

Message from Jonathan Montgomery, Chair of Hampshire Primary Care Trust and Debbie Fleming, Chief Executive

The big news of the moment is the white paper, Equity and Excellence: Liberating the NHS, and its accompanying consultation documents.

We welcome the key policy of devolving NHS commissioning to GPs. GPs already play a vital role in driving the commissioning agenda through our practice-based commissioning localities and area professional advisory committees.

The white paper proposals take us further and faster along this route, with plans to form GP commissioning consortia while removing the need for strategic health authorities and primary care trusts over the next few years.

We do not yet know what this will look like, how many consortia there may be or the exact details of the proposed national NHS Commissioning Board.

Some specialist commissioning functions will probably remain with the NHS Commissioning Board, as will the management of primary care contracts, but GPs will be the engine house of NHS commissioning.

It is proposed that new structures for democratic/patient accountability will be introduced to replace LINKs with HealthWatch, now to be part of the Care Quality Commission. These will also replace the

current health overview and scrutiny functions and we are working with the County Council to identify the best ways to move this forward.

More detail on how the new public health service and local government responsibilities for health improvement will operate is expected in the Autumn. Changes to social care are also promised, but as yet no details have emerged. However, all the indications are that personalisation (in both social care and health) will be a key principle.

This is obviously a time of considerable uncertainty for commissioning staff in the NHS. With our partners, we are committed to retaining essential and valuable PCT skills within our local health and social care community. Hampshire needs to ensure that this expertise remains available to new GP consortia. In the transitional phase, consortia will also need support to develop and we will help them do that to meet the ambitious timetable that the Secretary of State has set out.

Hampshire is well placed to thrive in the new NHS environment. It has good quality primary care to build on and innovative professionals (not just its GPs) who will be able to make the most of the opportunities that are opening up. We must not forget, however, that we have a tight financial position and we must deliver on our plans for quality and innovation to enhance the productivity of services. We need both to manage the transition to the future and the challenges of the present. Exciting times!

*Debbie Fleming
Jonathan Montgomery*



Contents

Inside NHS Hampshire

- Board meeting
- Next board meeting – September 2010
- Finance and Performance Update
- Re-appointment of Chair – Hampshire Primary Care Trust
- Re-appointment of PCT non-executive director

Other health news

- Older Peoples' Well-Being in Hampshire
- Active Living! Campaign

Reducing health inequalities

- Hampshire residents enjoy longer life expectancy

Working with you to improve services

- Transforming local NHS services

News from our partners

- Winchester Bereavement Support
- 'All Inclusive' starts PA School
- News from the SCA group

What was agreed at our last board meeting?

The NHS Hampshire Board last met on Thursday, July 22, 2010 at the Princes Hall in Aldershot - all the papers from this meeting are on our website for more information.

Aside from reviewing our financial and operational performance, papers considered by the Board included:

- **Joint Hampshire Mental Health Commissioning Strategy** – the Board approved the formal consultation on the Draft Joint Mental Health Commissioning Strategy – this consultation can be viewed on our website if you would like to get involved.
- **Transforming Community Services: integrating Hampshire Community Health Care and Hampshire Partnership NHS Foundation Trust** – the Board noted the progress in transforming community services: integrating Hampshire Community Health Care and Hampshire Partnership NHS Foundation Trust. A governance structure and an update regarding the draft business case was submitted to the PCT Board on July 27, 2010 for approval.
- **South East Hampshire Sustainability Plan** – the Board received the South East Hampshire Sustainability Plan.
- **Developing Health Services for the Population of Havant and South East Hampshire** – the Board noted the progress report and the emerging options arising from the review of plans for a new hospital at the Oak Park site in Havant.
- **Governance: NHS Hampshire Single Equality Scheme 2010-2013** – the Board ratified the NHS Hampshire Single Equality Scheme 2010-2013.
- **Committees of the NHS Hampshire (Commissioning) Board** – the Board received reports from a number of committees.

Come along to our next Board meeting

The next board meeting of NHS Hampshire will take place at 1.00pm on Thursday, September 23, 2010 at Waterlooville Community Centre, 10 Maurepas Way, Waterlooville, Hants PO7 7AY - please do come along.

The papers for this board meeting will be available on our website approximately one week beforehand. If you would like further information on attending, please call Ian Corless on 023 8062 7460 or e-mail ian.corless@hampshire.nhs.uk.



Click on 'View our Board Papers' on our homepage – www.hampshire.nhs.uk

There has been a change to the way NHS Hampshire reports on performance. The new Finance and Performance Report brings together performance on finance and national targets, and encompasses the key operational elements of the previous Commissioning Performance and Assurance Report. In this transitional year for PCTs, the strategic risk register will be refocused as the Commissioning Board Assurance Report, to provide a clear and more dynamic approach to strategic risk management.

Performance Targets

The report provides a summary of current performance against all NHS Hampshire's targets for 2010/11. Areas of strong performance include:

- MRSA and Clostridium Difficile infections
- Cancer waiting times: Two week maximum wait from referral to 1st outpatient appointment (including for breast symptoms); 31 day maximum wait from diagnosis to treatment; 62 day maximum wait from referral to treatment
- Proportion of people who have a Transient Ischaemic Attack and are at high risk of stroke, who are scanned and treated within 24 hours
- 4 week smoking quitters who attended NHS Stop Smoking Services
- Delayed transfers of care.

The report focuses on highlighting 'red' rated targets to the Commissioning Board. The Board's attention was drawn, in particular, to the following 'at risk' targets and actions in place to improve performance in these areas:

- Patients who spend at least 90% of their time on a stroke unit
- Percentage of women who received results of cervical screening tests within two weeks
- All age all cause mortality
- Teenage pregnancy
- Breastfeeding at 6-8 weeks
- Access to NHS dentistry
- Emergency bed days.

Public consultations following White Paper

Following the release of the White Paper, a number of consultations have been launched. NHS and partner organisations are encouraged to read and respond to the consultations by October 11, 2010 including those detailed below. All can be viewed online at www.dh.gov.uk/en/Consultations/Liveconsultations/index.htm

Liberating the NHS: regulating healthcare providers

This is part of a public consultation on the implementation of proposals in the White Paper and its supporting papers. It further outlines proposals on foundation trusts and the establishment of Monitor as an independent economic regulator for health and adult social care. It seeks views on specific consultation questions.

Liberating the NHS: commissioning for patients

The Government's White Paper sets out proposals for putting local consortia of GP practices in charge of commissioning services to best meet the needs of local people, supported by an independent NHS Commissioning Board.

The consultation and engagement process asks for views on how we should implement these proposals.

Increasing democratic legitimacy in health

This consultation builds on the proposals in the White Paper to increase local democratic legitimacy in health. This will be achieved through local authorities: i) being given a stronger role in supporting patient choice and ensuring effective local voice; ii) taking on local public health improvement functions; and iii) promoting more effective NHS, social care and public health commissioning arrangements.

Transparency in outcomes: a framework for the NHS

The White Paper sets out how the Secretary of State for Health will hold the NHS Commissioning Board to account for delivering better health outcomes through a national NHS Outcomes Framework. This consultation looks at how the NHS Outcomes Framework should be developed.



Re-appointment of Chair – Hampshire Primary Care Trust

Hampshire Primary Care Trust (HPCT) is pleased to announce the re-appointment of Chair Jonathan Montgomery to the Board for another term of four years.

Jonathan is Professor of Health Care Law at the University of Southampton and has served on NHS Boards in Hampshire since 1992. He has a number of national roles, including Chairman of the Human Genetics Commission which advises the UK governments on the implications of developments in that area. He was a member of the Commission of Inquiry into the Future of Adult Social Care, whose report *Getting Personal: a fair deal for better care and support* was published by Hampshire County Council in 2008.

The re-appointment was made by the Appointments Commission and will run for four years from September 4, 2010 to September 3, 2014.

Jonathan Montgomery has not declared any political activity in the past five years. Other ministerial appointments held include Advisory Committee on Clinical Excellence Awards, Department of Health, 2005-2011, and Human Genetics Commission.

Re-appointment of PCT non-executive director

Hampshire Primary Care Trust is also pleased to announce the re-appointment of non-executive director Tracey Faraday-Drake who will serve for a further four year term.

Tracey is a Fellow of the Chartered Institute of Personnel and Development. She is director and founder of Drakes consulting who provide Business and HR consultancy, Coaching and Mediation. Tracey was previously Chief Executive of Sussex Oakleaf Housing Association, an organisation providing housing and support to people with mental health needs. She has a background in working in the third sector and has worked in the British Red Cross, Rethink and NACRO. Tracey was previously on the Board of the National Mental Health Providers Forum. She lives in Steep with her husband and two young children.

The re-appointment was made by the Appointments Commission and will run for four years from June 1, 2010 to May 31, 2014.

Tracey Faraday-Drake has not declared any political activity in the past five years and does not hold any other ministerial appointments.



Older People's Well-Being in Hampshire

Four years ago Hampshire County Council's 'Older People's Well-Being

team' consulted on a strategy for Hampshire to enable older people to stay independent in their own homes, with a positive quality of life. Since then the team has been working with public and voluntary organisation partners to focus on the priorities identified. These include support with garden maintenance across Hampshire and encouraging exercise and activity to sustain both mental and physical health.

To ensure the focus remains on the most important issues, the views of Hampshire people are being sought. A questionnaire for older people and interested parties to enable them to say what their top priorities are has been produced.

You can complete the questionnaire online by visiting www3.hants.gov.uk/bettertime/cx-olderpeoplesstrategy or if you would like to receive copies to use with others in community settings then contact karen.ferris@hants.gov.uk or telephone **01962 832410**.

Active Living! Healthy Hampshire & IOW

Health professionals know that leading an active lifestyle is important for health and well-being yet helping to fit activity around work, school or family commitments is a real challenge.

In support of the Change 4 Life campaign, Physical Activity Officers in Hampshire and the Isle of Wight have joined together to create an 'Active Living Healthy Hampshire!' campaign. The campaign provides information for targeted populations on 'no cost low cost' activity that can be built into everyday life. The focus is currently on walking, cycling and jogging and a new website has been created with details on where to do these locally. Resources to help individuals undertake a pedometer challenge have also been developed.

The simple message is - getting more active doesn't have to mean putting on lycra or playing competitive sport. It is about finding the time to build physical activity into your daily life, doing activities you enjoy at a time to suit you. If you have children, making time for the whole family can be extremely rewarding especially as being active with your kids helps to form positive attitudes towards physical activity later in their life.

The best part is that it needn't cost the earth! Increasing the amount you walk each day is a perfect start, and cycling or swimming with family and friends are great ways to get more active - even household chores such as vacuuming or gardening count.

The inter-agency team is visiting Asda superstores and cultural events across the county to speak to residents about the campaign and gather evidence on issues around physical activity to help inform future work in Hampshire.

For further information on how to get the Hampshire population more engaged with exercise in their local area, please visit www.activehampshireiow.co.uk and feel free to contact us for resources by e-mailing sport Hampshireiow@hants.gov.uk



Hampshire residents enjoy longer life expectancy

Recently released national Health Profile information by the Association of Public Health Observatories has revealed that Hampshire residents across all district council areas live longer lives than the national average, and generally have better health.

Residents in the county experience a higher than average life expectancy of 80 years for men and 83 for women - national averages are 77 for men and 82 for women. In addition, the rates of deaths from all causes, the rates of early death from cancer and from heart disease and from stroke have all fallen over the last ten years and are lower than the average for the whole country.

Director of Public Health, Dr. Ruth Milton, commented on the health profiles; *"The overall picture of relatively long and healthy lives for Hampshire residents is very encouraging. It is clear that positive health messages are reaching most of our adult population who are also taking great responsibility for their own health and well-being by reducing their risks and changing their behaviours."*

"It must be said, however, that there are small pockets within the county where the general health is not as good. These include the areas of Hampshire with the highest levels of deprivation such as parts of Gosport and Havant. Therefore we are continuing our focused efforts to reduce these inequalities as one of our priorities."

Whilst identifying that Hampshire residents generally have long, healthy lives, an area of concern is the high rate of a type of skin cancer - malignant melanoma. This is associated with exposure to sun and reflects both the better climate in the south of England as well as the frequency of foreign travel.

Full health profile information for each local authority in the country is published by the Association of Public Health Observatories, via their website: www.healthprofiles.info



Transforming local NHS services

Our Operating Plan for 2010/11 focuses on driving up quality, addressing inefficiency and waste, tackling health inequalities and reducing unnecessary hospital admissions. To do this we need to carefully consider how we spend every pound of our budget and ensure it is spent in the best way possible for Hampshire residents.

A big part of our plans and changes is to ensure that everybody is treated in the right place, at the right time by the right person. To do this we need to ensure that services available are in the best location, staffed by people with the right skills and used at the most appropriate time.

This work includes transforming how local people understand and use the range of urgent care services available to them e.g. providing a range of services so people only need to use the Emergency Department (A&E) when necessary. By ensuring the right care and support is provided closer to patients homes we can avoid people spending time unnecessarily in a hospital.

We are also working to transform how planned care is used and how this can be made more efficient with improved outcomes for patients. This involves hospital consultants and GPs working together to critically review patient pathways in light of new technological advances, guidance from NICE, nation and international best practice and changes in treatment, to ensure that the best clinical outcomes for patients are delivered as effectively and efficiently as possible.

Patients have said consistently that they want care close to where they live, shorter stays in hospital and more efficient administration systems, so that will be the initial focus. The types of changes being planned are:

- Caring for more people in their own homes
- Supporting more people to care for themselves
- A greater focus on prevention and helping people to stay healthy
- Localising health services where possible and centralising where necessary

To do this local community services, hospitals, social services and primary care are working together to be more effective. Other areas we are examining to ensure we spend our money wisely are reducing management costs, working more closely with local authorities to buy services more effectively and reviewing the use of agency staff.

How can we improve unscheduled care?

The NHS trusts across Hampshire, Southampton, Portsmouth and the Isle of Wight have been working together with the South Central Strategic Health Authority (SHA) to set out a vision for what unscheduled care services could look like in the future.

Unscheduled care is care that is not planned or pre-booked with your GP or hospital, such as urgent GP appointments, minor injuries or visits to the Emergency Department (A&E).

We have looked at the current situation, why things need to be improved for patients and developed a proposal for how unscheduled care services could be delivered in the future, based on feedback from patients, doctors, social services and the public.

Importantly, the patient is at the centre of these ideas. Patients have told us they want local, accessible services that open at

convenient times. They also want their health needs to be managed so they don't end up in hospital if they don't need to.

Our collective aim is to focus on preventative care and planned care while providing a strong, clinically effective model for urgent care when needed.

We are keen to hear your feedback on these initial ideas. This will help to inform our plan to take forward locally. The draft strategy and a summary can be viewed on our website at www.hampshire.nhs.uk/unscheduledcare Please send any comments, views or questions to yourviewscount@hampshire.nhs.uk by September 24, 2010.

'All Inclusive' starts PA School



Earlier this year All Inclusive Disability Consultants CIC, a social enterprise based in

Kingsley, near Bordon, was awarded a grant from Hampshire County Council to develop an innovative service called the 'All Inclusive PA School' to train personal assistants to support disabled people to get more out of life. This is not just about personal care - it is about helping disabled people fulfil volunteering and job positions, social events and community activities.

All Inclusive believes that Personal Assistants and self-employed Care Assistants are an area of employment growth, offering more satisfying careers to individuals. As more disabled people are awarded direct payments and individualised budgets to manage their own care and support packages, it is important to produce a trained workforce that will empower the disabled community and make this possible.

As well as providing training, All Inclusive will also maintain a database of trained PAs and Care Assistants, who will be CRB checked, enabling them to offer a matching service with disabled people. This could be to fill a permanent position, or for cover at conferences/seminars, or as part of a sickness/holiday cover contingency plan.

For more information about services from All Inclusive visit www.allinclusivecic.com, e-mail iain@allinclusivecic.com or telephone **01420 488885**.



SCA Group teams up with Alabaré for better care and support in the south



SCA Group and Alabaré have signed a partnership agreement that will see the two organisations working co-operatively to improve the lives of vulnerable people across the south.

SCA Group is one of the longest-running social enterprises in the country. It provides not-for-profit community care, day care, NHS dentistry, advocacy, community transport, social enterprise consultancy and health and social care training, mainly in Dorset and Hampshire, including the Fenwick2 Health and Well-being Centre in Lyndhurst.

Alabaré operates in Hampshire and the South West. The charity supports homeless people, vulnerable young people and people with learning disabilities and mental health needs. It runs crisis drop-in centres, supported housing, resettlement services and a training and employment centre for people with learning disabilities and enduring mental health issues.

The two organisations will remain separate but will work together on joint projects at both a national and local level. They will share expertise and business intelligence, monitor national health and social care policy and hold regular CEO and Board meetings to explore joint working and disseminate good practice.

To find out more visit www.scagroup.co.uk or contact Brian Strevens at SCA Group on **023 8036 6663** or Andrew Lord, Chief Executive at Alabaré on **07900 216393** or www.alabare.co.uk

Winchester Bereavement Support

Winchester Bereavement Support is an independent voluntary organisation offering a service to bereaved individuals in Winchester and the surrounding areas. Support is normally given through home visits by "Bereavement Visitors" who are carefully selected and who must successfully complete a comprehensive training programme.

Referrals are made directly by the bereaved person, although this is often on the recommendation of their GP. The service is confidential and free, and the visitors are given full support from trained counsellors. For anyone interested, there will be a new training course in the autumn.

E-mail: help@winchesterbereavementsupport.org.uk