

**HEALTHWATCH WORCESTERSHIRE ANNUAL CONFERENCE, 29th JUNE 2017 -
PANEL SESSION - SUMMARY OF QUESTIONS AND ANSWERS**

Panel

Sarah Dugan (SD) - Chief Executive, Worcestershire Health and Care NHS Trust (H&CT) and Sustainability and Transformation Partnership lead.

Simon Trickett (ST) - Chief Officer, NHS Redditch and Bromsgrove and NHS Wyre Forest Clinical Commissioning Group

Michelle McKay (MMcK) - Chief Executive Officer, Worcestershire Acute Hospitals NHS Trust

Jo-Anne Alner (JA) - Locality Director, Arden, Hereford and Worcestershire, NHS England (NHSE)

Sustainability & Transformation Partnership (STP) - Update from Sarah Dugan

In response to a number of comments about the STP SD said that a refreshed ST Plan has been published, along with a Report on the public engagement that was carried out. The Plan has been developed through co-production. The importance of the role of carers has come through the consultation and this will be a focus to be looked at.

Neighbourhood Teams have been developed across the County to enable care to take place closer to home. Any reductions in community bed numbers would be predicated on the work to improve those services which support people out of hospital.

There will be no significant changes to how services are provided without formal engagement and/or consultation with the public.

More on the STP can be found at the [Your Conversation](#) website

Q. What translation and interpreting services are available for people whose first language is not English, particularly to help explain about drugs

A. ST - Translation into community languages should be available at your GP Surgery. This is commissioned by NHS England. If there is a problem at a particular GP practice please let the CCG know and they will follow this up.

Q. There has been another death of a person with a learning disability in a locked hospital miles from the person's home. What is being don't to stop this happening to someone with a learning disability in Worcestershire?

A. ST - There is a national policy to "repatriate" people with a learning disability to their home area. Each individual's circumstances are being looked at to see what local package of care they might need. A barrier previously was that NHS England paid for hospital places, and the money did not follow the person back to the CCG area. This has now been sorted out.

JA confirmed that this was a high priority nationally.

Q. What are the Panel doing to support the welfare and well-being of NHS staff?

A. MMcK - Staff work in a busy and difficult environment. The Trust has a range of health and wellbeing programmes to support them. The Trust are running a programme to support staff to be positive in their approach.

JA - NHSE have developed & trained staff as Respect Champions and in Mental Health First Aid to offer support to colleagues in the work environment. Also a range of measures have been introduced to deal with stress

SD - The H&C Trust engage and involve staff in service change and also have a range of health and wellbeing services. In respect of the STP workforce is a real challenge. It is a struggle to recruit staff across the board. Looking at how to encourage people to come and work in Worcestershire.

ST - The NHS is a tough place to work and staff are very committed. Managers and leaders role is to provide the environment to make the job a bit easier. There are not enough GPs now or in training. CCGs are supporting GP practices to bring different roles in and assisting surgeries with training, IT systems etc.

Q. Can you give us an honest take on the financial challenges facing your organisations and what choices this will mean?

A. SD - The STP outlined that if nothing is done then there will be a £311m deficit by 2020/21 in Hereford & Worcestershire. The STP is looking at can we make it better and reduce the gap. There is a finite sum of money. Looking at back office savings - systems and buildings. Could Hereford & Worcestershire work better together? Not about pooling budgets but functions such as training or specialist services. Committed to having a conversation with the public about what the choices are.

The Health and Care Trust has to make efficiency savings annually and this is getting harder and harder.

ST - The NHS needs to be more efficient. There is too much money spent on running costs, transactions with each other, too much variation between clinical staff and an ageing staff profile. The STP helped make the financial situation clear. We can't do everything for everyone all the time. Commissioners must focus on efficiency. Need to redesign the ways we work together be more collaborative and take a more directly managed approach whilst at the same time keeping services safe and viable

JA - The financial situation is very challenging nationally. NHS organisations have to work together, we can't defend our pot or compete with each other. There is a need to look at transformation so that national funding can be accessed. NHSE will be reducing staff and working more closely with NHS Improvement.

MMcK- There is a lot of back office duplication in the NHS which could be tackled without impacting on patient care.

Q. The Chest clinic at WRH is overwhelmed. Can the Panel comment?

A. MMcK - The Trust is challenged in terms of respiratory physicians. Four people have left and this has caused a backlog. The Trust is doing what it can to recruit people but this is not helping in the short term. Different models are being looked at, including the use of specialist nurses and specialist physiotherapists.

Q. Patients in Wyre Forest hear repeatedly about more surgery being moved to Kidderminster Hospital. If this goes ahead what overnight medical cover will be put in place, as at present there is only out of hours cover which is inadequate and unsafe

A. MMcK - There is an Out of Hours doctor at Kidderminster to see patients. Carefully selected patients are treated at Kidderminster who are not the most ill. If more medical attention is required the patient would be transferred to Worcester, by ambulance if necessary.

Q. Why are there still so many commissioners, providers and Local Authority organisations in Worcestershire? Surely this is not sustainable?

A. ST - The CCGs now have a single management team and joint Sub Committees. There are still three Governing Bodies to keep a local focus. There is potential to work better together (admin, less bureaucracy only doing things once) without a formal merger. The Local Authority are part of many of the changes going on within the NHS.

Q. Does the Worcestershire Royal Hospital provide hand controls for the electric beds in most wards, as the controls for these are not suitable for all patients?

A. SD - this is a complicated issue, different controls are required for different patients. An individual assessment is often required.

Q. Who holds NHSE to account and how do they involve the public in commissioning?

A. JA - NHSE is responsible for commissioning specialist services (e.g. neo natal). Not sure how they engage with the public but will send the details of the responsible person to Healthwatch to follow up

Q. An STP presentation in Evesham was cancelled at the last moment. Is consultation window dressing?

A. SD - So far there has been early engagement on the STP. Absolutely committed to consultation, and there will be full consultation about future proposals. In the STP teams view the Evesham meeting had become about national political issues that the team were not able to engage with.

Q. How are you involving District Councils, who are responsible for Housing?

A. ST - the STP process recognises the importance of housing quality and environment on health and wellbeing. Through the Health and Wellbeing Board

(HWB) District Councils are being more engaged and brought more into the discussion. Improving housing quality and reducing the impacts on health will reduce demand on the NHS.

Why is there such a lack of resources to address Borderline Personality Disorder?

A. SD - the Trust are talking with commissioners about how services can be improved as part of the bigger redesign of mental health services.

The Health and Wellbeing Board signed up to the Charter for Homeless Health which commits them to identify need, provide leadership and commission for inclusion. What have you done and how have you shared this?

A. ST - doesn't have the detail but there has been a lot of work done at Maggs Day Centre in Worcester to provide access to health services (e.g. dentistry and mental health) and help avoid people using A&E.

Q. Why is it taking the CCG so long to pay Care and Nursing Homes the Funded Nursing Care Contribution?

A. ST - not aware that this was an issue. Will follow this up with the questioner after the meeting.

Q. What is the Trust doing to reduce spend on therapeutic communities and instead bring services back and spend the money in the County?

A. SD - The Trust are looking to reduce the number of people being looked after away from home. Each individual's circumstances are being looked at. However this is also linked to the provision of therapies and staff availability locally. It is being looked at as part of the mental health services redesign that is taking place.

ENDS

Healthwatch Worcestershire would like to thank the members of the Panel for taking part.