

**Forest of Dean Health Forum
West Dean Centre, Bream
Tuesday 3rd July 2018 – 7.00-9.00pm**

Minutes

Present

Albert Weager – Chair	Linda Vaughan – Secretary
Caroline Smith – Glos CCG	Brian James – Friends of LDH
Lynn Sterry – Cinderford TC	Lynn Teague – CAB
Doug Battersby	Peggy Jordan
Cheryl Haswell – Matron LDH & Dilke	Sue Rees – Friends of LDH
Mary Thurston – Friends of LDH	Wendy Martin
Steve Longton – Friends of LDH	R C Beddis – Friends of LDH
A R Midgley – Friends of LDH	Angela Davies – Friends of LDH
Chrissie Johnson	Jackie Jenkins – Glos Care Services ICTs
Deb Oliver – Ellwood & Sling PC	Di Martin – Cinderford TC/FODDC
Judy Gazzard – PPG Forest Health Care	Hilary Bowen – 2Gether Public Gov
Mark Elson – Forest Review	

1. Welcome and Introductions.

Speakers: [Ingrid Barker \(Chair\)](#) and [Paul Roberts \(CEO\)](#) - **Joint Care Services and 2Gether NHS Trusts**

Topics:

- [Proposed merger with 2gether NHS Foundation Trust](#)
- [Forest of Dean Community Hospitals](#)
- [Integrated Locality Boards \(ILBs\)](#)

Proposed merger with 2gether NHS Foundation Trust

Paul Roberts, Joint CEO, began by outlining his background and explaining his passion for integrating services. He has extensive experience in the NHS and has been involved in many significant projects throughout Wales and the West.

He confirmed that there is a direct and significant link between mental and physical health which drives him to do this integration for the right reasons. In the past we have often concentrated on severe mental illness but now he believes that we need to improve access to psychological therapies as society has increasing levels of less severe mental health issues such as depression, anxiety and stress. This is combined with a massive growth in complicated long term conditions such as diabetes, heart disease, lung disease. There is evidence to show that people with a learning disability or mental illness have a shorter life expectancy and this needs to be addressed. It was good to hear that the overall CQC rating for Care Services was Good.

The plans for the merger begin with Legal transaction of merging the two Trusts, which has over 5000 members of staff and a £220 -230m turnover. Then comes the transition stage where policies and procedures are examined and duplication avoided. Finally the Transformation where a close look is taken at the engagement of services and benefits that will be achieved.

The timescale for the whole process is a completion date of Summer 2019.

Questions and comments:

Any Financial benefit? – decreasing overheads, sharing of premises giving better value.

Example of benefit to patient and family: patient with dementia and frailty needed to engage with social care, primary and community care and the mental health team but because this was not co-ordinated, the patient had to go into a home.

Training: basic training of staff allows them to work in both areas but there will be additional training for some staff on frailty and complex care needs for home care teams.

Third sector: the help from the third sector will continue to be very valuable.

Learning Disabilities: mental capacity assessment is sometimes necessary in order to give the best outcome for the patient.

Forest of Dean Community Hospitals

Ingrid Barker – Joint Chair – spoke about the proposed new hospital for the Forest.

Ingrid made it clear that Glos Care Services are committed to providing good quality care closer to home in the best way they can. The main proposal is to deliver clinically safe and sustainable high quality care with the preferred option of one hospital for the Forest. Both Boards have taken on board the question of the number of beds needed. The site will be considered by the Citizens' Jury which will meet at the end of the July. Anyone wishing to observe the process can go to Forest Hills during the deliberations from July 30th for 4 days. The recommendations will go to GCS and CCG who will make the final decision on 30th August. It is possible that the Boards could come to a different conclusion from that of the Jury.

Questions and comments:

John Thurston expressed concern over the process and wanted to know that if savings are made, services will be enhanced. The range of services available are tied in with the Sustainable Transformation Process but we were assured that the new hospital will have the best range of services possible.

Di Martin asked for the possibility of a Birthing room at the new hospital so that the tradition of the Foresters' birth rights could be upheld.

With regard to the Judicial review being mounted by the HOLD group, it was felt the processes in place would counter their challenges.

A query was raised over whether the 11m building cost was constrained or if additional costs could be met in the event of this not being enough. Ingrid was confident that the whole cost would be met by the 11m based on the experience of other new builds.

Concern was raised over the Citizens' Jury process as it does not take into consideration the suitability or quality of any site. The Terms of Reference for the Jury is the locality and Ingrid explained that GCS would be taking responsibility to ensure that the chosen site was suitable.

Integrated Locality Boards

Paul Roberts explained that the Integrated Care System is in effect a successor to STP organisations and will be overseen by the Integrated Locality Boards who will sit above locality boards. The Integrated Care System will form joint capital and service plans, share resources and reduce the fragmentation of services. Gloucestershire has been successful in getting funds for this work.

It is felt that the best way to make decisions is at local level and with place based care. Natural communities will be selected and there will be 7 localities in Gloucestershire

Locally the Integrated Local Boards will be part of three pilots: Forest of Dean, Cheltenham, Stroud and Vale. Decision making will be devolved to localities with identifiable leadership from GPs, Social care and Trusts. The differing needs of rural and urban areas will be taken into account. At first the plans will be limited but will evolve. The third sector will also be involved. Dr Paul Weiss will lead at Cluster level.

Questions and comments:

Integrating financial resources will be difficult.

It was felt that service users should be represented on the board.

Cross border integration should not be a problem because of the good relationship GCS has with the Aneurin Bevan board.

Caroline will keep Locality reference groups informed.

Apologies

Jim Spiers, Shaun Stammers, Roger Sterry, Julie Burlow, Steph Bonser, Pam Plummer

2. Matters Arising - Nil

3. News Updates and correspondence

- The CCG AGM will be held on 12th July at Sanger House
- The joint Care Services and 2Gether Trust AGM will be held in Cheltenham on 19th July.

4. Chair's report – full report attached

- Albert talked about the emerging NHS 111 changes and the GP online services.
- The frailty response service is led by Alice Hoskins
- Sharon Nicholson is leading on patient flow and plans to reduce delays.
- Albert is trying to ascertain the ambulance response times for the Forest.

5. Treasurers Report – Balance £775.85

6. Members Reports and Questions

7. Future meetings:

September 4th – Sarah Scott – Public Health

October 2nd – AGM – Sarah Pinkney – Gloucestershire Domestic Abuse Awareness

8. AOB

It has been a fairly quiet few weeks.

I went to the County PPG meeting at Churchdown on June 8th.

The main features of the meeting were the emerging 111 and GP online services. 111 online is designed to aid people in managing their own care and become part of an integrated approach to Urgent and Emergency Care.

All aimed at preventing hospital admissions. Phase one will go live in Gloucestershire very soon.

The GP online service is still very much pre-operational. A number of practices across the county have expressed interest in becoming 'early adopters', including one in the Forest.

On 28th. I was at Sanger House for the A&E Delivery Board meeting.

Plans are in place to develop a cross trusts and departments an integrated frailty response service aimed at enabling independent living and hospital avoidance. This will have a four pillared approach.

Plans are well in place to reduce length of stays in hospital and to improve the transfer of care process.

South West Ambulance Service has a commissioner led performance improvement plan which will include wider mental health alternative pathways. There is a workstream in place aiming to reduce the number of MH patients conveyed to EDs by 10% per year over the next three years.

Gloucestershire now has a new County Ambulance Commander, William Lee, based at Staverton.

I have asked that locality data be provided for ambulance performance in Gloucestershire.

I also made the point that there has been a plethora of plans, mostly emanating from STP streams and it is time to report back on what has been achieved.

Albert Weager Chair 030718