

Healthwatch Portsmouth Board Meeting 10.9.2019

Held at Cosham Community Centre

Present: Roger Batterbury (RB) Chair, Ken Ebbens (KE) Vice Chair, Mary Amos (MA), Jennie Brent (JB), Jan Dixon (JD), Peter Izzard (PI), Ram Jassi (RJ) Graham Keeping (GK), Anthony Knight (AK), Philippa Pringle (PP), Luke Evans (LE), Siobhain McCurrach (SM)

Apologies: Emma Leatherbarrow (EL), Amanda McKenzie (AM) Steve Glennon (SG)

Item 1: Welcome, apologies and declarations of interest.

Healthwatch Portsmouth Chair Roger Batterbury welcomed everyone to the Board meeting. Apologies were received from Amanda McKenzie.

RB noted that he did occasional work for Solent NHS Trust as stated in his Declaration of Interests form. There were no other declarations of interests.

Item 2: Minutes of Board meeting held on 27.06.2019

The minutes of the Board meeting held on 27 June 2019 were approved. These are available on the [Board papers section of the website](#)

Matters arising:

Page 4) The workplan has been amended.

Page 6) The new NHS appointments being provided have already been filled. Further discussions between NHS England and dental providers are ongoing.

Item 3: Operational update

Healthwatch Portsmouth Project Manager SM presented the [Project Manager's report](#) giving details of Healthwatch Portsmouth operations.

Item 4: Governance handbook update

The Board approved the terms of reference of the [Operational Support Group](#) and agreed to add it to the Healthwatch Portsmouth Governance handbook.

Item 5: Board member updates

The Board member updates document was circulated detailing meetings that Board members had attended since June 2019. RB explained that the Board had held a meeting at the end of August at which they had discussed who was interested in getting involved in which meetings that Healthwatch Portsmouth was currently involved with or had been invited to join.

Regarding the Portsmouth and South East Hants Integrated Care Partnership Network meeting that KE attended at the beginning of September he explained that the Network was at the stage of defining its terms of reference. It had been stated in the meeting by Rob Ashman, Programme Director at Solent, who chaired the Network meeting that he felt that it should be in the middle; providing scrutiny of the Unified Executive and

receiving/providing feedback and info from the public. KE reported that carers had not been mentioned in the meeting, nor was the methodology for direct involvement by patients, carers or the Third Sector in the Network. KE felt that engagement with the public would be very important for this Network.

RJ) Can we have sight of Terms of Reference for this Network. Its internal process needs to be more transparent so it is possible to report back from.

Cllr Matthew Winnington who was present at the meeting asked if he could explain about the Network's purpose: the first meeting had been to describe what the Network was for - scrutiny of the plans devised by the Unified Executive by Healthwatch Portsmouth and Hampshire would be very welcome. Elected members from boroughs in Hampshire would also be key scrutineers of service developments agreed by the Unified Executive.

Sarah Austin of Solent NHS Trust updated us on Long Term Conditions Hub, Positive Minds. - The opening of the **Long Term Conditions Hub** has been delayed and is now set to open at the beginning of October 2019. There is a partnership agreement which has been generated from a multi-agency partnership. Access to the service will via GP referral. HWP will be kept fully informed of developments.

- The opening of the **Positive Minds** service had also been delayed. Currently NHS Solent are waiting for a change of use planning consent to be given, they expected this to be granted shortly. Solent Mind and the Trust were ready to start work once consent was received - hopefully by mid-October. A HWP representative will be invited to join the Board of Positive Minds.

Questions

KE) Regarding Positive Minds there seems to be confusion in GP surgeries about accessing the service. One of the surgeries has stated that GPs would refer patients to it. I thought that the Positive Minds services would be available without GP referral?

SA) It will be a walk-in service. A lot of people who present with mental health problems at GPs would be better dealt with by Positive Minds. GPs will refer these patients on to Positive Minds. It will also be an open access service allowing people to walk in and receive services without GPs being involved in the intervention. If a longer term intervention was required then the patient's GPs would be informed.

KE) This raises more questions than answers - we will raise it at the steering group.

Item 6: Solent NHS Trust Mental Health Rehabilitation Transform

Julie Leigh, Head of Recovery and Planned Care Mental Health provided a presentation on Solent NHS Trust's plans for their Mental Health Rehabilitation Transformation [here](#)

RB) When will the new service be named?

JL) In the next few weeks

MA) This social model of care looks very good: housing and relationship building. How are you going to manage demand?

JL) This new service will increase capacity all round for rehabilitation, the new service

will not be taking staff away from existing teams. We are currently recruiting new staff.

RB) This was covered in our questions to Solent, we will share the list of questions we submitted together with the answers we received.

RJ) With a caseload of 18 service users and ‘stakeholder involvement’ will there be reliance on the voluntary sector? Which staff will be used to increase capacity?

JL) Staffing resources will come from within Solent. The focus on recovery and rehabilitation will mean having to do less in other areas.

RJ) If demand shifts where will you get the extra capacity?

JL) We will call in staff from the recovery mental health teams.

The ICM function acronym was explained: ICM = Intensive Case Management

We asked what the Open Dialog was. JL offered to send HWP a copy of the support model

Item 7: Update on Jubilee House

Sarah Austin (SA) from NHS Solent gave an update on plans for Jubilee House in Cosham.

- Jubilee House is set to be closed. The services currently provided will be relocated to other sites.
- The Jubilee House building is not fit for purpose and over time the service provided at Jubilee House has changed from its initial focus on end of life care.
- Now most people prefer to receive end of life care in their own homes. Where appropriate these services will also be offered in hospital or care homes.
- The assessment services offered at Jubilee for Continuing Health Care would be best offered in care homes.
- For people needing extra rehabilitation following a hospital stay services will soon be available on Spinnaker Ward at St Marys. Spinnaker will take patients from the community as well as directly from QAH.
- The Trust had picked up concerns about the quality of services at Jubilee House and falling demand. It was therefore proposed to shut Jubilee House in the next 18 months by which time the building works required for the transfer of services to Spinnaker will be done.
- Patients currently at Jubilee have all been transferred to Spinnaker ward - Sarah was pleased to report that there had been no impact on the flow of patients from QAH.
- Jubilee House is now focused on providing services to people needing short term rehabilitation prior to going home.
- The Trust want to shut Jubilee House as soon as possible, and within 18 months, but will only do so when they are sure of the quality of services on Spinnaker.

Questions

KE) Is there no dementia care at Jubilee?

SA) The current service at Jubilee House doesn't take patients with complex needs at the end of life - more appropriate services are available on Booker ward.

KE) Hilsea Lodge is closing and will be replaced by a fewer beds. This has had an impact on home carers. This likely impact on carers seems to have been overlooked.

SA) We are talking to social care colleagues to understand the needs of the city and work with them to provide services. We have commissioned 24-hour care for crisis moments which will provide emergency relief for carers.

KE) The gap in support is before it gets to that point.

Cllr M Winnington: When Edinburgh House and Hilsea Lodge care facilities were closed everyone went to Shearwater or private care. We anticipate that the new facility will have at least 40 beds but we hope to have 50+ if we can show that the demand is there.
KE) The impact of closures on carers seems to be ignored, the health cost on carers is great. Carers feel no-one is listening. The savings on buildings will be a cost to the NHS.
MW) This is a reduction in buildings, not a reduction in services.

Item 8: Solent NHS Trust Transport and Access Policy

Andrew Strevens (AS) from Solent NHS Trust gave a [presentation on transport and access at St Marys Community Health Campus](#) that supported the Transport and Access Policy v2 that had been issued July 2018 and had been commented on by a range of stakeholders.

Questions

RB) Has any analysis been done of parking flows against clinical needs?

AS) We have 10,000 movements a month.

RJ) How does carbon reduction work?

AS) The business case does not consider carbon reduction, we will think about that.

RJ) How much money do you get from parking fees?

AS) Approximately £40,000 a year which goes towards maintenance.

RB) Does the Trust have a cycle scheme?

AS) We don't have a scheme currently, we think demand is relatively low.

KE) There has been a reduction in the availability of cycle parking at St Mary's.

MW) I found that I couldn't park my bike at Solent due to racks being full. Do you provide mileage for cycling staff? And do you demand a driving licence in job adverts?

AS) The Trust may need to look at including in a future cycling policy to offer second-hand cycles for staff to use (to reduce risk of theft).

AK) Are electric car charging bays available?

AS) Yes they will be provided.

RB) We have had feedback about difficulties in getting to St Marys by bus. I suggest that the Trust senior management team take the bus to have the experience.

AS) We encourage organisations such as HWP to put pressure on bus companies to ensure routes are going to the right places. It is the Solent AGM on Monday (16 Sept 2019).

RB) What about increased demand for staff parking for those who will be transferring from St James' Hospital to Block B at St Mary's?

AS) The Trust will look into this issue

Item 9: Any other business. There was no other business.

Item 10: Questions from the public There were no more questions from the public.

Item 11: Close of Board meeting and date of next meeting

Roger Batterbury (Chair) thanked our guest speakers and thanked everyone for coming. The next meeting will take place on Tuesday 22 October 2019, 2-4pm at the Civic Offices, Guildhall Square.