.

Kerry advised there was a strong determination to improve the services. The NHS’s 5 year forward view was published in October 2014 with a shared vision for the future of the NHS and includes new care models key to a sustainable NHS, and GPs sustainability has special focus in the plan.

The MCP is one of the new models of care set out in the NHS’s 5 year plan and involves:

- An extended team of GPs and specialists offering better access to a wider range of health and care closer to people’s homes.
- Centred around GP practices and primary care hubs

- Supporting a population based around a natural community of care
- Enhanced support and promotion of self-care and prevention

Kerry highlighted some of the inequalities in the areas, such as life expectancy - a male child born in Gosport will live 3.3 years less than a male child born in Fareham. The MCP's aim is to improve life expectancy and life changes for people of Fareham and Gosport by joint working with the Local Authority, the Health Service and Third Sector.

Some examples of the progress of the MCP Plan:

- Same day access hub
- Surgery Signposters
- Community and Primary Care Team working together
- Paediatrics – parent support and joint clinics
- Tele-medicines for nursing home consultations
- Redesigning access to mental health
- Access for frail or older people

If you would like to get involved or give ideas, please speak to Kerry or a colleague.

([Kerry.cooper@southernhealth.nhs.uk](mailto:Kerry.cooper@southernhealth.nhs.uk))



MCP F&G.pptx

#### **5. Notices – Paul O’Beirne**

- There is a new edition of ‘Who Cares’ available now
- The content of ‘Who Cares’ is currently being put on the ‘Connect to Support’ directory on HCC website
- The quality standard in ‘Who Cares’ has been endorsed by the CCG
- CAF and GVA have both moved to a new database ‘Volunteer Plus’. This will allow people to search for local volunteering opportunities within GVA’s and CAF’s websites, as well as self service for community organisations.
- The Queen Alexander Hospital is having an open day on 15 October
- CVS Annual General Meetings are upcoming
  - GVA 3 October 2016
  - CAF 27 October 2016

#### **6. Acute Trust, Portsmouth Hospital NHS Trust – Sarah Balchin**

Sarah Balchin is the Head of Patient Experience and has been a registered nurse for 32 years.

The main site of the Portsmouth Hospital NHS Trust is Queen Alexandra Hospital in Cosham and care and treatment is provided to a diverse local population of over 650,000. Emergency and urgent care is covered with the emergency department being one of the busiest in the country. There are around 6000 births a year and the hospital has 1000 in-patient beds. Care and treatment is for physical health

needs, not mental health or learning disabilities.

There are over 6000 staff at QA and although not a university hospital it is a major provider of under graduate and post graduate education.

The Trust is funded by CCG, based on an assessment of the needs of the local community. NHS England also provide funding for some specialist services and specific work areas.

The key challenge for the next year or two is to improve the experience of patients, families and carers of the “urgent care pathway”, by working in partnership with our health, social care and third sector colleagues.

A question was raised as to the impact of Brexit and Sarah advised the Trust could not provide the high quality service without overseas staff and that measures would be taken to ensure the same level of services continued.

A question was raised as the impact of junior doctors strikes and Sarah advised there is an emergency plan in place across the sector and this includes measures such as drawing on senior nurses experience and using non-ward nurses to plug gaps.

In response to Valery Rossiter’s request regarding self-medication for patients with long term conditions, Sarah advised that in 2013 a self-medication policy was implemented sporadically and there have been a number of audits. There has now been a task and finish group set up and input is being asked of patients, families and carers. Some practical steps have been taken so far and the aim is for a practical and pragmatic implementation and monitoring system.

A further note is there has been a space set up in the hospital for carers of people with memory problems to meet, starting from Wednesday 7 September. A range of support will be given including information of services and words of comfort.



Portsmouth  
Hospital NHS Trust

## **7. Strength Based Approach within Social Care – Helen Neilson-Smith**

Strengths-based practice is a collaborative process between the individual and practitioner that draws on the individual’s strengths and assets. Working in a collaborative way allows individuals and practitioners to share decision making around services and support. The current model in use is the deficit-based approach and the future model will be the strength-based approach. Through a strengths-based approach individuals can be supported to maximise what they are able to do, and how to best use their skills and networks to achieve their outcomes.

The Strength-Based approach is being looked at because it is part of the Council’s transformation journey and also because it is the “right thing to do” and will enable people to take control and promote self-management.

The Strength-Based approach will make greater use of social capital and community resources. E.g. Voluntary sector, Grants (LA, health, lottery), Community Support, District councils, Village agents, Wellbeing, Public health. All statutory requirements will continue to be met.

Connect to Support is an online information and advice guide and directory of local services for adults with care and support needs. It provides a one stop shop for adults in Hampshire looking for information, community support and care options. [www.connectsupport.hants.gov.uk](http://www.connectsupport.hants.gov.uk)



Strength Based  
Approach.pptx

### **8. Healthwatch – Steve Manley**

The Health and Social Care reforms of 2012 set an ambition of putting people at the centre of health and social care. To help realise that ambition, the reforms created a Healthwatch in every local authority area across England.

Healthwatch is a national body representing the views of users of health and social care services. It listens, acts (by influencing for the better), creates impact and celebrates. It is part of the local community and works in partnership with other local organisations and its aim is to make a difference locally.

Healthwatch want to hear from you about the services you use. Tell them about the good and the bad things about it and help them to improve services for local communities.

### **9. Demonstration of Web GP – Dr Tom Bertram**

One of the priorities for Better Local Care is to improve access for patients with a focus on self-help and patient education.

Dr Tom Bertram is a GP at Jubilee Surgery in Titchfield and is now using the online platform WebGP. WebGP is an online platform that sits in the GP practices website. It can become the first point of contact with the GP practice. Patients are offered self-help and effectively triage themselves. It reduces demand for same day appointments and urgent care admissions. WebGP is not the solution to increasing patient demand, but is perhaps part of it.

The attendees viewed an online demonstration of the WebGP. To view the process, please see the practice website <http://www.jubileesurgery.co.uk/> - see 'contact our doctors online'. Once the form has been submitted online, the doctor receives an A4 document with the patient econsult. (This will hopefully soon become a work stream so can be managed like patient notes). The doctor reads and decides on a course of action. Options include a face-to-face appointment with a doctor or nurse, telephone from doctor or nurse, a prescription or a message via the front desk.

The attendees also viewed recent statistics, which showed a broad range of age groups used the service and about a quarter of users ended up needing a face to face appointment.

### **10. Focus for next meeting – Paul O'Beirne**

The focus for the next meeting is Change, MCP inclusion of voluntary sector by providing support, inclusion of patient opinion from Health Forum's members. Attendees were asked to go to their committees to discuss focus for next meeting.

**11. Confirmation of the next meeting:**

The next meeting was confirmed for:

- 1 November 2016 from 12pm to 2:30pm at
- Fareham Community Church 171-173 West St, Fareham PO16 0EF

Thanks were given to the attendees, presenters, admin staff and volunteers for organisation and set up meeting and lunch.

**Appendices**

**Attendees:**

Sarah	Balchin	Portsmouth Hospital Trust (QAH)
Donna	Belkus	Hampshire County Council
Margo	Berry	Osteoporosis
Dr Tom	Bertram	GP
Alison	Brimson	Gosport Voluntary Action
Sacha	Clark	Southern Domestic Abuse Service
Kerry	Cooper	Better Local Care
Lucy	Docherty	Fareham Good Neighbours
Helen	Gardner	Portsmouth Hospital Trust (QAH)
Laura	George	Community Action Fareham
Gladys	Gingell	Gosport Voluntary Action
Graham	Hewitt	M.S Society
Natasha	Hook	Caroline Dinenage MP Office
Eliizabeth	Kerwood	F&G CCG
David	Kett	Fareham Macular Support Group
Dominic	Lodge	Southern Health NHS FT
Steve	Manley	Healthwatch Hampshire
Christopher	Matthews	HCC
Emma	May	Gosport Voluntary Action
Helen	Neilson-Smith	Hampshire County Council
Teigan	Newman	Portchester Community Association
Paul	O'Beirne	Community Action Fareham
Suzanne	Pepper	Gosport Older Persons Forum

Jeanette	Perry	
June	Powell	Community Action Fareham
Lisa	Powell	Gosport Voluntary Action
Vivienne	Pugh	Community Action Fareham
Sonya	Rimmer	Alzheimer's Society
Chris	Robson	Shore Leave Haslar
Debbie	Ross	Open Sight
Mary	Shepperd	QA Hospital
Donna	Simpson	Gosport Borough Council
Denise	Starkie	Gosport Voluntary Action
Nicky	Staveley	Gosport Voluntary Action
Istvan	Szucs	The Rainbow Centre, Fareham
Cambell	Todd	F&G CCG
Julie	Ward	Gosport Voluntary Action
Melanie	Whitfield-Tinkler	Harbour Cancer Support
Margaret	Wilkinson	Gosport Voluntary Action
Jessica	Wooldridge	Community Action Fareham

**Apologies:**

Allan	Causer	Parkinson UK
Lucie	Debenham	Alzheimer's Society
Angela	Gill	
Kathryn	Porter	
Karen	Seale	
Mary	Sheppard	
Pat	Shirley	F & G CCG
Pamela	Webber	
Jenny	Wilford	Armed Forces