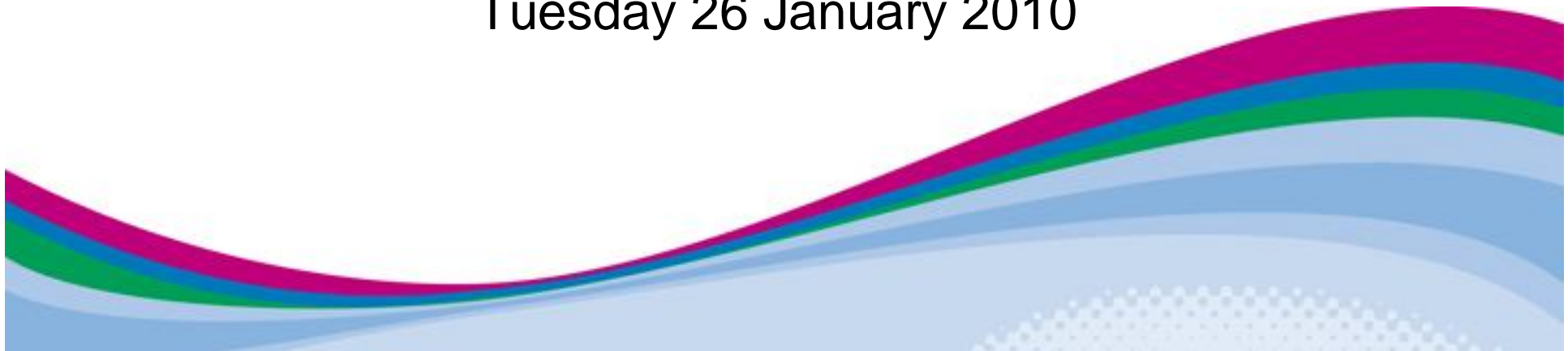


Oak Park Review

**DELIVERING HEALTH SERVICES FOR THE
POPULATION OF HAVANT AND SOUTH EAST HAMPSHIRE**

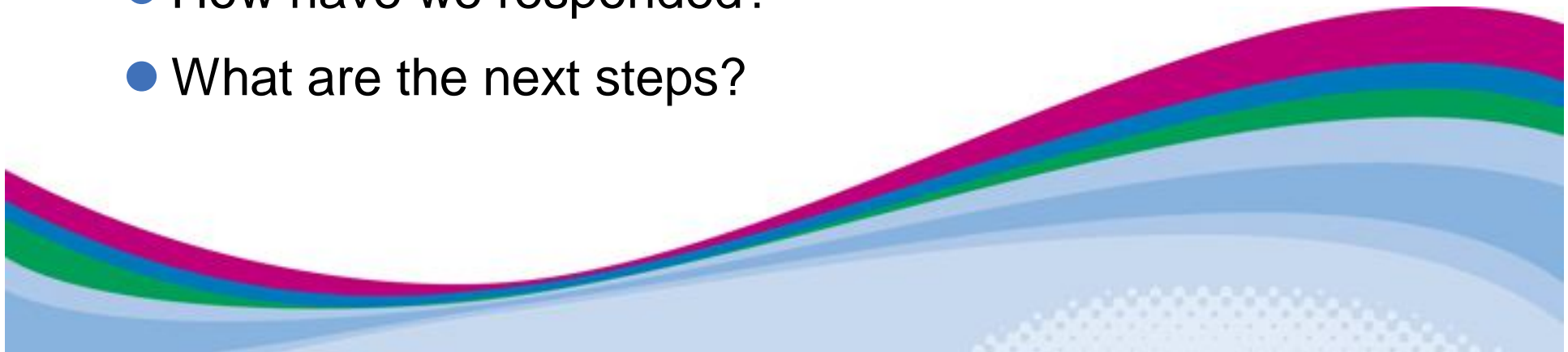
Health Overview and Scrutiny Committee

Tuesday 26 January 2010



What we are covering today

- What was planned?
- What changed?
- How did we respond?
- How did we involve local people and clinicians?
- What did they tell us?
- How have we responded?
- What are the next steps?



What was planned to be at Oak Park?

- Outpatients 30% - Approx 24,000
- Diagnostic Imaging – GP referrals & support for other services on site
- Assessment Treatment and Rehabilitation Centre for older people
- Therapy: physiotherapy, occupational therapy and speech and language therapy
- Podiatry
- Children's clinical services
- Endoscopy – 1,500 per year
- Minor Injuries – 130 attendances per year
- In-patient services – 25 intermediate care beds & 24 older person's mental health beds



What has changed?

- Economic outlook
- Health needs increasing circa 1.4% (cost) per year
- Whole systems working across South East
- Affordability for a net additional cost: £3.6m per year for the building
- Tested all possible alternatives?
- Standards and care pathways



How did we respond to the challenge?

- Increased focus on productivity, efficiency and agreed to review all major developments/investments including Oak Park plans
- Oak Park Review Steering Group including clinicians
- Explored reduction in cost
- Potential for better use of the existing estate
- Key stakeholder workshops
- Health needs assessment at ward level
- In depth interviews with hard to reach residents, surveys, presentations and discussions
- Shaped ideas into feasible options
- Staff user groups
- Visits to existing health facilities
- Options appraisal exercise
- Recommendations



How have we involved local residents, local stakeholders, staff and clinicians?



Involving local residents

- Information and survey to 1300 residents via Havant Citizens panel: 981 responses
- Information and survey to NHS Hampshire members in the area: 36 responses
- 16 in-depth interviews with seldom heard residents in Leigh Park and Wecock Farm
- Attended several community fora: approximately 130 attendees
- 235 written comments received



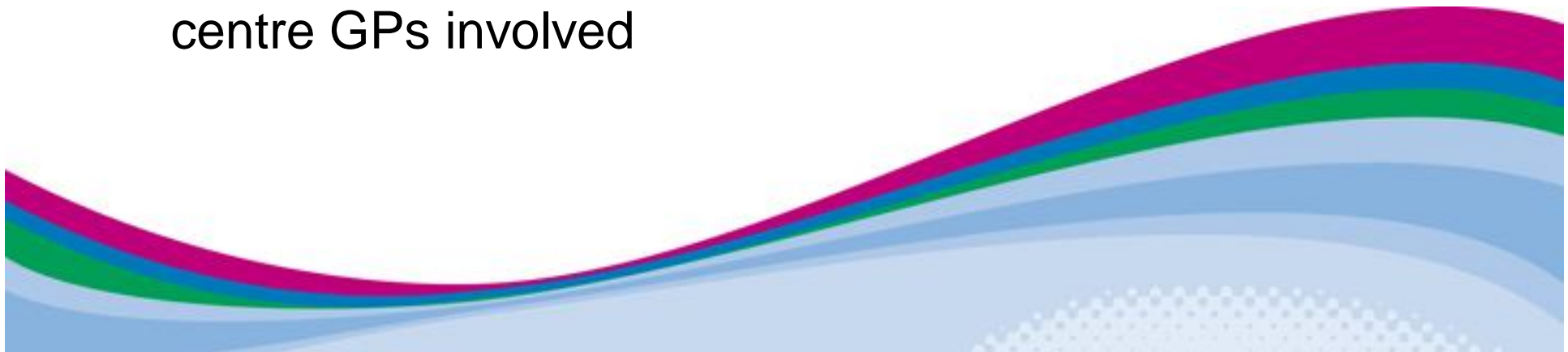
Involving stakeholders

- Seven meetings with individual councillors, MP, faith leaders, prospective parliamentary candidates,
- Presentation and discussions at 11 stakeholder meetings
- Two stakeholder workshops with 90 attendees
- Four tours of facilities organised
- Written correspondence MP, local leaders, HOSC



Involving clinicians

- Clinicians attended the stakeholder workshop
- Doctors, nurses and therapists from across the Havant area on Steering Board
- South East Area Professional Advisory Committee involved
- Services managers from community services, mental health services, acute trust and primary care involved
- Practice based commissioning and Havant Health centre GPs involved

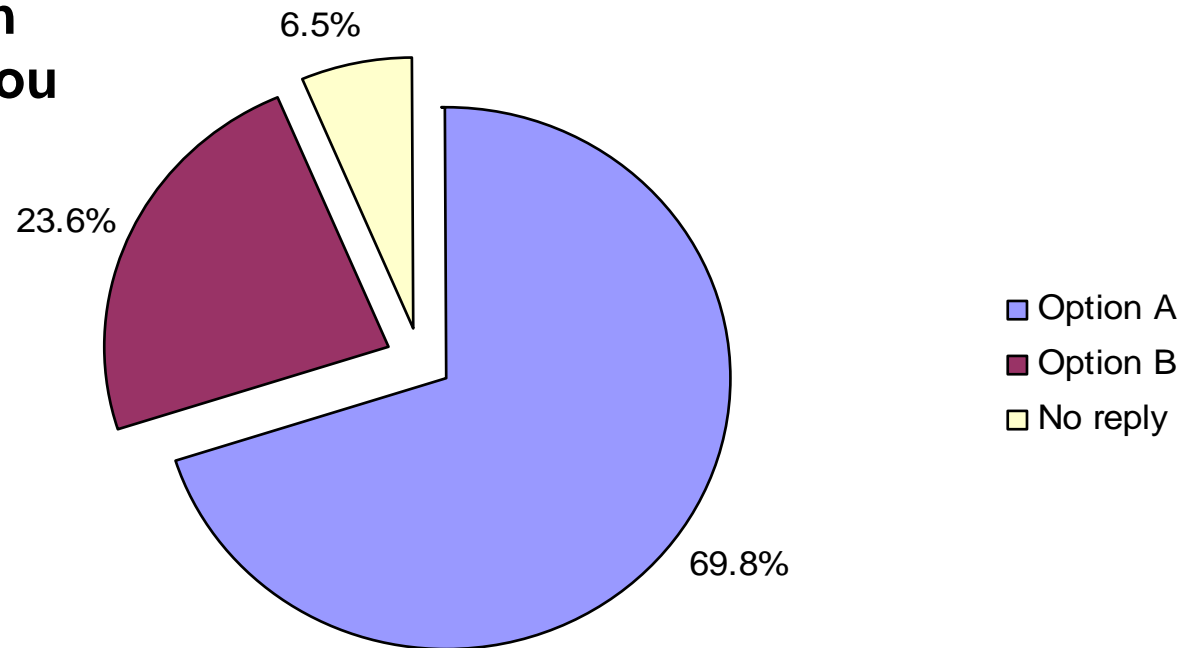


What did local residents, stakeholders and clinicians tell us?

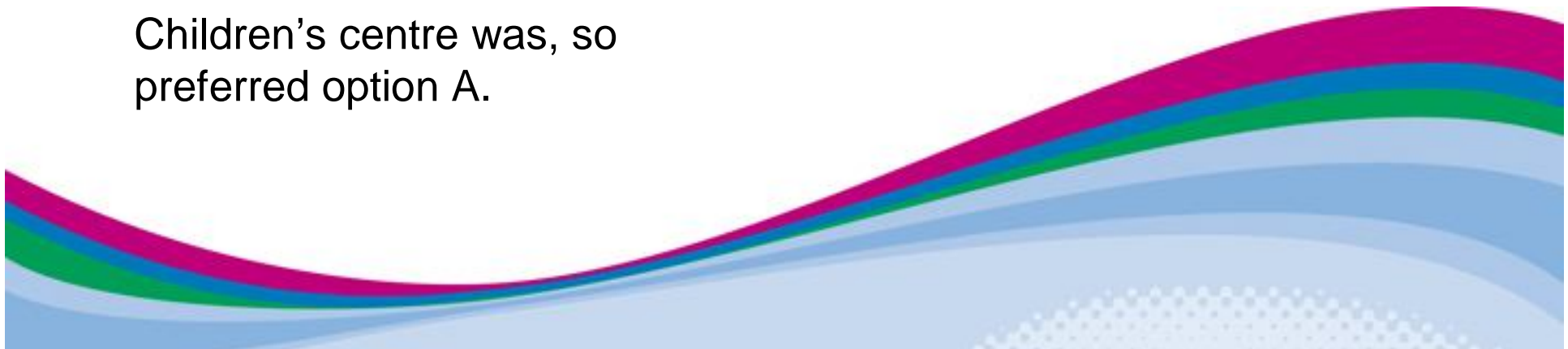


Survey responses

- Please tell us which outpatient option you prefer...



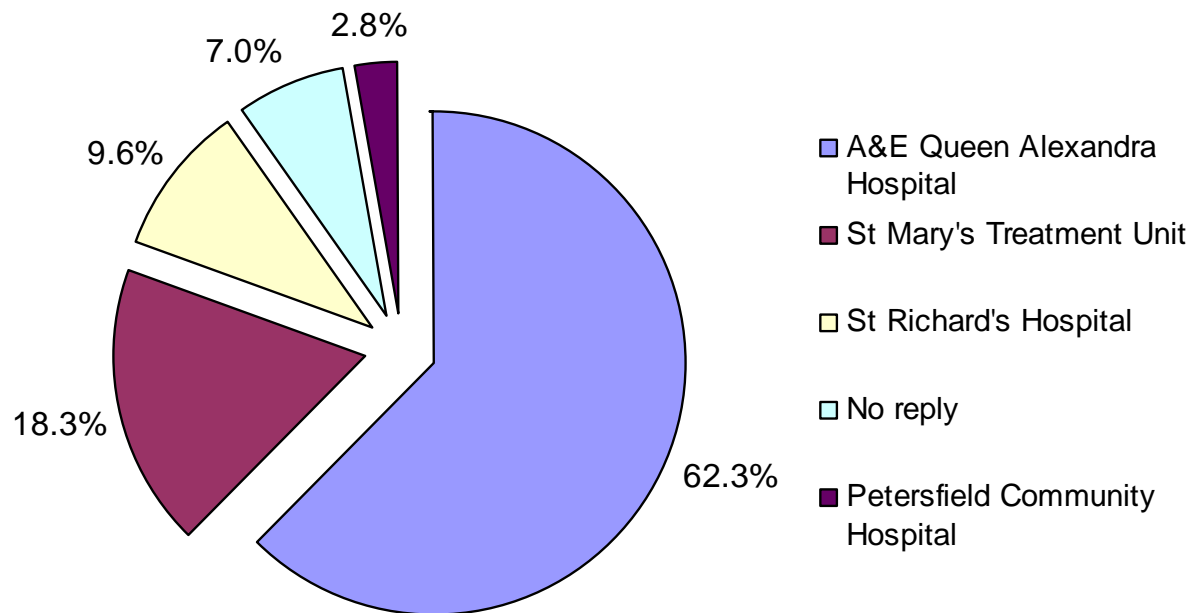
- Respondents didn't know where Oak Park Children's centre was, so preferred option A.



Survey responses (cont.)

Minor Injuries Service

Please tell us which minor injuries service you are most likely to use...



Some residents from west of A3 will choose QAH. Some residents in Havant expecting A&E service



In-depth interviews – profile

- **Targeted at seldom heard residents- social grade = DE**
- **Annual household income ranged from: “£5,000 or less” to “£20,001 - £25,000”**
 - Majority = “£5,001 - £10,000”
 - Average per person in household = between approx. £2,400 and £5,045
- **All reliant on public transport**
 - **14 of the respondent household’s have access to someone else’s car only occasionally or in an emergency**
 - **2 do not have anyone who could give them a lift (even in an emergency)** (one living in Leigh Park and one living in Wecock Farm)



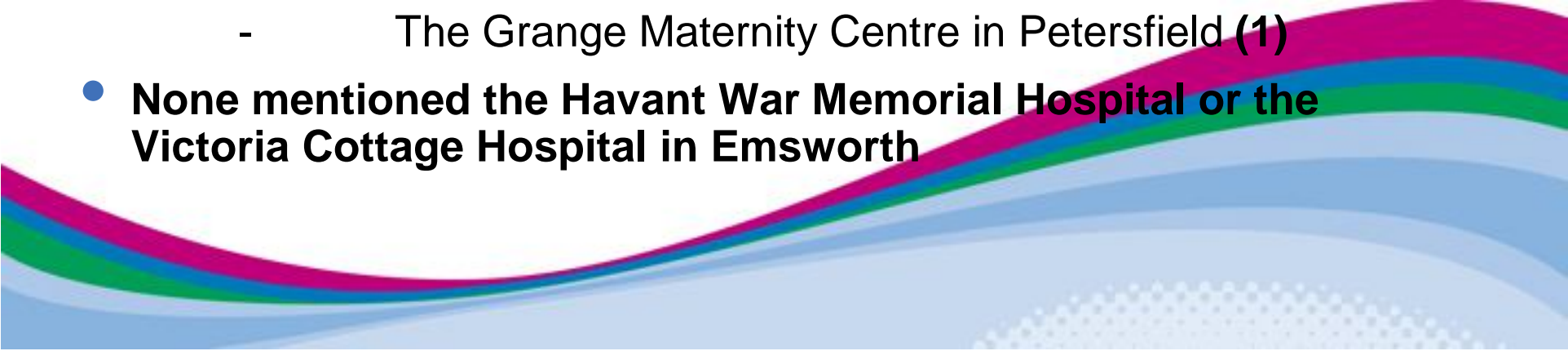
In-depth interviews: hospital services used

- At least one person in 10 of the 16 households currently have regular hospital outpatient appointments:
- A member of another household (living in Wecock) has only had one outpatient appointment, which was at Havant Health Centre
- A further 2 households said they have not had any hospital appointments, but will be going early next year
 - - One to QA (from Wecock Farm)
 - - And, one to St Mary's (from Leigh Park)
- No-one in the remaining 3 households has to attend any hospital appointments at present
 - - 1 living in Leigh Park & 2 living in Wecock Farm



In-depth interviews:

Satisfaction with current services

- **No-one in any of the households considered themselves to have a healthcare need which is not currently being met**
 - **Some concerns about:**
 - **health services moving locations** (e.g. GP surgery expanding & moving to new premises, or, hospital clinics moving from St Mary's to QA)
 - **and, dentists going private** (so residents have to switch to another practise for NHS treatment)...
- ...only 3 respondents said someone in their household used a health service which has recently closed:**
- Haslar Hospital (2)
 - The Grange Maternity Centre in Petersfield (1)
- **None mentioned the Havant War Memorial Hospital or the Victoria Cottage Hospital in Emsworth**
- 

In-depth interviews

Opinion of proposed changes: Leigh Park

- After being made (if not already) aware that NHS Hampshire had planned to build a new Community Hospital and that those plans have been suspended, all respondents were asked what they thought about it
- All Leigh Park respondents expressed disappointment, saying “*it’s a shame*” or “*it’s gutting*” because:
 - people will have to travel further/go all the way to QA or St Mary’s / Havant is more accessible than QA (7)
 - it’s needed here / there’s nothing for this estate (3)
 - it would’ve reduced the waiting times at QA (to be seen/to receive results) (2)

“We were going to get Oak Park hospital - with everything – outpatients, minor injuries, A&E. We were promised it a long time ago, but now they’re not going ahead with it as there’s not enough money. It’s a shame, especially with so much money being pumped into QA. Leigh Park has lost out again! It’s gutting really as it would’ve been good. I think it would’ve cut waiting times at QA and meant a better service for all”

“For hospital outpatients appointments, it would’ve been very handy – not having to worry about getting a bus as far as to QA – it would’ve only been a 2 min bus ride or walk away!”

In-depth interviews

Opinion of proposed changes: Wecock Farm

- However, respondents from Wecock Farm had very different opinions
- All said it either ***“won’t make any/much difference to me/us”*** or ***“it won’t really affect us”*** because:
 - Havant is out of our way / harder /more expensive to get to so would (probably) still have gone to QA or St Mary’s anyway (5)
 - We’ve got QA (and St Mary’s) and that’s good/fine for us (5)

“There can be huge waiting times at QA, especially A&E so unless QA is really jammed, it’s not going to have any impact on us. I probably wouldn’t have even considered going to Havant for outpatients appointments anyway - it’s too expensive to get to – it’s £7.20 for a return ticket to Havant! If I was sent there, I would’ve asked to go to QA instead!”

“It’s a shame – I think they should be allowed more money if it’s going to help people – generally they should invest more money in health services, but it won’t make much difference to me as we’ve got QA – am happy to go there. And, they provide transport for me”

What stakeholders have told us

- Disappointed about the loss of new hospital
- Havant needs improved services due to levels of health need and deprivation
- Welcomed opportunities to co-locate and jointly commission improved services
- Concerns that moving forward with ambulatory services could jeopardise co-location of in-patient services
- Oak Park site was always meant for development of health services
- A local minor injuries service is needed
- Lack of trust particularly around perceived promises regarding Emsworth
- Better blood taking services needed
- Not aware of Oak Park Children's Centre
- Adequate car parking is important



What clinicians told us?

- High levels of health need in Havant: 4 wards
- Need sufficient time to review care pathways for in-patients
- Suggestion of a Teaching nursing home on Oak Park
- Plan services for older people with Social Services
- Confirmed optimum co-location – diagnostics is key
- Endoscopy and minor injuries – would not be sustainable
- Children's services standards maintained & welcomed co-location
- Need scope to redesign in future
- There will be scope for some services west of A3 & Emsworth surgery
- GPs would like more space at Havant Health Centre
- Require co-located office space



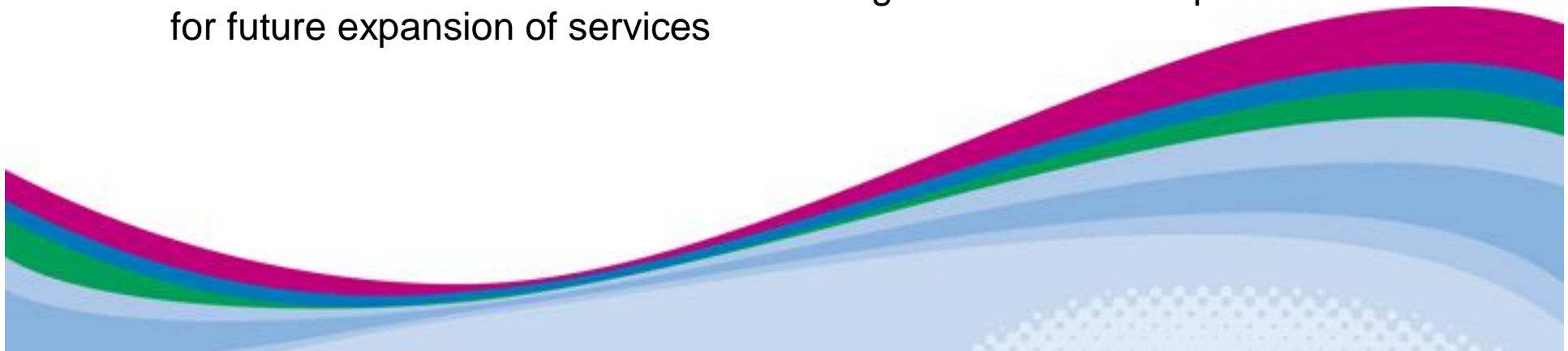
How did we respond to what we heard?

- Listened, answered questions and explored suggestions
- Allowed more time for development of in-patient pathway & set up joint commissioning group with Social Services for older people's services
- Developed options for improving & increasing ambulatory care in line with original plan, excluding endoscopy
- Recommending formal closure of minor injuries at Havant War Memorial Hospital due to clinical viability
- Included additional car parking in the plan and retained flexibility to develop new services/facilities at Oak Park in future
- Sought Local Strategic Partnership assistance to improve public transport to health facilities
- Promote existing facilities: Visits, literature, 'Choosing Well'
- Supporting Emsworth GPs in their plans
- Taking forward co-location
e.g. Leigh Park area



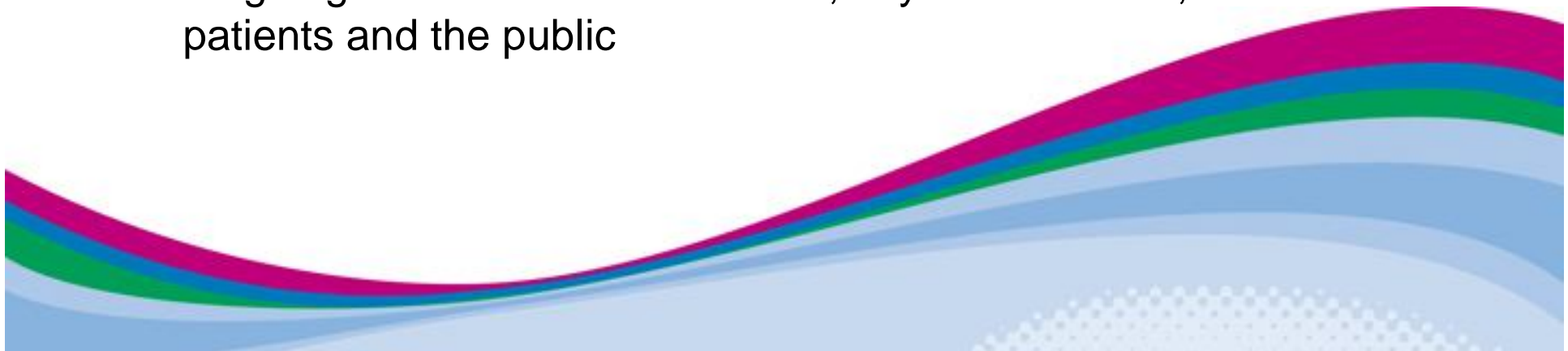
The preferred option

- Extend & remodel Oak Park Children's Service Centre to accommodate:
- Children's services
- Out-patients – 30% 24,000 attendances per year
- Diagnostics incl. hard standing for mobile MRI scanner
- Therapies
- Assessment, treatment & rehabilitation (day service)
- Podiatry
- Co-locate clinical administration in nearby offices
- Retain Havant Health Centre and reconfigure some of the space to allow for future expansion of services



What are the next steps?

- 28 January 2010 - NHS Hampshire Board discuss options for improving ambulatory care services in public
- 3 February 2010 – Follow on Stakeholder Workshop
- HOSC advice on substantive service change
- Formal consultation as required
- September 2010 - Report to NHS Hampshire Board on options for improving services for in-patients, which is currently at St James & Havant War Memorial Hospital
- On-going involvement of clinicians, key stakeholders, patients and the public



Questions and Discussion

