

County Councillor Report to Parish Councils October 2020; jackie.porter@hants.gov.uk

The County Council has set up a 'Citizens Forum' to receive feedback. Go to hants.gov.uk and search Hampshire Perspectives for details or go direct to www.hampshirecc.researchfeedback.net

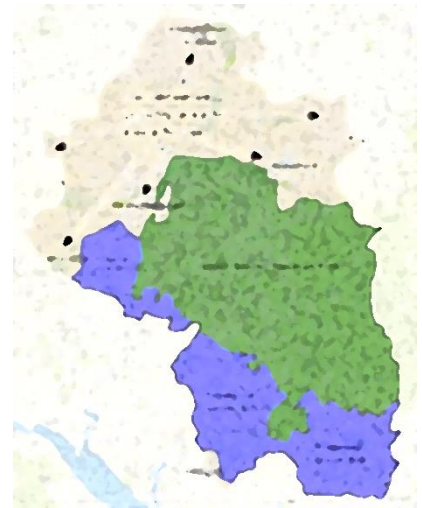
The Covid-19 Local Engagement Board is headed up by the Leader of the County Council. It is advised by the Director of Public Health, Simon Bryant. I attend the meetings in my role as Cabinet Member for Wellbeing at WCC. Thankfully the local virus figures are very low and I am impressed by local conformity to the law. I was saddened but pleased to see that the Cathedral has decided not to hold the Christmas Market. We want Christmas to be good for everyone- and I'm sure you'll agree that a Covid-free Christmas present is the best present we can imagine.

The County Council has responded to the 'Planning for the Future'

paper HCC is extremely concerned about the arrangements for delivery of infrastructure: roads, broadband, street lights, schools, trees, drainage systems, community buildings etc.

The CPRE proposal for a Green Belt across the south of the district presents a challenge for planning in Winchester as we already have the SDNPA restricting where homes can be placed.

(lower Blue section= Green Belt proposal, central Green section covers the SDNP area)



Recently Covid legislation has changed: and as a result, there is **new guidance for Community buildings and Village halls** which might be of interest to you and your community. (issued 24 Sept 2020)

<https://www.gov.uk/government/publications/covid-19-guidance-for-the-safe-use-of-multi-purpose-community-facilities/covid-19-guidance-for-the-safe-use-of-multi-purpose-community-facilities>

On September 24th, I was pleased to place a **motion before council regarding improvement of school streets to tackle school congestion and encourage active travel to school**. The motion was passed and is being discussed at HCC this month.

Lib Dems have put this before Councils right across the UK; conscious that measures have been set in place for shops, businesses and pubs, but not for the wellbeing of children. Just after I had submitted it, the terrible accident happened which affected children in the Itchen Valley and the Worthys. My sympathies go to the children and all those affected by it.

At the **Children's Scrutiny we heard of the woeful progress of services for Autistic children** which has been an ongoing problem for more years than I can remember. It's a money issue- there just isn't enough and the failure to secure the funding because of the GE in 2019 was disappointing. To an 'old hand' like me, this felt like groundhog day. I asked for regular updates until this is resolved, and was pleased that the NHS Director, appointed to carry this forward, was happy to agree (and indeed has been charged with working on) this was something that must improve.

With hugely **overspent Adults and Children's Social Care budgets**, expenses for mortuaries, PPE etc, the County is expecting to have a £210 m deficit. On p 54, para 7 of the Cabinet (29th September 2020) report it states 'In the only scenario where the Council was considered to be financially sustainable, this required further Government funding of £52.4m to be received.'

HHFT Hospital options: You can see the update on the Hampshire Together website. One hospital only and the Status Quo are options which have been rejected. Holistic care, using 'outposts' too are in the mix. You may wish to respond on behalf of your community. HCC/ WCC will be responding: we are aware that this is a once in a generation chance to tackle the budget & upgrade the hospitals which are insanitary. HCC has committed to working with HHFT to tackle access and social care with the HHFT project team.

I have attached the press release for your interest.

Clinical options unveiled for delivering future hospital services in Hampshire

Six options for delivering future hospital services across north and mid Hampshire are being considered by local NHS organisations as part of the Hampshire Together: Modernising our Hospitals and Health Services programme.

Health and care partners are working together to develop a health, wellbeing and care service so that everyone in north and mid Hampshire can access high-quality, timely and sustainable health care as close to home as possible.

They are looking at the best way to organise services to meet the population's changing health needs and to adapt the way some services are delivered so they can continue to meet best practice guidelines. They have been exploring the possibility of centralising some of the most specialist hospital services for the sickest people on one site, rather than spread across two main sites as they currently are.

Consolidating the most specialist services in one place would mean a better use of senior clinicians, who are currently spread too thinly across hospital sites. It would also mean clinical teams treat more patients with particular conditions and illnesses, helping to better maintain their specialist expertise.

The programme also includes the potential for the construction of a brand new hospital as part of the Government's Health Infrastructure Plan.

Doctors, nurses and other clinicians from north and mid Hampshire recently held a series of conversations and virtual workshops to look at how health and care services could be designed for the future. More than 100 people, including current patients with experience of using hospital services, clinicians from across the health and care system, and representatives of various groups from the community took part. They initially developed eight options for the way services could be provided in the future.

The eight options were then considered by doctors, nurses, and other clinicians and evaluated against pre-agreed criteria to decide whether they should be discounted or taken forward and investigated further. Two options were discounted during this process. One because it involved continuing to run services as they are currently set up (named Option A), and another because it involved moving all services to a new hospital, with no facilities elsewhere (Option H).

Further work will now be undertaken to review and evaluate each option in detail. Options will be assessed with regards to clinical quality, patient experience and outcomes as well as the impact on staffing levels, the amount each option would cost and affordability, accessibility and deliverability, to inform the development of a shortlist.

The six options currently being explored are:

Option B – Investment would be made to sustain hospital services at the Basingstoke and Winchester sites for the long-term. Services including emergency care, consultant-led maternity care and intensive care would be centralised at one of the hospitals. Centralisation will help to ensure delivery of the clinical quality standards required for these services, so they can continue to be provided in north and mid Hampshire.

Option C – Emergency care, consultant-led maternity care and intensive care would be centralised in a new hospital, as would a new outpatient centre which would enable patients to undergo scans, have tests carried out and have an appointment with their consultant in the same visit. A centre for surgery planned in advance would be provided from a main satellite hospital, which would also benefit from additional investment. Outpatient consultations and a range of other hospital services would be provided at additional satellite locations across north and mid Hampshire.

Option D - Emergency care, consultant-led maternity care and intensive care would be centralised in a new hospital, as would a centre for surgery planned in advance and a new outpatient centre which would enable patients to undergo scans, have tests carried out and have an appointment with their consultant in the same visit. Outpatient consultations and a range of other hospital services would be provided at satellite locations across north and mid Hampshire, with some additional investment.

Option E – Emergency care, consultant-led maternity care and intensive care would be centralised in a new hospital, as would a centre for surgery planned in advance and a new outpatient centre which would enable patients to undergo scans, have tests carried out and have an appointment with their consultant in the same visit. An outpatient centre, offering the same services described above, would also be provided from a main satellite hospital, which would also benefit from additional investment. In addition, outpatient consultations and a range of other hospital services would be provided at additional satellite locations across north and mid Hampshire.

Option F – Emergency care, consultant-led maternity care and intensive care would be centralised in a new hospital, as would a new outpatient centre, which would enable patients to undergo scans, have tests carried out and have an appointment with their consultant in the same visit. A centre for surgery planned in advance and an outpatient centre offering the same services described above would be provided from a main satellite hospital, which would also benefit from additional investment. In addition, outpatient consultations and a range of other hospital services would be provided at additional satellite locations across north and mid Hampshire.

Option G – Emergency care, consultant-led maternity care and intensive care would be centralised in a new hospital, as would a centre for surgery planned in advance. An outpatient centre which would enable patients to undergo scans, have tests carried out and have an appointment with their consultant in the same visit would be provided from a main satellite hospital, which would also benefit from additional investment. In addition, outpatient consultations and a range of other hospital services would be provided at additional satellite locations across north and mid Hampshire.

*For clarity, options with a main satellite hospital would also contain an urgent treatment centre, step down inpatient care for patients requiring services such as physiotherapy, midwife-led maternity care, and diagnostic tests such as MRI scans and blood tests.

Five of the six options currently being explored involve the construction of a new hospital. Four of the six options involve the development of a main satellite hospital and all options have some health care services provided elsewhere, working together as a network to serve the people of north and mid Hampshire. Work is ongoing to identify proposed locations for these services.

Dr Matt Nisbet, a local GP and a clinical lead at the Hampshire and Isle of Wight Partnership of CCGs, is working on the Hampshire Together: Modernising our Hospitals and Health Services programme. He said: “We would like to thank everybody who has taken part in our listening exercise during the summer as well as those who have taken part in our recent options development sessions.

“The six options for the way we organise clinical services in north and mid Hampshire in the future will now be investigated further. Our evaluation criteria for shortlisting will be further developed, building on what respondents said was important to them during our listening exercise. The criteria will be refined with further input from clinicians, staff, patients, and other stakeholders.

“This work will allow doctors, nurses and other clinicians, with the help of a specially formed options development group including staff and patient representatives, to use the evaluation criteria to draw up a shortlist recommended for public consultation. The CCG governing body will review a detailed business case and make a decision on the options for consultation. We expect to launch this consultation early in the new year.”

Visit www.hampshiretogether.nhs.uk for more information about this health service improvement programme – and you can also follow Hampshire Together on Twitter (www.twitter.com/HampshireMOHHS) and Facebook (www.facebook.com/hampshiretogether).



Report to Parishes October 2020



COVID-19 Update

You will all be aware that we continue to suffer a very low incidence of infection. However, we are seeing increasing concern amongst the vulnerable, and local shops have been asked to resume deliveries to some of them. There has been talk of a short sharp lockdown 'circuit breaker' for two weeks commencing on 24th October, no doubt we will hear about this in due course.

You all have a support network, of diverse but equally effective form, you may wish to check it is still in place.

Money

Efforts are continuing to find ways to fill the budget gap, the temporary 'Nightingale' Court now open in the Guildhall will not make up for the deficit but does make a useful contribution.

When looking forward we must prioritise our statutory duties, and continue to do them really well, but that leaves very difficult discussions on cutting budgets for the non-statutory duties. Which of these can have a budget cut or reduced? Which of these is the least essential? Some very difficult choices have to be made. For example, can you believe that Planning Enforcement is non-statutory? We are minded that without enforcement, planning is ultimately a waste of resources. Cynical developers and other manipulators of the system already know that enforcement is a bit toothless!

Street Surgeries

Until lockdown we had Councillor Surgeries twice a month, we are now restarting Socially Distanced Street Surgeries at 10 am on the 1st and 3rd Thursdays outside Alresford Community Centre.

A very brief report this month but as ever there is a lot of work going on at Winchester. Staff have been responding to an ever-changing environment for residents, businesses, and themselves.

We are seeing some of you on a regular basis, and others not at all. We do like so much to hear from you and we miss you!

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