

Hayling Island Infrastructure Group

Havant Public Service Plaza, Tournerbury Room, Wednesday 3 May 2017, 13:30

Minutes of Meeting

Present:

Community representatives: David Pattenden (Secretary of LRA), Ann Griffiths (LRA), Mike Owens (Hayling Informer), Anne Skennerton (HIRA), David Parham (Save Our Island), Rosie Law (Hayling resident), Richard Coates (Independent Fire Consultant).

HBC representatives: David Hayward (Planning Policy Manager); Andrew Biltcliffe (Head of Planning), Linda Jewell (Planning Consultant) and Jennifer Parkin (Technical Officer).

HBC Councillors: Cllr Michael Wilson (Chair of meeting); Cllr Leah Turner; Cllr Tim Pike; Cllr John Perry and Cllr Andrew Lenaghan.

South Eastern Hampshire Clinical Commissioning Group (CCG) representatives: Lisa Medway (Estate and Chase Hospital Redevelopment Project Manager), Dr Dominic Davis (GP), Dr Barbara Rushton (Clinical Chair – South Eastern Hampshire), Keeley Ellis (Head of Primary Care), and Andrew Holden (SHE Clinical Lead).

Apologies

Chris Lyons, Cllr Joanne Thomas, Mark Stratton (ESCP), Polly Chapman, Holly Drury (HCC), Graham Wright (HCC), Caroline Richardson (HCC), Stuart Wood (HBC), Elaine Kilby, Jaqueline Boulter (HBC), Cllr Clare Satchwell.

1. Introductions

Cllr Wilson began by welcoming the five members of the South Eastern Hampshire NHS Clinical Commissioning Group (CCG) that were in attendance and that they were due to put forward a presentation. Apologies were noted.

2. Notes of the last meeting and matters arising

David Parham requested full minutes of the meeting. Cllr Wilson agreed to consider this. Anne Skennerton raised concerns over emergency evacuation procedures for local schools, and confirmed that she had received correspondence from local schools regarding the need for an emergency procedure. David Hayward asked for this correspondence to be forwarded to him so that it can feed into the emergency planning for the island.

ACTION: AS to forward correspondence regarding evacuation procedures to DH.

AS also highlighted the Lidl development being out of scale, but understands that it is not yet possible to comment. Andrew Biltcliffe confirmed that comments cannot be made until a planning application is submitted.

3. Primary healthcare

Dr Andrew Holden (Primary Care Lead and GP in Petersfield) presented a Primary Healthcare presentation to all. He introduced Dr Barbara Rushton, Lisa Medway, Dr Dominic Davies and Keeley Ellis from the CCG. It was confirmed that a copy of the presentation will be circulated to all. Dr Holden explained that the CCG area is the most deprived in Hampshire and that there was a wide variation in a small geographic area.

The Hayling Island practices have the highest number of GP to patient ratio which is really good. Hampshire has some of the the best primary care in England. Dr Holden spoke about the 'System Transformation Plan' and the possibility of a local health hub but it needs a population of 30-50k. Oak Park has an area health hub (population of 100-200k) which is a good example of how this can be set up.

Dr Rushton spoke about dealing with increased workload, and the possibility of recruitment of physiotherapists, paramedics and other skilled medical staff to help deal with patients given the national shortage of GPs and the fact that a GP is not always the best clinician to see a patient in some circumstances. There could be a remote way of interacting with medical professionals for those who are unable to travel/leave their homes, and to have the option for a nurse to make home visits. Dr Rushton pointed out that on a Sunday/out of hours those that need medical assistance would need to travel off the island. The CCG are looking at remote access via web/email to try to improve accessibility as much as possible.

Dr Holden spoke about GPs being overwhelmed by chronic problems - and that they do not want patients travelling off the island, there needs to be an option for continuity for chronic problems. There would need to be a patient consultation process in place, to help pick out the more serious problems – it would be great to see every patient face to face but it is just not possible. Dr Rushton agreed that if a patient can be spoken to first, through the consultation process using a good range of diagnostics this will help get an idea of the problem - the vast majority of problems are not acute.

Keeley Ellis spoke about the positive meeting with both of the Hayling Island practices the previous week and confirmed that the surgery does not occupy 100% of the building. The CCG have scope to help deal with expansion of the practices within the building and they've been offered more room as and when new patients come aboard. This would mean that other services within the building would have to move out and the surgery would look to recruit further staff. Services leaving the building would possibly look at moving to community centres if they do not need a medical specification floorspace, although some services do need this.

Dominic Davies spoke about a paramedic visiting service trailed in Waterlooville which may work on Hayling Island to help with reducing the visits to the surgery. If a patient is housebound, a member of the community team could visit. They could recruit paramedics

and nurse practitioners to cover when patients cannot get an appointment with a GP, or when they are able to deal with the patient's issue themselves.

Dr Rushton said that the surgery may be able to loan out iPads to enable people to skype for reducing social isolations. There could be an app to enable patients to self manage their records, but telephone appointments will still be available for those that are not able to access the internet.

Anne Skennerton raised concerns over the 111 not giving correct advice and being over safe which puts more pressure on A&E. Dr Holden confirmed that the service is based on algorithm and is not perfect. There's a system called 'econsult' which can allow patients to request prescriptions and patients can also get a good idea of what is wrong by using this system. There are cognitive behaviour courses available online, which patients can also access without the need to attend surgery.

Cllr Perry requested the number of doctors at each practice. Cllr Perry also spoke about the service deteriorating with a 3 week wait to see a GP but did stress that GPs have been first class. Cllr Perry raised concerns regarding services (such as blood tests) moving out of the surgery and off the island. The CCG agreed that this would be a detrimental move and there is no plan for this to happen. However not all diagnostic facilities would be possible on the island, MRI scanners given as an example.

The question of how many patients per GP was discussed. It was agreed that patients per FTE GP would be the correct question to ask, but the full time equivalent to patient ratio has been skewed by how many other clinicians there are available within the practice. The figure varies wildly from place to place.

ACTION: CCG to confirm numbers of GPs per FTE GP at each practice which serves Havant Borough.

Keeley Ellis confirmed that urgent problems would always be offered a same day appointment; non urgent problems should only have to wait 7-10 days. However an appointment for something like a diabetic check though could reasonably have a 3 week wait. Dr Rushton also confirmed that urgent problems should be seen the same day, which may be by a nurse if a GP is not available.

There was talk about bus routes and whether each surgery was easily accessible - Oak Park is not on a direct bus route which Dr Holden will speak to the bus companies about to see what can be done.

ACTION: Dr Holden to speak to bus companies about bus routes to surgeries.

Cllr Turner raised a question about why first responders turn up at addresses at the same time as an ambulance, or just before, when there are shortages as it is. Dr Holden stressed that they need to get somebody there as soon as possible and for initial treatment, so sometimes that will be the case.

Lisa Medway spoke about Property Services charging low rent for the last 18 months - it has not changed to market rent and the CCG pay this. The district valuer checks that the charging is fair and reasonable. It was confirmed that NHS Property Services is part of the NHS. They are set to merge with Community Health Partnership but are not being privatised.

David Parham stressed that Hayling Island is unique and that the infrastructure is only going to get worse due to costs and suggests that a nominated representative communicates with HBC. If services are to be moved off the island this will have even more of an impact on the A3023. David Parham also asks how often the CCG meet with GPs. In response, Keeley Ellis confirmed that practices and members of clinical and non clinical organisations meet every quarter. There are a wide number of meetings each year - usually 62 each year; including manager meetings.

Mike Owens asked whether there are many GPs close to retirement. Keeley Ellis stated that they are unable to ask individuals when they plan on retiring, but individual businesses will have a plan on how to replace GPs when they do retire and the CCG will support them in that.

Dr Holden spoke about health economy inefficiencies and the link between primary care and acute care is still a problem, and confirmed that they are proud that their primary care has some of the best figures in the country. Dr Rushton explained that they are trying to improve all pathways of care and they are looking at all needs of an individual in a holistic way.

Richard Coates spoke about looking at the use of Hayling Island surgeries and the issues at weekends/bank holidays as numbers do tend to go up at summer time. Ambulances are not allowed to use West Lane and patients can be waiting up to an hour. There are no alternative services on the island; perhaps the Health Centre could be used.

Dr Rushton explained that they are in the process of extending hours in areas to 8pm and some weekend services, and there's always the 111 service. There's the out of hours department at the QA hospital also. There's a possibility of an urgent care centre/hub to serve Havant and Hayling Island – which may be in place by September, though would be off of the island.

The population of Hayling Island in the summer months was spoken about; Dave Parham said that he believes that the increase is 5-8,000 due to the amount of holiday homes. There are 18,000 on the electoral role. Cllr Turner suggested that part of the problem is that residents feel that they are always entitled to see somebody.

Cllr Perry went on to ask about the possibility of extending regular medicines to reduce the need for appointments. Dr Holden confirmed that the balance between wastage and inconvenience is important, based on individuals they cannot give more than 6 months medicine at a time.

Dr Holden concluded that the NHS is the best in the world and that other countries look to emulate the system. A&E's biggest expense in use is 16-30 year olds. The NHS is wonderful and is free at point of contact and re-emphasised the CCG's strapline - "Your health in your hands with our help". Cllr Wilson thanked the CCG for their attendance and presentation - the members of the CCG left the meeting at 15:25.

4. Infrastructure Delivery Plan (IDP)

Linda Jewell confirmed that a meeting has been set up to discuss broadband services. In terms of emergency planning, availability of hovercraft is being explored. The Fire Services are training officers to become first responders – but Linda still to meet with the fire service about that. There are defibrillators around Hayling Island. A Hayling Island Emergency Plan is to be finalised. The Hayling College is the highest point on the island; Mill Rytte has plans in place for evacuation but such plans are not made public. There has been a meeting with bus companies. The library has got space for other services - there are 60,000 visits per year to the library. The Hayling Pre-school would like to expand and discussions are in progress. There are places available at Hayling College. Hayling Island Community Centre are also expanding. A meeting has been scheduled with Portsmouth Water to discuss infrastructure capacity.

Anne Skennerton asked about water pressure on Havant Road and the lack of it. Linda confirmed that Portsmouth Water is not required to fit water meters but she can also ask the question as to whether they should.

ACTION: Linda to speak with Portsmouth Water regarding water pressure and water meters.

David Parham stressed that in order to plan we need an infrastructure plan to tell us what the capacities are for the roads/water and drainage etc.

David Hayward highlighted that in Portsmouth Water's area there's an average use of 160 litres a day, which is quite high but that in new housing units building regulations brings that down somewhat to around 125 litres per person per day.

The general scope of the Infrastructure Delivery Plan was discussed. David Hayward stressed that the Infrastructure Delivery Plan was a borough wide plan and that Hayling Island could not be separated as it part of the same overall infrastructure networks. David Parham stressed again for the meetings to be minuted as not everybody is in agreement. It was requested that wording be agreed regarding Hayling Island for the Infrastructure Delivery Plan.

David Parham asks whether David Hayward can tell HCC that is ok for him and Anne Skennerton to talk directly to the transport team regarding the highways report that HIRA have produced. David Hayward confirmed that it is absolutely ok for them to liaise directly with HCC and agreed to follow this up by email.

ACTION: David Hayward to confirm to HCC Highways by email that they can discuss HIRA's report directly with HCC Highways.

Provision of other services

Deferred until the next meeting.

5. Rook Farm

David Hayward confirmed that the recent application at Rook Farm had been refused planning permission. The applicant had not yet indicated whether they will appeal that decision. David also confirmed that Gladman (agent for Rook Farm) had been in touch with queries regarding the Infrastructure Advisory Group.

The question was asked whether they could put in a reserved matters application increasing the amount of proposed houses to be built. Linda Jewell confirmed that a reserved matters application would need to meet the same figures; they'd need to put in a new application if they wanted to change the figures.

6. Date of next meeting and any other business

David Parham asked whether HBC collaborate with HCC - David Hayward confirmed that we do and that we have to as a 'duty to cooperate' with bodies such as HCC in their many guises, the CCG and other such bodies.

Meeting closed at 16:15.