

Introduction

This paper provides a general update from Southern Health, with a particular emphasis on our services provided in the Portsmouth and South East Hampshire area. This update covers a number of projects including our ongoing Fusion work – bringing together NHS community, mental health and learning disability services provided in Hampshire and the Isle of Wight – as well as an update on our response to industrial action and our ABC clinical commitment.

Trust-wide update

Proposals to bring together community, mental health and learning disability services (Fusion work)

As previously reported at this panel, following an independent review of services earlier this year, there are proposals to bring together all NHS community, mental health and learning disability services provided in Hampshire and the Isle of Wight. The ambition is to create a single NHS Trust to deliver these services in a more joined up way, bringing benefits to patients and communities.

Plans are progressing well to develop a strategic outline case to go before the boards of all the organisations involved in March 2023. This case will set out the rationale for change and the work that would be required to bring services together and set up the new organisation. If approved, the programme will continue to develop a more detailed full business case later in 2023. Subject to the necessary approvals, the aim is for the new organisation to become a legal entity by April 2024.

The organisations involved have been meeting regularly and yesterday (22 February 2023) saw the second Joint Senior Leadership forum, bringing together senior leaders from all the organisations involved. The agenda for the day included an interactive session around the ambitions for the new organisation as well as potential ways of working and an update from the Integrated Care Board and partnership working.

Stage 2 Pascoe Report update

The Trust continues to work through the recommendations made as part of the stage 2 Pascoe report. Evidence against each recommendation has been considered by the Quality Governance leads in both the ICS and Regional NHSE Office. A report written by the ICS with NHSE, detailing their review, was presented to an extraordinary Tripartite Provider Assurance Meeting in October last year. **At this meeting, it was noted that 100% of the recommendations were either ‘on track/ongoing’ or ‘fully completed’.**

We are happy to report that 25 of the 37 recommendations (68%) are on track and 12 (32%) fully completed. National and local themes were considered and triangulated as a component of this review. It is important to note that the ‘on track’ recommendations will remain as such (and cannot move to ‘fully complete’), due to the nature of the recommendation and the need for ongoing monitoring to check that actions continue to be embedded in practice.

This ongoing monitoring now becomes part of our ‘business-as-usual’. Working with the ICS, a business-as-usual action tracker has been created to continually monitor the progress of these recommendations, as well as to identify any potential early warning indicators. This will be reviewed

on a 6 monthly basis. As a result, we ask that the Committee accept that the Stage 2 report recommendations have been actioned with no further updates required (other than those which form part of wider, future Trust briefings).

Industrial action

The Trust continues to ensure it has the correct plans in place, and is working alongside unions and partners, to ensure that urgent and essential services are able to continue operating during any industrial action that may take place in the coming months.

Whilst the Trust was not involved in the initial round of strikes two of our sites were involved in the second round in January – The Western Community Hospital in Southampton and Gosport War Memorial Hospital in Gosport. Action over the two days at Gosport saw considerable turn out with close to 200 people joining the picket line over the two days. The plans that were put in place ensured minimal disruption to patients.

The Trust is not due to be involved in the next round of RCN strikes in the coming weeks. Junior doctors in England have now voted in favour of taking strike action and we are preparing for how this might impact our sites.

ABC clinical commitment launched

This month the Trust has launched its ABC Clinical Commitment model. The model was originally developed by the Kings Fund and centred around Compassionate Care and supporting staff to make positive changes for patients. The ABC stands for:

- **Autonomy** – encouraging staff to have the autonomy to act and make decisions in their role, alongside their patients, service users, families and carers. It recognises that staff are the ones that make the biggest difference to the people they support so focuses on giving them the autonomy to make important decisions.
- **Belonging** – at Southern Health we want our staff to feel like they belong to the Nursing and AHP family. We want them to know that their special skills, knowledge and compassion are valued.
- **Contribution** – We want our staff to be really clear about the contribution they make to people's care. The ABC model is about how we can help them to develop their skills, so they can be the very best they can be, to deliver the best care to the people we support.

The Trust understands our nursing and AHP staff are experts in their roles. They are the closest to our patients, service users and their carers and families and they know what changes are needed to be made to allow them and their teams to do their jobs, to the best of their ability. We hope the implementation of the ABC model will support them to make those changes.

Portsmouth and South East Hampshire (PSEH) specific update

The following are some of the key initiatives that we have put in place to address system challenges to ensure we are doing all we can as a Mental Health and community provider to manage current and future demand, and ensure patients get the right care at the right place and time, working collaboratively with our acute and primary care partners.

Urgent Community Response (UCR) and Virtual Wards (VW)

In our last update we talked about our Urgent Community Response (UCR) and Virtual Ward work which sees patients on all caseloads and new referrals prioritised based on need and those with

urgent clinical care, which can be supported at home, are seen the same day (or 2-hour response) as required. Patients can be referred to the Virtual Ward if they have suspected or known frailty, presenting with an acute exacerbation/decompensation related to their condition, where clinical care can be managed within the home as an alternative to care in hospital, for a short duration (up to 14 days).

We are pleased to report that this work is having a positive impact on patients with the activity and referrals for UCR increasing, including increased referrals from South Central Ambulance Service (SCAS) and opportunities to increase referrals from GPs and Emergency Departments. We are working closely with SCAS to understand these further opportunities. To support the increased referrals, the recruitment is improving, and the team size is increasing. The team have also identified funding to purchase falls equipment and have procured vans to transport equipment, lifting equipment and monitoring equipment. The UCR team continue to work collaboratively with fire services to support with falls and increase falls learning and awareness.

The work of these teams and others across the division led to approximately two weeks of no 60-minute holds in January for our patients.

Petersfield Urgent Treatment Centre (UTC)

All UTCs should see 95% of patients within 4 hours. The UTC has been consistently compliant in meeting this metric. However, in December 2022 the National Strep A concerns added to the significant winter pressures, which created a challenging environment for the UTC staff. 3,164 patients attended UTC in December compared to the 2,236 patients that attended in November and this was double the attendance from December 2021 when Petersfield UTC saw 1,529 attendances. As a result, only 90% of patients were seen within 4 hours. In January 2023 the performance returned to 99% of patients being seen within 4 hours.

Bed Management and flow

The Portsmouth and South East Hampshire division opened all Community Physical Health surge beds at the beginning of November (an increase of 6 beds to 88). We now have a system surge bed de-escalation plan in place which would see the additional beds open until the end of March 2023. As a snapshot into bed use across the Portsmouth and South East Hampshire Division, the median occupancy across our wards in December was 160 occupied bed days (OBD). The lowest occupancy was one day in January where we had 148 OBD with the highest occupancy being 162 OBD which was reported over three days in January.

In January 2023 we admitted, across all our wards in the Portsmouth and South East Division, 146 people. During this same period, we were able to discharge 148 people. Of those discharges only 7% were readmitted within 30 days with most discharges happening between 9am and 3pm. We have seen a 15% increase in admissions and discharges through Gosport War Memorial Hospital and Petersfield Community Hospital since we instituted our seven-day discharge planning service.

We are pleased to report that we have reduced our length of stay, enabling patients to get back to their home or place of residence quickly. New inpatient therapy leads are now in post at both Gosport War Memorial Hospital and Petersfield Community Hospital and our therapy teams are working seven days a week (although this is not substantively funded), assessing patients within 24 hours of admission. Therapy has been made focus on ward rounds as has working closely with colleagues at QA to ensure referral forms and decision making is made earlier. This has enabled 'early bird' transfers or greater clarity and efficiency when discharging, especially with more complex cases e.g., homeless people.

Crisis Resolution Home Treatment (CRHT) Team

The team is currently being supported whilst it is undergoing quality improvement work. Two teams have recently merged and moved offices and are now more aligned with the ward. In order to improve pathways a dedicated housing officer has been recruited. There is also greater clarity on the role of the Pathways Team and ensuring CRHT gatekeep all admissions.

The Adult and Older Persons Mental health teams continue to work hard to ensure that patients are supported as much as possible at home and that if admission is required that it is as local as possible. The Trust and the Portsmouth and South East Hampshire Division has continued to use significantly less out of area beds than it did in previous years. We now only use out of area beds to support with extra-ordinary surges in demand and at present are currently using two ECR beds.

Future planning template

The Future planning template is launching in February within the Trust's Portsmouth and South East Hampshire Division with staff having recently completed their training e-Learning sessions. The Future Planning template was developed following feedback from patients who would often comment that if communication between their hospital specialists, GPs (in and out-of-hours) and the community services were better, they would feel more confident about being cared for by their local health and social care services. This was especially important to people with long term conditions and terminal conditions who wanted to ensure their wishes were recorded in a place where they could be accessed easily. We have developed the Future Planning template to ensure patients' wishes and preferences can be recorded and accessed by the people caring for them and have worked with colleagues in acute and primary care services to ensure the form can be accessed by a range of clinicians.

Over the coming weeks a range of resources such as the Care Plan front sheet, fridge magnets, posters and My Wishes leaflets will be distributed. A patient video has been completed and will be distributed to GP practices with resources and comms ready for staff and GP practices.

Patient experience feedback

Patient feedback is incredibly important to us as it helps us understand where we are doing well and where improvements are needed. Despite the current challenges we are pleased that the majority of feedback we received from our patients has been positive.

During the month of February 2023, the Portsmouth and South East division received 321 pieces of feedback. We are very proud to say that we received no complaints during this time. We received 273 compliments and 48 concerns. This represents a 283% increase in positive compliments for teams across the division, 100% reduction in complaints and a 95% reduction in concerns when compared to the same period last year.

Below is a lovely piece of feedback about our Twilight service to highlight some of the positive comments we receive: "I've had cause over the past year to call out the excellent Twilight service. They have all been most understanding and good at their jobs saving visits to hospital. Lily and Debbie came to my rescue on Sunday night to make good my blocked catheter. So a special thank you ladies to include all who work in this most valuable service-it must help keep some strain off QA-AE dept."

END OF REPORT