

22 June 2020: Basingstoke Voluntary Action Groups

Facilitator	John Boyman - Head of Public Relations – Strategic Projects	Engagement Team	GC SE
Speakers	Alex Whitfield – Chief Executive, Hampshire Hospitals NHS Foundation Trust Dr Dominic Kelly – Consultant Cardiologist, Hampshire Hospitals NHS Foundation Trust		
Registered participants	11	Participants on Zoom	7
Questions/Comment raised pre-event at registration / website [comments box on Eventbrite registration form]: n/a			
Questions/Comments raised during online event: <p>QUESTION: What do you see as the main changes in GP practice and primary care?</p> <p>ANSWER: We use the word integrated a lot but we need to define this to be sure we all understand what each group means by this. In practical terms it means we improve how we communicate between primary and secondary care and people from CCGs. For example, since Covid-19 we are now having weekly meetings with 60-70 people across the board. It also means we need to improve IT systems and further integrate services. Communication in general needs to be integrated.</p> <p>ANSWER: We also need integration with the voluntary and community sector. They have knowledge of families and communities. It's about trying to get ahead - to identify high risk individuals and families and support them before they get to a moment of crisis. We need to connect with the voluntary sector.</p> <p>QUESTION FROM CHAT: I would like to know if there has been any consideration of embedding advice services into a new centre - along the lines of current Hampshire Macmillan services at all Hampshire Hospitals.</p> <p>ANSWER: It would be really good to include them.</p> <p>QUESTION FROM CHAT: With inactivity becoming one of the biggest impacts on health are more considerations being made of how we embed more community active health pathways?</p> <p>ANSWER: There's been a lot of talk about this. The hospital building as a health and wellbeing campus, integrating exercise areas. We had a talk from Alder Hey - where they got the local community and the children patients involved for example,</p>			

growing their own vegetables to use in the hospital kitchen. We know prevention is a much more efficient way of dealing with healthcare rather than waiting to be sick.

ANSWER: It will also be interesting to look at access in the design of the building, to see it can allow people to walk and cycle there.

COMMENT: The right transport is critical for disabled people. It's extraordinarily difficult to park at Basingstoke. When looking at solutions, the position of the hospital is essential - access to the train, public transport & not having to rely on taxis.

COMMENT: Also community connections are important. There's been a good service, some services rely on volunteers. We need to get these advice services into the hospitals so people don't go home & feel overwhelmed by the diagnosis which may mean they don't follow up which can lead to a deterioration in their mental health and general wellbeing and find it difficult to cope. We need to recognise that the most useful thing happens when people speak to others with the same disability - community services are strapped so we really need to look at building capacity for those services.

ANSWER: Support between people with the same disability is crucial. It can have a stronger impact than anything a clinician can say to people. Bringing patients together to talk about their experiences and feelings. We don't always know what's out there, services and charities we didn't know about.

COMMENT: Digital solutions can provide greater accessibility to services to some, but we need to make sure people can use digital solutions in their homes.

COMMENT: The biggest thing is access. Buses, older people getting to hospital now struggle. Remote is good but the IT needs to work. Some older people struggle with it.

COMMENT: Access & transport is a huge problem across the board. Communication - IT & online is important to get better communication between organisations. There are so many voluntary groups doing wonderful work so we need to connect more to ensure people go to the right people at the right time. There seems to be a gap - social subscribing. GPs don't know which groups are out there.

ANSWER: There is already work going on to do this and to tie into the hospitals. But needs to continue and be considered in the programme.

COMMENT: Hampshire Connect service is not easy to use.

COMMENT: Working with the teams within the hospitals would be great. We currently get some referrals but there's always more than can be done. A major concern is to overcome social isolation, and finding ways to reach people and draw them in.

COMMENT: There is a gap. We have connections with the social care team, dementia organs and with people who are aged 60+. But it's about a lot of our referrals from social care - their needs are too great for us and we need to get in at the beginning to prevent peoples conditions deteriorating. The impact our organisations would have would be better.

COMMENT: We need more integrated care and accessibility.

ANSWER: We know there have been exercises to map which organisations are out there. We need to try to collate the information from social subscribers so they can signpost out. Also have insight into what that community would like to get out of the local healthcare system.

ANSWER: We are moving towards a Primary Care home bubble. Very similar to a PCN. Much more joined up (mental, physical, GPs etc). We believe this is the way to go. In Mid /N hampshire the geographies are agreed so we are starting to look at how to look at it jointly. It's definitely something to develop.

Chat comments/questions

I would like to know if there has been any consideration of embedding advice services into a new centre - along the lines of current Hampshire Macmillan services at all Hampshire Hospitals.

With inactivity becoming one of the biggest impacts on health are more considerations being made of how we embed more community active health pathways?

connect to support. it is not very easy to use. some partners, including voluntary organisations have been mapping local opportunities for social and active options and support services across hants and IOW

Written up by: SE