

6 January 2014

Cllr P Eddis
Health Overview and Scrutiny Panel
Portsmouth City Council
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Dear Cllr Eddis

On behalf of colleagues in Southern Health NHS Foundation Trust and specifically colleagues who lead the South East Hampshire Integrated Service Division, please find below information that we hope will offer members some insight with regard the key issues that are, or will, have some impact locally.

A representative from the services will be present at your meeting on 16 January and will of course be pleased to answer questions members may have.

South East Hampshire Integrated Service Division (ISD)

Operations

During December, the ISD has been performing a significant role in the delivery of enhanced emergency capacity management within the Portsmouth and South East Hampshire health economy. This has included the commissioning of an additional 6 beds at Gosport War Memorial hospital to support discharges from the Queen (QA) Alexandra Hospital. In addition senior representation from the ISD has been present at the daily discharge planning meetings at QA in the period before and over the Christmas period.

In December members of the ISD team attend a workshop with Solent NHS Trust, Portsmouth Hospitals NHS Trust and the local Clinical Commissioning Groups (CCGs) to further develop the future model of care for older patients and those with long term conditions. The outputs from this session, will inform the commissioning intentions for 2014/15 and 2015/16, which is intending to deliver improved integration of the service model across the providers.

Performance and Outcomes

The ISD continues to perform well on key operational metrics with measures to improve reported performance, gaining traction. Improved reporting has been evident in End of Life performance, Rapid Response delivery and in the reporting associated with leg ulcers.

The ISD has reached an agreement with the CCGs regarding the current QIPP (Quality Innovation Productivity and Prevention) challenges both on a non and recurrent basis.



There has been a significant recruitment drive across all inpatient Older Peoples Mental Health (OPMH) units and this continues. There are also improved control mechanisms in place to support the clinical teams to manage their temporary staffing useage.

Quality

The revised ISD governance structure was implemented from December 2013, with a quality programme which transcends the division. This new structure includes a Professional Advisory Group and a Band 7 Development Programme. In addition the local Clinical Quality Reporting Meeting (CQRM) has become well established with improving programmes of reporting and collaboration between the commissioners and the ISD.

Since November 2013 the ISD has received 2 formal reports from the CCG following visits to Petersfield and Gosport War Memorial hospitals. Both reports are exceptionally complementary about the standards observed during the visits and have made some suggestions on making these even better. The key area of feedback relates to the standards of the accommodation from which the services operate. Both sites have significant investment programmes planned to improve the clinical environment, although in the meantime some essential repairs are being undertaken.

The Head of Professions has been taking a leading role within the local health economy in support of the CCGs programme to eradicate pressure sores. In addition the ISD is also supporting a health economy wide initiative to reduce the levels of falls and associated harm.

The new process for the management of SIRIs (Serious Incident Requiring Investigation) has been fully implemented with the ISD reporting no breaches of the reporting standards. This improvement is a key indicator of the priority the ISD places on continuous improvement of our services and the opportunity for learning.

Workforce


The ISD has successfully recruited to the Bed Manager role which will support the OPMH beds in the first instance and will develop to cover Community Hospital inpatient provision.

We are currently considering redesign of services in relation to the full integration of physical health, mental health and therapy provision around geographical areas. We are, as you would expect, making plans for robust communication and engagement with key stakeholders in order to ensure they are fully involved and can influence our proposals.

I do hope this update has been helpful

With best wishes

Yours sincerely



Pam Sorensen
Interim Head of Communications and Engagement