

HOUSING & SOCIAL CARE SCRUTINY PANEL

MINUTES OF THE MEETING of the Housing & Social Care Scrutiny Panel held on Wednesday 12 June 2013 at 2.30 pm at St James' Hospital, Portsmouth.

(NB These minutes should be read in conjunction with the agenda for the meeting.)

Present

Councillor Sandra Stockdale (Chair)
Councillors Margaret Adair
Mike Park
Lee Mason
Phil Smith (Standing Deputy)

Also Present

Jo Gooch, Chief Finance Officer, Portsmouth CCG
Dr Kevin Vernon, CCG Clinical Lead
Maria Cole, Residents' Consortium (Observer)
Nigel Baldwin, Accommodation & Enabling Manager
Joanne Wildsmith, CCDS

21 Apologies for Absence (AI 1)

These had been received from Councillors Steve Wylie and Michael Andrewes.

22 Declaration of Members' Interests (AI 2)

Councillor Lee Mason was a new member to this panel and had not been involved in previous discussions of the assisted technology but wished to point out that his GP was Dr Julian Neal who was referred to during discussion of Telehealth innovations.

23 Minutes of Previous Meeting - 4 April 2013

There was one query on page 24 whether there should be reference to eight weeks or eight days which would be checked by the clerk with Angela Dyer. It was noted that Katie Cheeseman, the project officer for assisted technology had completed her year's placement as project officer.

RESOLVED that the minutes of 4 April 2013 were confirmed by the chair as a correct record.

24 Advancing the use of technology in Adult Social Care (Telecare & Telehealth) (AI 4)

Jo Gooch, the Chief Finance Officer of Portsmouth CCG explained the history of the CCG which had been fully operational from 1 April and which is developing a strategy for information technology not just for Portsmouth but

for the Fareham and Gosport and South Eastern Hampshire area. This would be taken to the CCG board for approval in July. Their IT strategy would have reference to Telehealth but it was not a significant part of the strategy. She stated that the CCG would not commission this as a service in itself but the CCG wished community care to be provided for patients so that if they decide that this should be part of a package the CCG would be supportive of that. There is not a mandate for Telehealth but the CCG is supportive of the best care for patients.

The CCG is not responsible for primary care provision but has an interest in the overall services that are run. One area being looked at is enhanced service use of Telehealth to see how this can be used in the GP practices with involvement in the "Florence" pilot. This project is financed by NHS Stoke as a pilot for one year and uses mobile phone technology to help with remote care. It is up to the GPs if they wish to take part in this and it is separate to Dr Neal's wider Telehealth provision at the Portsdown Practice. After a year the data from the pilot will be analysed. The CCG's view is that evidence for Telehealth can be seen as contradictory although the CCG would like to be supportive of innovations where there are proven results.

Dr Kevin Vernon, a GP and the CCG's clinical lead who is based at the Lake Road Practice, said that he personally is yet to be convinced on the results of Telehealth. The term Telehealth is used for a huge area of remote monitoring which could vary from the small applications for mobiles for diabetes results to the large piece of kit installed in homes by Tunstall. His perspective is that it was not yet known how effective it is or how much it would save on hospital admissions. However local GPs were engaging in the Florence programme; the text messaging service would be used to monitor raised blood pressure with the information being sent to GPs via mobile phone technology. This was simple and easy to use and was also helpful for those who disliked having blood pressure readings taken at a health centre. For many local GPs the Florence experience was a "dipping a toe in the water" in the area of Telehealth. There were ten types of text messaging services through Florence, some being reminders regarding taking medication however there are over 200 pathways available. The CCG wished to see how easy it is to use and if it makes a difference before further expanding its use locally.

In response to questions the additional information was given:

- Solent and Southern Health NHS Trusts are using Telehealth to support patients through community services were using Telehealth for patients with complicated or long term conditions such as COPD. Whereas the CCG supported Florence pilot is about people coming into surgeries, however Telehealth could be used successfully to help monitor hypertension to reduce the risk of stroke.
- Kevin Vernon raised the issue of remote monitoring increasing isolation and the fear of some GPs that there was less social contact with patients. He personally felt a duty as a GP to maintain relationships with isolated patients, and for him the best part of the job was meeting people face to face. In some cases though the Telehealth kit could increase the need for visits.

- The CCG wished to support people to help prevent admissions and Telehealth could be part of this and it was also seen to be useful for younger patients who embraced technology with conditions such as asthma or diabetes as this could help compliance if used accurately.
- Where Telehealth is part of the hospital discharge process this is part of the social care arena although hospitals can decide the specific needs of patients.
- With regard to the issue of funding it was reported that the CCG looked at what was being spent on community services and the providers can choose to buy kit. For the CCG it was a matter of accountability and they did not wish to heavily invest in unproven technology in the hope of delivering savings.
- Telehealth would be a small part of the commissioning plan being presented to the Health & Overview Scrutiny Panel (HOSP) the following day by Dr Hogan. Whilst the CCG were not buying the Telehealth services there were national incentives for innovation and locally the Florence scheme represented a part of Telehealth that the CCG was willing to support. In instances where the CCG operates a tendering process innovative ideas could be presented and these would be supported if the CCG could ensure they were deliverable and robust.
- The panel had previously heard from Dr Julian Neal, a Portsmouth GP who embraced Telehealth and it was asked if his findings would be presented to the CCG; these would not be presented to the main board but it was felt it would be more appropriate to go to the GP information sharing sessions where good practice was discussed between GPs in workshops and they were also discussing the Florence model.
- GPs were able to sign up to the Florence model by the end of June and Dr Vernon reported that there was a lot of interest as it was seen to be a well validated, simple and cheap solution which provided good results.

The chair thanked Jo Gooch and Kevin Vernon for giving the CCG perspective on Telehealth which was very useful for the panel members.

25 Date of Next Meeting (AI 5)

The panel will meet again on Monday 24 June at 4.00 pm to discuss future topics for discussion prior to the Scrutiny Management Panel of 4 July.

The meeting concluded at 3.40 pm.

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 Councillor Sandra Stockdale
 Chair

