



## Draft Minutes of East Ayrshire CHP Forum

Monday 2 December 2009 at 9.30 am in Community Room, East Ayrshire  
Community Hospital, Cumnock

### 1. WELCOME AND INTRODUCTIONS

- 1.1 **Present**
- Mrs Rita Miller, Chair
  - Mr Iain Brown, PPF
  - Mr Jim Crichton, Director of Mental Health Services
  - Mr David Hunter, CVO
  - Mrs Liz Moore, Healthcare Director
  - Mrs Nicola Pirie, Area Pharmaceutical Professionals Committee
  - Mr Archie Pryce, EA North Communities Federation
  - Dr David Richardson, Chair Officers Locality Group
  - Mrs Joy Rollie, PPF
  - Mr Ian Smith, Coalfield Communities Federation
  - Mrs Mandy Yule, Healthcare Director – Integrated Care & Partner Services
- In Attendance**
- Ms Noreen Caldwell, Scottish Health Council
  - Mrs Angela Cunningham, Head of Midwifery & Children's Nursing
  - Mrs Jean Hendry, Health Care Manager Improving Balance of Care
  - Ms Katie Kelly, CHP Facilitator
  - Mrs Grace Moore, Assistant Director of Public Health
  - Professor Bill Stevely, Chair NHS Ayrshire & Arran
  - Ms Pauline Sharp (Minutes)
- 1.2 **Apologies**
- Ms Louise Benson, Allied Health Professionals
  - Mr Stewart Donnelly, APF
  - Mr Eddie Fraser, Chair Locality Group Adult
  - Mrs Kay Gilmour, Chair Locality Group Children
  - Dr Mike Lavender, Public Health
  - Dr William McAlpine, Area Medical Professional Committee
  - Mr Ronnie Stevenson, Area Optical Professional Committee
  - Mr Ian Willians, Area Dental Professional Committee
  - Mrs Susan Wilson, Area Nursing & Midwifery Professional Cttee
- 1.3 **Welcome**
- Mrs Miller welcomed Professor Stevely, the 2 new members of the PPF, Mrs Joy Rollie and Mr Iain Brown and Ms Noreen Caldwell as the permanent representative from the Scottish Health Council.

## **2. MINUTES OF THE PREVIOUS MEETING**

- 2.1 The minutes of the 28 September 2009 meeting were considered an accurate account of events and approved by the Forum dependent on the following amendments:

Item 4.3 to read “An update report will be available” instead of “A Final decision”.

Item 11.1 take out “who currently do not have a PPF”.

Item 12.2 to read “2 new volunteers” instead of “staff”.

## **2.2 Matters Arising**

- 2.2.1 Item 14.2 Carers Action Plan – Ms Kelly advised this plan would be going to the East Ayrshire Council cabinet before the end of the year. A report on how this will be rolled out will be presented to the Forum at the February meeting.

## **3. SCHOOL NURSING IN EAST AYRSHIRE**

- 3.1 Mrs Cunningham, Head of Midwifery and Children’s Nursing was in attendance to provide the Forum with an update on the situation with School Nursing in East Ayrshire, which due to budget constraints had been reviewed. This review had been carried out in the spirit of partnership between the NHS and Local Authority with staff being asked to assist in the solution. A copy of the presentation is attached (see appendix 1).
- 3.2 Staff had proposed to reduce their hours and an evaluation is being carried out currently into the financial implications for the staff involved. Mrs Cunningham outlined the new ways of working proposed to ensure core School Nursing services are maintained and there is no decline in service provision. Members of the Forum held a discussion on issues and enquired whether independent contractors had been approached to take on some of the testing previously carried out by School Nursing eg visual tests. Ms Kelly to arrange contact between Mrs Cunningham and optical independent contractors to discuss. **KK**
- 3.3 The Forum expressed their appreciation of the partnership approach to seeking a solution and commended the staff involved for being flexible in achieving these changes in a difficult financial climate.

## **4. BUILDING AND SUSTAINING LIFESTYLE INTERVENTIONS**

- 4.1 Mrs Moore provided the Forum with information on work proposed to focus

on lifestyle intervention components. The background to the proposals are based on learning from the developing Primary Care Strategy, Fresh Airshire Project and a range of other community projects including which have been lifestyle friendly.

#### 4.2 Areas Mrs Moore highlighted included:

- i. Roles – implications for how we move forward. Huge capacity issues and moving into efficiency savings which will be more difficult in future years.
- ii. Need to develop a much more patient focused approach.
- iii. Need a service that is credible, meets patient needs, streamlines the patient pathway, brings added value, provides career progression, improves job satisfaction and supports a reduction in waiting times for services.
- iv. Patients needs' – want someone with right competencies.
- v. Outcome and process indicators.
- vi. Working with Further and High Education colleges to provide accredited training.
- vii. Other issues- align with other successful services not duplicate provision.
- viii. Development of specialist health promotion function but at an individual patient level. Group of staff probably about AfC Band 4 working with patients on the ground.
- ix. Deliver across a range of risk factors – focussing on 2 main pathways smoking and obesity.
- x. 6 early adopter practices agreed – 2 in each CHP area trialling different methods. Training starting soon and hoping to get people on the ground at the beginning of 2010.
- xi. Patients want point of contact to be as near their GPs as possible.
- xii. No new money for this, therefore, need to redesign what we have.
- xiii. How could this link into the work of the CHP?

#### 4.3 Members of the Forum were asked to contribute their opinions which could help inform the development of the initiative. The importance of linking in with the Primary Care Strategy and other similar lifestyle pieces of work was emphasised e.g. Mental Health and East Ayrshire's Community Health Improvement Initiative (CHIP). Other areas the Forum discussed included:

- Connecting with Social Work and Leisure in East Ayrshire through the OLGs. Consolidate work around early interventions + long term condition management.
- Aspiring to allocate 20 hours per GP base.
- Evaluating from patient satisfaction - Mrs Moore advised they were looking at developing an evaluation model.
- Importance of sharing skills and delivering a seamless service.
- Using community pharmacy as an access point.

- Ensuring partnership links with local voluntary organisations and leisure services.
- 4.4 Mrs Miller thanked Mrs Moore for the interesting and enthusiastic presentation. The Forum supported the direction of travel and asked to receive updates on progress and integration with the CHP locally

**5. UPDATE ON EAST AYRSHIRE COMMUNITY HOSPITAL (EACH) SERVICE DEVELOPMENTS**

5.1 Mrs Henry, Health Care Manager provided a presentation (see appendix 2) on future plans for EACH. She started by providing the Forum with background information on the establishment of EACH, current services provided and the complexities of managing the individual component parts. The areas highlighted included:

- GP Unit ) Dr A Watt + Dr D Richardson
- Elderly Mental health wards ) work closely with the consultant
- Frail Elderly wards ) geriatrician.
- Day Hospital
- Outpatient department and clinics
- AHPs
- Xray department – local GPs able to view xrays in their surgeries thereby increasing local service provision.

5.2 All managers including the PPF are represented around the table with local staff being very enthusiastically involved in the Operational Group. Ideas to take forward and develop included:

- Promoting health services within the hospital eg healthy eating and mental well being.
- The minor injury service.
- EACH as a promoting rehabilitation hub with emphasis on prevention.
- Increased links with local community and voluntary services.
- Promoting single point of referral process including links to the Home Care Service – this is being taken forward through the OLGs.
- Plans underway to look at proposed Community Dental Services being established and relocated. A more detailed update to be provided early 2010.
- Develop Day Service – sufficient space for Day and Dental Service developments.

5.3 The discussion was opened out to the Forum. Members raised concern about the lack of parking and were advised that the current parking will be delineated early in 2010 which would provide an increase in capacity. The

importance of a Welcome service was highlighted with the representatives from the voluntary, public and federations agreeing to promote the need for volunteers within their areas.

- 5.4 Mrs Miller thanked Mrs Hendry for the update. The Forum welcomed the proposals and commended the work involved so far and requested a more detailed report on capital proposals, phasing options and costs at a future meeting.

## **6. PRIMARY CARE STRATEGY – EAST AYRSHIRE CHP CONSULTATION RESPONSE**

- 6.1 Ms Kelly advised the PC Strategy was going to the NHS Board on Wednesday 9 December and included the reply from the EA CHP Committee, approved on 2 November 2009. All CHP members had been encouraged to become actively engaged in the process. Forum members were congratulated on their commitment to making this happen locally. The response had been very full and reflected positively the desires of all involved. The Forum was happy that it represented correctly the feedback from the community.

- 6.2 The next stage would be how to move forward and implement proposals. The Forum and wider CHP membership would again play a vital role in the implementation process. Concern had been expressed about the cost of implementation and the impact on finite resources at this time, although acknowledging this can support innovation.

- 6.3 The case of GPs able to access xrays in their own practices was considered a good example of moving resources from secondary to primary care. A discussion was also held on the importance of horizon scanning, health promotion and health economics in the development of service provision for the future.

## **7. EAST AYRSHIRE CHP – PARTNERSHIP ASSESSMENT SCORECARD AND CONTINUOUS IMPROVEMENT PLAN**

- 7.1 This paper had previously been approved by the EA CHP Committee. The model was developed to assess how effective partnership working is within Community Planning in East Ayrshire and how well partners are engaging with each other. The Partnership Assessment Scorecard (PAS) response rates were outlined with NHS Ayrshire & Arran increasing its response rate in 2009 but still remaining the lowest of the partners.

- 7.2 Ms Kelly advised she had in partnership with a range of people devised a very straight forward improvement plan which was attached to the paper. A number of these actions were about how partnership is improved, areas to improve and focus on over the next year with a start having been made on some of these. A large number of presentations had been given to

groups including professionals to communicate the work of the CHPs and raise awareness. The approval and involvement of the Forum was sought to further cascade the work of the CHP and encourage further partnership working and engagement arrangement. Members were encouraged to access the Community Planning portal to share information with other members, partners and stakeholders.

- 7.3 Ms Kelly advised she would welcome all suggestions in order to find mechanisms which would raise awareness about the CHP activities and services locally. The PPF and Federations volunteered to help advertise and possibly include CHP information in their local newspaper slots and newsletters. The Forum supported the recommendations outlined in the paper.

## **8. INTEGRATED RESOURCE FRAMEWORK – PROJECT INITIATION DOCUMENT FOR EAST AYRSHIRE**

- 8.1 This important paper was being submitted to the East Ayrshire Council cabinet that morning. The Project Initiation document (PID) had been developed as a starting point for the development of new ways of working in partnership. Research will be carried out in relation to evaluating different models of practice and exploring how to deliver services in a more cost effective way whilst ensuring quality provision in terms of complex care packages for adults. The PID will be submitted to the Scottish Government on Monday 7 December. The initiative will involve temporary staff secondment(s) to take this forward with those delivering the service. It is proposed to have an implementation plan in place by the end of March 2010.

- 8.2 It was very much considered that this was a learning process with findings being shared across the 3 CHPs. It was acknowledged this would not be an easy challenge if quality of care was not to be impacted on but that staff would need to be on board with changes and ensure they were engaging with the families and service users. Further updates will be provided to the Forum at future meetings. KK

## **9. CHILDREN AND YOUNG PEOPLE'S SERVICE PLAN ANNUAL PERFORMANCE REPORT**

- 9.1 The paper was noted.
- 9.2 The Forum suggested inviting a reporter from the Young Scot team to sit in and report on proceedings.

## **10. UPDATE ON 'IF ONLY I'D KNOWN INITIATIVE'**

- 10.1 This initiative had led from a question Mrs Emmerson had asked at the NHS Annual Review about support for carers. An initial meeting has been

held with Ann Conlin from Carers Scotland, Brenda Emmerson, Katie Kelly and Rita Miller and Kenny Milne to start and talk through ideas on how to better support carers and service users through EA CHP arrangement. The Forum was asked to consider the possible development of a Carers Sub Group reporting to and being supported by the CHP Forum A further meeting is being held on 11 December and in addition Ms Kelly will have an initial meeting with East Ayrshire Council in relation to the Carers Action Plan on 15 December.

- 10.2 A paper on the Carers Action Plan will be brought to the next Forum meeting in February. Mrs Hendry advised that a new National Carers Strategy was coming out in 2010 and that it would be important to tie in with this. The EA CHP Forum was asked to consider ideas for taking this forward.

## 11. H1N1 INFLUENZA

- 11.1 Mrs Yule provided a brief update on the latest position with the number of patients in intensive care due to complications by H1N1. The figures are now back to the level of September/October. The uptake with the H1N1 vaccinations programme had been very good and priority groups have more or less been identified and offered a vaccination.
- 11.2 Members queried if all within the priority groups had been contacted. Mrs LM Moore to provide the Forum with information on the uptake.

## 12. COMMUNITIES FEDERATIONS

- 12.1 Coalfield Communities Federation - Mr Smith advised their newsletter had a changed format and he would have a copy for the information of the Forum at the next meeting. He noted that they also have a CHP update on their agenda as a standing item.
- 12.2 EA North Communities Federation – Mr Pryce advised they have as a standing item on their agenda information from the CHPs.

## 13. ANY OTHER BUSINESS

- 13.1 There was no further business.

## 14. DATE AND TIME OF NEXT MEETING

- 14.1 **2.00 pm Wednesday 10 February 2010, Committee Room, Strathlea House, Holmes Road, Kilmarnock**

Signed (Chair) ..... Date.....

## East Ayrshire School Nursing December 2009

Angela Cunningham  
Head of Midwifery & Children's Nursing

## PREVIOUS SERVICE

- 313.0 hours a month
- 245.5 term time
- 67.5 full time
  
- Budget constraints in East Ayrshire resulted in the removal of funding provided by the Council for 2 – 30 hour term time posts

## PARTNERSHIP

- Meeting with staff when budget cuts confirmed
- Staff asked to "assist in solution" as they are the experts in their geographical area
- 2 subsequent meetings, with staff and trade union representation
- Staff solution to review clusters and workload proposed.

## NEW PROPOSAL

- 37.5 full time post converted to term time hours
- 5 members of staff proposed to reduce hours and consequently working days  
(currently reviewing financial implications for staff)
- Flexibility will remain to meet child protection commitments

## NEW PROPOSAL (contd)

- Stop routine colour vision testing for all P7's – test boys only (agreed with Clinical Director Paediatrics)
- Stop routine P1 medicals – support worker to check height and weight of children in "core" cohort.
- School nurse to see all children in additional and intensive cohort.

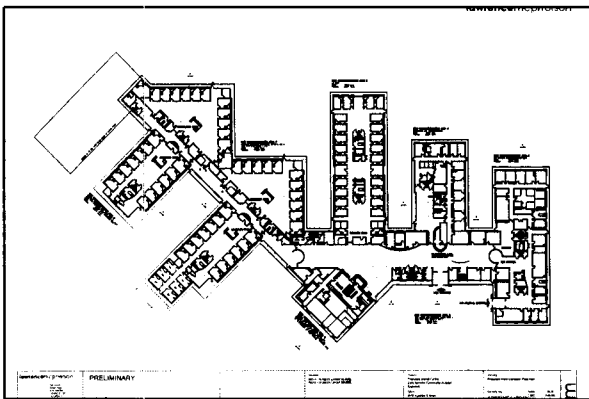
## CURRENT POSITION / NEXT STEPS

- Awaiting final outcome of financial implications for staff
- Obtain agreement from NHS Ayrshire & Arran to proposal
- Inform EA Council and All Head Teachers of changes to School Nursing.

## EAST AYRSHIRE COMMUNITY HOSPITAL

East Ayrshire Community Hospital opened in August 2000, replacing Ballochmyle Hospital

It is a Private Finance Initiative (PFI) hospital



It opened with 74 beds:

- 24 bed GP medium acute/rehabilitation unit (Burnock Ward)
- 25 beds for Elderly Mental Health – continuing care (Marchburn and Pennelburn Wards)
- 25 for Frail Elderly Continuing Care (Holburn and Roseburn Wards)

All wards are named after local rivers/burns

Most bedrooms are single rooms with en-suite bathrooms and a garden view.

### Additional services and facilities

- Frail Elderly Day Hospital with a capacity for up to 60 patients per week (12 per day)
- Elderly Mental Health Day Hospital with a capacity for up to 30 patients per week (6 per day)
- Out-Patients Department
- Social work Department
- Allied Health Professionals Department
- X-Ray Department
- Hairdresser

PFI.....

- Provided by BAM Facilities Management.
- BAM provides all hotel services, including portering catering and laundering.
- Canteen for staff and public which has a healthy eating plan run with NHS Ayrshire & Arran.

## GP Unit (Burnock Ward)



- All local GPs admit patients from home and accept patients transferred from acute care in Crosshouse or Ayr. Dr David Richardson is the management lead GP.
- The ward has two double rooms which can accommodate couples or relatives of terminally ill patients. A generous donation by the League of Friends enabled a relative's room to be furnished specifically for this purpose.
- There is also a nurse led admission system in place that allows for the District nurses to directly admit patients.
- The ward is the first of the community hospitals in Ayrshire taking part in the national initiative Releasing time to care.

## Elderly Mental Health Wards (Marchburn and Pennelburn)



- These wards were specifically designed for patients with dementia
- The gardens offer positive wandering paths
- There is also a unique Snozelen room for patient stimulation and relaxation
- These Wards are consultant led (Dr R De Mey) with admissions generally from Ailsa Hospital

## Frail Elderly Wards (Holburn & Roseburn)



- These wards provide care for continuing care frail elderly patients. The inpatient care is consultant led (Dr A Watt, Consultant Geriatrician), who admits patients from Ayr, Crosshouse and Biggart Hospitals.
- Most rooms are single with en-suite facilities, with two twin rooms to accommodate couples and a recently furnished relative's room.

## Day Hospitals



- The EMH Day Hospital offers a range of services for patients within the East Ayrshire locality and currently operates 3 days per week, seeing 18 patients.
- The Frail Elderly Day Hospital offers a range of services and currently operates 4 days per week.
- Patients who attend the Day Hospitals are brought to and from their homes by BAM Facilities patient transport service. Patients are referred by their GPs.

## Outpatient Department



- Wide range of out-patient activity five days a week. Most clinics are led by consultants from Ayr and Crosshouse hospitals.
- There are also nurse led clinics.

## Outpatient clinics include:



- Dermatology
- Psychiatry
- Rheumatology
- Urology
- Gynaecology
- Cardiac Rehab
- Ante-Natal
- ENT
- Orthopaedic
- Anti-Coagulant
- Homeopathy
- Respiratory

Staff within this department rotate on a regular basis with the Frail Elderly Day Hospital staff.

## Allied Health Professionals (AHPs)



This department consists of:

- Physiotherapy
- Speech & Language Therapy
- Podiatry
- Occupational Therapy
- Dietetics

Therapy staff treat inpatients day patients and outpatients.

## X-Ray Department



- Situated within the Out-Patients department and led by staff from Ayr Hospital.
- Referrals are received from local GPs, Consultants and wards.
- Local GPs will now be able to view X-Rays taken at EACH in their surgeries, thus increasing local service provision.

## Hairdresser



A hairdressing salon is situated in the "main street" of the hospital and provides services for in-patients and the general public.

Plans for the future.....

### Health promoting health service

- Local advice for staff, patients and the public on healthy eating and drinking, mental well being, exercise etc.

## Increased links with local community and voluntary services



- League of friends
- Local schools and churches
- ..... Welcome Service?

## Community Rehabilitation



- EACH as rehabilitation hub, supporting people with long term conditions to keep well in their own homes
- Promoting links between hospital and home
- NHS and Social services

## Capital Plans



- Discussions between NHS capital planning BAM on implications of proposed dental service and possibility of relocating local authority day services on the site.
- Update report expected early January.