

# Health and Care Model Public Engagement

Wiltshire Health Select Committee Update – 11 January 2022

Geoff Underwood

g.underwood@nhs.net

Simon Cook

simon.cook@cherwell-consulting.co.uk



## ◀ BSW Health and Care Model



## How we are going to make this happen



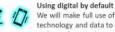
## Developing our workforce

















#### Building facilities of the future

We will invest millions of pounds to improve our specialist centres, to build new community facilities and to buy more equipment.



#### Financial sustainability

We will make the best use of our combined available resources to deliver high quality care.

### How care could be different – Elective care



#### Jasek 48, Builder

asek has suffered with increasing aches and pains for the past few years after a knee injury 10 years ago and this has been complicated by early arthritis (which he believed runs in his family) but he is unsure if he wants to undergo an operation and take time off work. He also is concerned about the impact his health condition and lack of mobility is having on his wife.

is referred to the Community MSK Service by his Jasek has been identified as a high risk of erioration through the hospital risk stratification tool use of his arthritis and previous attendances.

th he is able to access from his phone. Using the virtual chat service, he is able to have a lot of his

Jasek attends the Local Treatment Centre for his knee surgery and he is discharged with a **rehab plan** to adhere to at home.

Jasek uses the virtual chat service to answer a number of post op questions and is able to initiate a follow-up appointment if required at the local community hospital at a time and day that suits him.

> Some time later, Jasek's knee feels much worse and he is referred for assessment for surgery. He books an appointment at his Community Diagnostic Hub for a CT scan. The CT Radiographer refers him to an Orthopaedic

Jasek discusses his options with the surgeon via a virtual consultation and through a shared decision making process Jasek decides to proceed with surgery.

Jasek is able to book his surgery on his phone at the Local Treatment Centre for a date after he gets back from

Jasek has ongoing support from a Community Physiotherapy Team and is able to attend the Community Diagnostic Hub for regular check-up:

As part of his Care Plan. Jasek has access to his

local gym where he attends classes and he can

even attend virtual sessions around his work

and CT/MRI scans if required.



## Public engagement:

- 2<sup>nd</sup> November 14<sup>th</sup> December
- Online survey
- Engagement meetings and workshops, mostly online
- Interviews and meetings focusing on harder to reach groups
- Final report due 17<sup>th</sup> January

51 events

915

survey responses

1400+

attendees at events



## Emerging themes

- Generally positive response to the model but
  Different organisations have different many wanted more detail. The model feels aspirational but conservative. "Who could argue with it." "It's difficult to have an opinion until we know more."
- Want detail about how the new way of working will be funded
- How will it link with other partners, dom care, care homes, social care, the voluntary sector? How will that all work?
- Issues with "digital by default" e.g. rural areas who have poor connectivity, not excluding those who are offline, reliability of IT systems. Concerns raised about data sharing.

- priorities how will that be reconciled?
- Issues with staff capacity, staff recruitment and lack of resourcing currently
- People can't get through to GPs or find a NHS dentist – frequently raised
- Like the emphasis on ageing well
- Like the greater integration but how will this work in practice?
- Where's the co-production with the voluntary sector and communities experiencing health inequalities?
- Overall strong appetite for future engagement as plans develop.



## January

- Final engagement report due 17<sup>th</sup> January
- · Update the model based on feedback from the engagement
- Likely to produce more detailed documents/media to explain the model in more depth e.g. narrative document, short video, recorded panel discussion/podcast
- Initiate work on aligning operational planning and transformation plans with the model

## February

Confirmation at BSW Partnership Executive (18th) and BSW Partnership Board (25th)

### March

- Health Select Committee confirmation that formal public consultation on the new model of care is not necessary, subject to further public engagement being conducted as the model is developed in more detail
- Complete alignment of plans for 22/23 to the model

### April-June

• Delivery of operational plans and transformation programmes ahead of the formal launch of the Integrated Care System in July