Dorset Health Scrutiny Committee

Dorset County Council



Date of Meeting	9 March 2017		
Officer	Helen Coombes, Interim Director for Adult and Community Services		
Subject of Report	Briefings for information / note		
Executive Summary	The briefings presented here are primarily for information or note, but should members have questions about the content a contact point will be available. If any briefing raises issues then it may be appropriate for this item to be considered as a separate report at a future meeting of the Committee.		
	For the current meeting the following information briefings have been prepared:		
	Changes to the provision of health services for individuals with Cystic Fibrosis (commissioned by NHS England)		
	Minutes of the Joint Health Scrutiny Committee meeting to scrutinise matters pertaining to the NHS 111 service provided by South Western Ambulance Service NHS Foundation Trust (23 January 2017) (Please follow link to minutes under Appendix 2)		
Impact Assessment:	Equalities Impact Assessment:		
	Not applicable.		
	Use of Evidence:		
	Report provided by University Hospital Southampton; Minutes provided by Borough of Poole		

	Budget:
	Not applicable.
	Risk Assessment:
	Current Risk: LOW (for DCC) Residual Risk: LOW (for DCC)
	Other Implications:
	None.
Recommendation	That Members note the content of the briefing report and consider whether they wish to scrutinise the matters highlighted in more detail at a future meeting.
Reason for Recommendation	The work of the Committee contributes to the County Council's aim to help Dorset's citizens to maintain health, safety and independence.
Appendices	Changes to the provision of health services for individuals with Cystic Fibrosis (commissioned by NHS England)
	 Minutes of the Joint Health Scrutiny Committee meeting to scrutinise matters pertaining to the NHS 111 service provided by South Western Ambulance Service NHS Foundation Trust (23 January 2017): <u>Joint Scrutiny Meeting- NHS 111 Services</u> <u>provided by SWASFT 23 Jan 2017</u>
Background Papers	Briefing paper to Dorset Health Scrutiny Committee, 21 December 2016 (please see agenda item 61): DHSC Briefing papers 21 Dec 2016
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University Hospital Southampton MHS





Wessex adult cystic fibrosis service reconfiguration update

1. Introduction

Representatives from the Wessex Cystic Fibrosis (CF) service met with the chair of the Dorset Health Scrutiny Committee on the 1st December 2016 in order to informally discuss upcoming changes in relation to the CF service. A briefing from this meeting was provided to the Committee and discussed at a Committee meeting in December.

NHS Foundation Trust

2. December/January/February Update

Action taken/Update	Responsible provider
Bridging plan for the adult inpatient (IP) service to be relocated to University Hospital Southampton (UHS) on 1.2.2017 and outpatient (OP) clinics being maintained at Poole Hospital has been agreed whilst discussions with appropriate HOSCs, patient and staff engagement/consultation continue to take place regarding long term option.	NHSE
Poole consultant leaves current post on 1.2.2017. UHS and Poole working to transfer inpatient to UHS in readiness for this date.	UHS/PHFT
Patient engagement has commenced with 2 webinar events. These were hosted by NHSE with representatives from both providers (clinical and managerial).	NHSE
Regular communications to patients has taken place throughout December and January to inform patients of the changes, the options being presented and how they can express their views in a number of ways. This has included three communication briefs, a very detailed letter about both the bridging plan, the rationale and the options going forwards along with a FAQ sheet.	NHSE/UHS
Staff consultation commenced in Poole to inform staff working in the current Poole service about the changes to the service and how this will affect their current contract. The consultation has subsequently finished.	PHFT
As part of the agreed bridging plan, all Poole inpatients have transferred to UHS, all new admissions from Dorset are now being admitted to UHS. All inpatients have received a welcome pack and feedback is being collated from patients and relatives as part of UHS working practice.	UHS
Outpatients continue to be run from Poole Hospital. Poole Hospital can accommodate the CF outpatient service until April. UHS continue to try and source alternate outpatient accommodation but this is proving difficult currently as capacity is limited for the CF requirements (5 rooms on same day)	UHS

Patient engagement feedback so far

All adult people with CF have been given the opportunity to join an on line meeting, to make an appointment to meet either provider and they have all been given an e-mail address to send written information and comments into, as well as a telephone number to ring in. The first webinar with the Dorset CF patients took place on 16th December in the afternoon. The webinar was hosted by NHS England with support from both the clinical lead at UHS, senior manager representation from both UHS and Poole and the CF trust. The second of two webinars took place on the 4th January early evening. There was a small on line turn out with approx 2-3 patients online at any one point on both occasions. All patients who attended on line prefer service model 2, which is that inpatient move to UHS and OP to be provided within Dorset along with provision of a community service.

Themes from these two events included:

- Funding. Is this being done to save money?
- Practicalities of services to be provided at UHS. Do UHS have the same facilities as Poole for an inpatient staying at the hospital
- Decision process going forwards. How long will this take?

3. Next Steps

Action	Responsible provider	By when?
Patient engagement continuation – all patients to be sent a survey asking for their comments	NHSE	28 th February 2017
Completion of Staff consultation	PHFT	18 th March
Letter to be sent to all HOSC chairs	NHSE	31 st January
Review of all patient feedback	NHSE	14 th March
Transfer of inpatients from PHFT to UHS	UHS	1 st February
Decision regarding Long term commissioning arrangements	NHSE	31 st March