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28 February 2020

Cllr Chris Attwell
Chair, Portsmouth Health Overview and Scrutiny Panel
Members Services
Civic Offices
Portsmouth PO1 2AL

Dear Cllr Attwell,

Quarterly update letter for HOSP for March 2020

This letter is intended to update you and the members of the Panel on some of the work that the Clinical Commissioning Group has been involved with over the past few months.

Our website – www.portsmouthccg.nhs.uk – provides some further details about what we do if members are interested and, of course, we are always happy to facilitate direct discussions if that would help.

Health and Care Portsmouth update

Members of the Panel may recall that Health & Care Portsmouth is our programme for changing the way we plan and provide health and social care in the city.

It builds on the work that the NHS and Portsmouth City Council have already undertaken together, to bring services together in a way that is positive and proactive, particularly since the publication of the Health & Care Portsmouth Blueprint document in 2015. Solent NHS Trust and the Portsmouth Primary Care Alliance (the organisation that represents the interests of GPs in the city) are other key partners in the programme.

In effect, we all want to support people in the city to live healthy, safe and independent lives by offering health and social care services that are joined up and provided in the right place, at the right time.

Later this year it will be five years since the Blueprint was published, so the CCG will be looking to assess the progress which has been made in that time, and also look ahead to consider how we can build on that progress and make further advances with our partners.

Over the past few months we have been able to see some real examples of how our plans to integrate care and support and being turned into tangible improvements in frontline services. Some examples of this are listed below:

- **PositiveMinds:** this new service opened right at the end of 2019, aimed at providing support to people who are struggling to cope – perhaps suffering anxiety, stress, depression, or low mood, and also including services specifically aimed at supporting veterans and their families. It is funded by the NHS, the city council, and the Armed Forces Covenant, with staff from Solent Mind and Solent NHS Trust. Publicity has been intentionally low-key so far to ensure that the service can establish resilience. A [spring timetable of workshops](#) is now in operation, alongside the normal ‘drop-in’ service running six days a week.
- **Long-term conditions hub:** the pilot scheme to offer a new style of support to people living with long-term conditions in the city has begun. In these very early stages the pilot scheme is focused on just two types of conditions – respiratory illnesses and diabetes – and two city practices. The intention is to make care and support more consistent across Portsmouth, and to equip patients with the ability to manage their own health more effectively. The project brings together staff from acute, community and primary care, to offer patients a more co-ordinated package of support than is currently available.
- **Enhanced support for care homes:** the enhanced care home team pilot continues, but is being gradually spread out across more of the city. The intention is to provide care home residents with coordinated, integrated and proactive support, delivered by a team which includes a GP, pharmacist, and community nurses, working alongside mental health nurses and occupational therapists as appropriate. There is also a real emphasis on working with the care home teams themselves. Initially four homes were included in the scheme (out of 24 in the city), and that has now grown to eight.

The overall aims of Health and Care Portsmouth continue to be underpinned by shared teams and posts as well as pooled funds in some instances, and fit with the guidance and recommendations outlined in the NHS Long Term Plan published early in 2019 (the successor plan to the Five Year Forward View.)

Primary Care

The CCG was informed in 2019 that two GP partners at Hanway Group Practice were intending to retire, and that the practice had not been successful in its efforts to recruit replacements. In response to this, Hanway informed the CCG that it was in discussion about a possible merger with another city practice.

There is a well-established process for practices considering such changes – both parties are required to engage with their respective registered patient lists, and relevant stakeholders, and then to finalise their plans after feedback has been received and

considered. Once a proposal has been finalised, it is submitted to the CCG which then has the task of deciding whether to approve the plans.

With regard to Hanway, this engagement process has been underway since November 2019 and (at the time that this report was prepared) the CCG is waiting to receive the final proposal. It is anticipated that the proposal will be submitted by early March, 2020.

In terms of the engagement activity undertaken by the practices, the CCG is aware that:

- All Hanway patients (aged 16 and over) were sent a letter outlining the draft proposals and giving them an opportunity to feedback their views, and all Portsdown patients registered at Kingston Crescent were contacted via text or email
- Both practices posted information on their respective websites
- Both practices provided comment boxes in their waiting rooms
- Hanway held two events to allow patients to discuss the issue in person, and a drop-in session for Kingston Crescent patients took place towards the end of February
- Hanway provided a dedicated email address for patients to provide feedback
- Both practices, working with the CCG, have completed an Equality Impact Assessment.

Once the CCG has received the practices' final plans, the matter will be considered – in public – by the Primary Care Commissioning Committee. That is the decision-making forum for practice mergers, and any potential issues regarding premises which may also arise. The committee's task will be to assess whether adequate engagement has been completed, whether the feedback from that engagement has been taken into account, and the impact on healthcare in the city more generally.

Along with this letter, and related to the changes being experienced regarding primary care, the CCG has also provided a summary of the context facing the sector at the current time, a flowchart setting out the process to be followed during a merger process, the application form which practices must complete as part of the merger process.

CQC ratings

The city is in the welcome position of having all local healthcare providers rated as 'Good' or better, by the Care Quality Commission.

At this time Portsmouth Hospitals NHS Trust, Solent NHS Trust, Southern Health NHS Foundation Trust, the Portsmouth Primary Care Alliance, St Mary's Treatment Centre (Care UK), and all city GP practices have positive ratings from the CQC – a significant achievement by all concerned.

End of Life Care

Across Portsmouth and south east Hampshire, a process is underway to consider how well End of Life Care services work, and whether they could be improved. The intention is to examine the whole pathway, from diagnosis through to palliative care, rather than simply focus in on the final days and weeks of life.

A survey was developed with patients and carers, and an initial data gathering exercise has been started to hear from patients, carers and staff what they think works well, and where improvements could be made. These initial findings will then help to inform workshops including patients and carers, which in turn will identify the work required to make positive changes.

Winter challenges

As ever, the winter period – which is by no means over, in NHS terms – brings challenges to the health and care system in general, and frontline staff in particular.

This winter there has been a high degree of co-ordination between all parts of health and care, both in Portsmouth and the surrounding areas. There have been multiple areas of focus – seeking to reduce the number of ‘inappropriate’ attendances at the Emergency Department, increasing the ‘flow’ of patients through the acute hospital system, ensuring safe and timely discharges from hospital, and strengthening out of hours primary care provision.

Inevitably, there have still been periods when staff have been operating under heightened pressure, but in general terms all parts of the local system have combined to work more effectively than during the corresponding period 12 months earlier. Clearly, however, there remains no room for complacency - in addition to the ongoing, more predictable challenges associated with the winter months, the CCG is also involved in ensuring preparedness with regard to the Coronavirus (COVID-19).

Yours sincerely

Innes Richens
Chief of Health and Care Portsmouth