

## 30 July 2020: Parish Councils- Online engagement session

Facilitator	Ellie Stennett - Marketing Officer	Engagement Team	GC
Speakers	Alex Whitfield - Chief Executive, Hampshire Hospitals NHS Foundation Trust Tamara Everington – Chief Clinical Informatics Officer, Hampshire Hospitals NHS Foundation Trust		
Registered participants	N/A	Participants on Zoom	43
Questions/Comment raised pre-event at registration / website [comments box on Eventbrite registration form]: N/A			
Questions/Comments raised during online event: QUESTION FROM CHAT: How many and which services are provided away from the			
hospital site?			
ANSWER: Currently there are aspects of every service which are offered off site. e.g. pediatrics have hubs in the community where consultant pediatricians have clinics together with GPs. In cancer there are home treatments being delivered.			
QUESTION FROM CHAT: Is there space by current hospital to build a new one and maintain services from current one , Big hospitals take a lot of space during build phase .			
ANSWER: We have a list of possible sites. On that list there is the current Basingstoke site with some addition of other land nearby. But from a logistical point of view it would be a much harder build and this will be taken into account.			
QUESTION FROM CHAT: Back in 2014 ? BDBC granted planning permission for a new hospital at land north of Dummer. What went wrong ?			
ANSWER: There were plans for a critical treatment hospital. In 2017 the CCG did some work to see if it was affordable or not and decided it wasn't. But it was different from what we're talking about here. What we're thinking about here is that the new hospital will provide all services not just acute work. Some of the inherent costs aren't there now because we can do so much more outside the hospital - clinics, remote work, video calls etc.			
QUESTION FROM CHAT: Are any of the other 4 hospitals in Hants being 'rebuilt' as well?			
ANSWER: Southampton and Portsmouth aren't in this programme. This programme is about our Trust which is Winchester, Basingstoke and Andover.			



QUESTION FROM CHAT: You talked about care homes. Can you please explain how you see the relationship developing with the ambulance service?

ANSWER: One of the difficulties we have is that all our services - 111, ambulance, GPs - have separate information systems making it difficult to support care across the services. We're looking at some technology to allow us to move information from one system to another to allow information to flow. Also looking at video consultation from the care home.

QUESTION FROM CHAT: is there potential for financial transparency in work with social services ? there has been a challenge between discharge and alternative facilities causing "bed blocking " in the hospital environment .

ANSWER: During Covid, the financial rules around social care and health care have been 'parked' in favour of understanding where the best place for the patients is for care. We've worked that out first then worried about who is paying for it afterwards. We used to have up to 80 'delayed discharges' but since Covid we have got down to none on some days. It has demonstrated that this challenge of delays and 'bed-blocking' is solvable.

I suspect that we have spent less money than before because keeping people in hospital is expensive. I am keen we don't go back to the position where the individual stays in hospital until we figure out who is paying because it is not good for the individual or the hospital.

QUESTION: FROM CHAT: Will there be regular through weekend healthcare consultations and services e.g screening, scans, consultations etc. Great work over CV19 but will this continue?

ANSWER: One of our limitations of doing everything all over the place. If you centralise you can provide 24/7 working.

ANSWER: If having 7 day services is important we need to log that as part of this listening phase.

QUESTION FROM CHAT: what support is offered to friends and family to serious A&E intakes

[Cont.d] You can have a serious intake which is a traumatic situation. They're rushed off to A & E but anyone who has come in with them just gets left and is not supported in any way.

ANSWER: It's an interesting point. I do see relatives all over the hospital who have need. We do have a room but not necessarily any support.

ANSWER: It is something our emergency department staff are aware of. They will help sort out transport. I'm sure it's something we could do more about. People have talked about spaces for all sorts of things, such as for volunteers, but also relatives' spaces.

QUESTION FROM CHAT: is the new hospital going to be more green? also are going to be green private spaces not just for patients but for staff to gain to time to reflect



ANSWER: I am hoping it will be green in both senses. The national programmes require us to be carbon neutral and we'd want to do that anyway. In terms of green spaces, I was really inspired by some work we saw about the Alder Hey hospital. They asked the children to draw a hospital and they drew pictures of trees and green spaces. So we hope that is something we can achieve. This would be easier to build on a new site rather than an existing one.

QUESTION FROM CHAT: What are the plans for the old hospital sites? Will there be some medical facilities there?

ANSWER: It's all to be decided and depends on what people say and what the clinical review says. It's an input phase at the moment.

QUESTION FROM CHAT: All the aims of health services in Hampshire are absolutely right greater integration joined up service etc This has been talked about since the inception of the NHS in 1948 How are you going to make it happen this time

ANSWER: I think we have got a new belief since Covid that we can do it. With Alex and the top leadership team we believe we can deliver this.

QUESTION FROM CHAT: Thanks for the response in respect of the ambulance service. Collaboration between IT systems is clearly essential. Can I place on record the need for top-notch IT security? Seemingly every day we hear another major hack. Does this responsibility fall to you or to central government?

ANSWER: That is very clearly our responsibility, not the central government. Our biggest IT risk is our people, mistakes happen. We have to work very carefully with people on the ground to help them and have better systems which support better data security and to build up their digital skills. We also need to support our cyber security team which is really good. The biggest hacking issue is people setting rather loose passwords - we're addressing that now.

QUESTION FROM CHAT: how do you see the children services changing, not just medical but mental health

ANSWER: Children don't want to come to hospital and particularly take a whole day off school for appointments. I see children's services changing by maximising the use of the digital consultations where appropriate. We already run some positive pediatric clinics in GP practices.

In terms of mental health, this is a growing need. G floor in Basingstoke was designed for children with physical health needs. More and more often we have children, in particular teens, who are in a mental health crisis. They have some physical and mental health needs. But the facility itself isn't ideal. I am keen we think about meeting all the needs of the child - physical and mental.

ANSWER: There's an opportunity there because they are tech savvy and so are good at interacting with digital tools. Our consultants have been doing shared clinics with consultants from Southampton and it allows you a window into people's homes. If you see them in their own environment you get a real feel for what the issues are.



QUESTION FROM CHAT: Will mental care be one of the services. Especially interested as regards eating disorder

ANSWER: We don't provide eating disorder mental health services as a Trust, but we are working very closely with Sussex (children) and Southern Health (adults). We are working with Southern to see how we can bring mental and physical more closely together. It's not directly part of this programme but we are keen to make that one of the opportunities.

QUESTION FROM CHAT: As a North Waltham Parish Councillor, is the North Waltham/Dummer site still a considered location?

ANSWER: We have a long list of bits of ground that are big enough. It's on that list at the moment.

QUESTION FROM CHAT: How big is the site of the existing hospital and its grounds? How big a hospital could you build on this site if you had a blank sheet of paper? I am asking this because it seems a great site from accessability point of view [Cont'd] I have considerable experience of this site and I think it is a great site from an accessibility point of view as its next door to a big population. Could you build a super hospital where the new one is.

ANSWER: You could develop this site but it would be a challenge to do that whilst looking after patients and running services. It's just more complicated.

QUESTION FROM CHAT: What about Parking? for staff and also for family visitors ... how important will this be for the plans?

ANSWER: Very very very important! Pre-Covid, as Chief Exec I would receive an email every day about parking from staff, visitors, patients, drivers. Parking is a really big issue. Not everyone drives so public transport is an equally important issue. We also need to be carbon neutral. We need to consider how we meet our environmental targets.

QUESTION FROM CHAT: Have you thought about links with advice services, such as Citizens Advice ? Illness often comes with finance worries that can be detrimental to a patient's mental health.

ANSWER: We already do this with cancer patients. But looking ahead to the difficult financial times we're facing, this is going to be ever more important. We need to log that for consideration

QUESTION FROM CHAT: And please don't forget the active transport needs of such a site (cycling, e-cycling, running, walking etc.)

ANSWER: I agree, with all the recent initiatives coming out we really do need to make sure people can get to the hospital by those methods as well.

QUESTION: For parking, have you considered park and ride and shuttle buses so you do not have to have the site itself so cluttered.



ANSWER: Just before Covid we were quite far down the path of signing a contract for park and ride for the existing site because it has run out of spaces. Because of Covid we have staff working from home, fewer visitors and remote consultations and there haven't been as many cars on site.

QUESTION FROM CHAT:a pp-based payment for parking payment, no more machines that don't work please

ANSWER: I have asked our parking team to investigate this and see how long it will take to get it up and running.

QUESTION: [*bad audio*] grants from energy companies to improve energy efficiency in their homes. We've put ill health on our list of what makes you qualify, for example lung and heart problems are exacerbated by cold homes. I'd love to get a contact within the hospital or health system because consultants could refer people to us to see if we can get the funding for that and I was wondering where to start because you're a huge place.

ANSWER: One of the good people to talk to is Shirlene Oh who is the Director of Strategy and Partnerships but if Ellie could get your details and we can make sure we get you to the right person.

QUESTION: Someone mentioned that the provision of car parking implied a lot of drivers are damaging the environment. You should have in mind that we are moving towards electric cars and autonomous cars and buses and I think you should recognise that the world is changing and that petrol cars are out, so you can still provide good access to cars.

ANSWER: That's a really good point, if we're going to be opening this in 2026/2028 the proportion of cars that are going to be electric will be much higher than it is now.

QUESTION: I am from the highest village in Hampshire and we are quite remote. We have no public transport whatsoever, and not would it be efficient to have it, so accessibility by car is very important. There are a lot of small villages like this in the county.

COMMENT FROM CHAT: with regard to electric cars you should consider charging points as well

COMMENT FROM CHAT: We are all going to get electric bikes on prescription

ANSWER: Good point. But it is a challenge as they all have different chargers The comment mentioned on prescription and we are doing a lot of social prescribing of this sort of thing.

## Chat downloaded:

how will you integrate your services with that of the care homes in the county in light of the issues encountered with Covid 19

We need to think in terms of a whole health care system We need better links to social services voluntary sector education housing etc We cannot solve the issues with hospitals alone Clearly the main challenge is the ageing population



Tamara Everington: We have introduced a new Telehealth Service direct to care homes which now supports over 150 homes and we will rollout further. We are utilising new technology (electronic observations) to support care in these homes and offering back up support from a multidisciplinary team.

How many and which services are provided away from the hospital site?

Need to think about transport links and accessibility

Is there space by current hospital to build a new one and maintain services from current one, Big hospitals take a lot of space during build phase.

Have you factored in Manydown and Micheldever?

Remember active transport too - we need to offer safe cycle / walking routes to and around wherever it is sited.

Alex Whitfield - CEO HHFT: we are talking to BDBC, WCC and HCC about Manydown and Micheldever and making sure they are factored in.

Hi. Back in 2014 ? BDBC granted planning permission for a new hospital at land north of Dummer . What went wrong ?

Alex Whitfield - CEO HHFT: - Good question. I will answer this in the Q&A.

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And please don't forget the active transport needs of such a site (cycling, e-cycling, running, walking etc.)

Where next and how can we help

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on pescription

Thank you for a very positive and forward thinking and caring presentation . good news for all opus in Basingstoke

Alex Whitfield - CEO HHFT: Thank you everyone - some brilliant thoughts there. Very helpful.

Tamara Everington: What a fabulous community we have!

Report written by: SE