

## **30 October 2020: Medical staff focus group**

<b>Facilitator</b>	Ellie Stennett	<b>No. of participants</b>	4/8
<b>Scribe</b>	Jane Gordon		
<b>Questions/Comments raised during online event:</b>  <b>SECTION 1</b> <b>Do you feel up to date on the programmes progress so far?</b> <p>Participant 1: I have read the updates but would like more understanding. I'm new to the programme.</p> <p>Participant 2: I'm new as well. Would like to know what the services would look like day to day. People in my area are struggling to get excited by the programme as they don't really have any set answers? And I don't think they will until things have been decided.</p> <p>Participant 3: I haven't shared anything myself, but I can start making sure that I do. I'm fairly new to the programme as well so I'm still learning. We have regular team meetings in my department</p> <p>Participant 4: I think so? We've all been invited to join in Q&amp;A and drop-in sessions, and we see the updates on staff Facebook and emails. However I do think it is sadly a last priority for people at the moment; especially when people are busy or they want their own time to relax.</p> <p><b>What platform have you found most useful in seeing the updates for the programme?</b>  <p>Participant 1: Haven't seen much on social media (HHFT Staff Facebook), but emails have been good</p> <p>Participant 2: mostly Trust emails</p> <p>Participant 3: I'm a big fan of the HHFT Staff Facebook page and that's where I see most of mine, but I also see the WhatsApp messages and the emails.</p> <p>Participant 4: WhatsApp has been useful in seeing the updates</p> <p><b>What do you think the best way of reaching people in your department would be for us to communicate about the programme more?</b>  <p>Participant 1: Normally through a social event, but can't do that at the moment. – chat on a Teams call or a bi-weekly/monthly meeting with someone from the MOHHS team.</p> <p>Participant 2: Having MOHHS on the agenda at the start of team meetings and giving updates to our team there.</p> <p>Participant 3: Happy to include a couple of lines in our weekly send out – it's mainly rotas</p> </p> </p>			

and update bulletins, but we know people read it.

Participant 4: I think the communications so far is effective. We had a meeting in the summer with our manager to discuss the programme and get our feedback, but we've not heard anything since. The meeting was good and we discussed the programme a lot, it would be nice to have one again. My team have been keen for me as a senior manager to be part of this focus group. It's very hard to get the specialist doctors in the same place as the nurses that is the only issue. Teams work well in our department.

**How do you all feel about the programme so far?**

Participant 1: When I first heard about the programme I thought that sounded like a really good project to get involved with. I don't really know a lot about it at the moment, but that's why I wanted to join to know more. What I've seen in the emails so far has been good and exciting.

Participant 2: It's all very exciting and I'm looking forward to how it will progress. Obviously nothing has been decided and we don't have loads of information so it's hard to get really involved, but we will see.

Participant 3: I'm new to it as well, but so far I think it's great. I've been working for the NHS for a long time and it's great to celebrate some forward movement and it's great for the HHFT patch.

Participant 4: I think it's great but I am sceptical if the new hospital is going to be built on the current site – is all the work going to go ahead while services are still being run? Is that going to be loud? Is there going to be stuff in the way? What about parking? I don't know how it would work.

**Would you find it useful to have more resources as you're new to the programme to give some background/context? If so, what would work best for you/your area?**

All agreed:

- FAQs for ambassadors
- Cheat sheet – digital and print? Like a leaflet.
- Weekly 'these are questions you might get asked after this announcement and here is how to answer them' bullets – in the Hampshire Together Update?

**Do you think the CTH plans have affected views in your area?**

Participant 1: I don't think so? But not many people are talking about the programme in my area.

Participant 2: Operationally – yes, but there have been some general discussions in relation to the programme – more that they don't think it will happen.

Participant 3: Slightly, but they're mainly question wondering where patients will be, what will happen to existing sites and the hospice if we do get a new hospital.

Participant 4: Definitely – it's the main negative point of the programme my team have been talking about I guess.

## **SECTION 2**

### **How do you feel about the current services at HHFT and what are the challenges that could be improved with a new hospital?**

Participant 1: Difficult to manage staff with restricted office space, especially with social distancing. Risk to staff.

Participant 2: Building restrictions due to Covid are a challenge for staffing. Lots of discussion about neonatal unit. As dieticians catering is a big issue, particularly at Basingstoke. Regular flooding puts services out of use and means it's more difficult for us to ensure patients are being fed correctly.

Participant 3: Challenged for space in bereavement – used to sit with families in separate office, now not possible, using shared facility with distractions. Need to reinstate chapel of rest viewings. Not enough family space in hospitals. Need a new building fit for purpose.

Participant 4: I'm not ward based, but the main challenge we face is space. We can't social distance in my current office. It's very loud when you're on the phone and when you're talking to patients they can hear other conversations and it can be distressing. Would be better to have less people so we can talk to patients. I also hot desk a lot as I don't have a specific area because there simply isn't space. Our team also feels very isolated from the rest of the hospital, and our team is spread out over 3 floors, so we don't really have that social benefit of just turning around and asking someone for something. It takes a long time to find someone when it should take a matter of seconds.

### **How is transport at the hospital for you and your teams? Including parking.**

Participant 1: Parking has always been an issue in Winchester. You have to come onto site very early in the morning to even get a space. If not, you need to use park and ride and Tower Street car park, which is fine at the moment. Difficult for less mobile people.

Participant 2: Better during Covid but previously was very bad – had to park in neighbouring estate because the Basingstoke car park was full and had car keyed. Grateful staff parking is still free. If you want a space you need to be here by at least 7am. I'm lucky because I walk to work now, but depending on the new site that may change and I'd like good parking options. As well as this, we do go out into the community when needed so it would be nice to know we will get a space when we come back on site in the afternoon.

Participant 3: Bespoke car parking space for bereaved at Winchester but not at Basingstoke, which makes it difficult for those who need to use our services as they have to pay at Basingstoke. Parking is fine for me, but I have to be here very early to get a space.

Participant 4: We get a lot of complaints from patients and parking. The machine is always broken. I walk to work now, but I know if I drive I have to get here for at least 8am to get a space (BNHH) which limits flexibility. There are days when I need to come in later, but I can't because of parking.

### **How do you find technology onsite currently?**

Participant 1: Takes a long time to sort our equipment for home working, EPR crashes a lot and when it does it means I have no access to anything. It takes over half my day to try and fix with IT. Need to sort server out and systems need to be updated.

Participant 2: Move to paper light means needing good technology otherwise if it crashes, we have no access to patient files at all.

Participant 3: Our service/department cannot work from home at all – we have to be onsite. Helpdesk has been very helpful during COVID.

**In your areas do you work with services outside of the hospital? How well does it work?**

Participant 1: Tier 2 dermatology has a co-ordinator in hospital; cardiology is the same so if we get community requests it gets sent onto them. Don't have much involvement with community as it doesn't benefit our department.

Participant 2: We work closely with the community nurse team – vital for children's discharge. Work closely with health visiting team and GPs. It would be helpful to have health visitors onsite, and CAMHS. Communication could be improved and quicker as we waste a lot of time chasing people.

Participant 3: We also work with community team, work closely with outside services – I think it works fine.

Participant 4: There's always room for improvement. We work a lot with GPs and it seems to work well. I recently had a call with XXX and I feel like we all need to go back and work out what it is that will make things easier on both sides because I know how frustrating it is when you don't have that link and communication with the hospital as smooth as it can be, and vice versa. Getting hold of a GP from our point of view is tricky – we're constantly calling a surgery and they're not available. They might call you back, they might not.

**What do you think are the biggest opportunities with the programme?**

Participant 1: Seeing improvement in the processes and patient pathways, will be better for patients. Less stress.

Participant 2: Each department tries to make improvements but can't do much with structural difficulties – new modern space will improve patient care.

Participant 4: Office space that are appropriate and private for calling patients and reducing background noise. If we're going to be doing more telephone clinics, junior members need supervising or training as well. Having clinic rooms that are fit for purpose – they're ok now, but more modern would be nice.

**Any concerns?**

Participant 1: New opportunities bring a lot of changes and staff and the public may not like that – how we do know they're going to work? I'm trying to keep positive, but I need to know more about the programme. Nothing has been decided yet so it's hard to know. Funding is always a worry as well. We have a lot of ideas but no money.

**How do you think the changes will benefit you and your team in your working life?**

Participant 1: It's been a hard year and a lot more work for everyone. Need proper technology to help and make it easier.

Participant 2: Improvement in technology will help work, stop flooding in kitchen, more space would be a nice benefit.

Participant 3: Will give staff pride in their new hospital, which I hope would improve patient care and staff morale. More space would be great for all in a new hospital.

**(PARTICIPANT 3 LEAVES CALL)**

**How far would you be willing to travel for work?**

Participant 1: I currently travel for about 20 minutes. Wouldn't want to travel much more, maybe a little if it meant better services and place to work. But transport links from where I am isn't great so if I'm late due to traffic there isn't an alternative.

Participant 2: Currently walk to work in Basingstoke, 40 minute drive maximum would be OK. Depends on public transport etc I would rather drive.

Participant 4: I'm flexible within reason. I wouldn't want to go longer than an hour. 30-45 minutes would be best. I'd struggle with any more than that because of school and kids.

**Follow up question – has there been any chat from your Winchester team about traveling to any specific site?**

Participant 4: I haven't caught up with them properly yet, but from previous experience they prefer Winchester because it's closer to home. That is a chat I could have with them soon to find out more.

**Would you travel further for a better work environment?**

Participant 1: Yes, within reason.

Participant 2: Current workplace is very old – would travel to an improved office with more space.

**SECTION 3**

**Are people talking about the programme in your area?**

Participant 1: Mixed feelings, everyone worries about any change. Clinicians are the hardest to convince. Many don't think it will happen.

Participant 2: Some are excited, some cynical. Winchester team more concerned down to site choice.

Participant 4: I've overheard conversations but not many, other than the one meeting in the summer and the updates that some staff see. To be honest, I'm out of the loop with

some staff in my team, so I need to touch base properly, but I know that the feeling is that our department is very isolated and having an acute facility would be better for our department in terms of communicating. Ideally the new hospital would have two cath labs as well because we're trying to build the second one. They're hoping the new programme/hospital will consider this? But other comments are mainly about the site choice, especially RHCH based, as well as what will happen if it ends up on the current site.

**Follow on question - You mention 'cynical' - What are the general negative comments?**

Participant 2: Site choice mainly from those in RHCH

**Follow on question - On the other side, what are positives comments?**

Participant 1: Need to modernise, better technology and equipment opportunities

Participant 2: New kitchen, new facilities, visible change. State of the art facilities

Participant 4: Opportunity for a bigger working space and moving forward on having a second cath lab.

**Any extra comments or feedback?**

All excited to know more about the programme and how it will progress.  
Enjoyed the session and will tell colleagues about it.

**Chat download anonymised**

N/A

**Report written by:**

Jane Gordon and Ellie Stennett