

Review of Health Provision in Andover and Romsey

Report of the Health Provision in Andover and Romsey Lead Member

Recommend:

1. That OSCOM acknowledges the complex picture of different health providers and the impact this has on engagement with relevant contacts.
2. That OSCOM recognises the wide range of types and requirements of facilities within the health service and the impact of changes to healthcare provision.
3. That OSCOM encourages effective communication with local healthcare commissioners such as the local Clinical Commissioning Group (CCG) and the provision of support where possible.
4. That OSCOM recognises the development by the Council and the CCG of shared evidence and justification of the requirements of health facilities along with their delivery through the planning process.
5. That OSCOM recommends that a review of parking standards for health centres is undertaken to inform the new Local Plan.

SUMMARY:

This report considers the findings from a Review of The Future of Health Provision in Andover and Romsey. The review has focused on the role that the Council and specifically the Planning process has in supporting health provision and identifying where improvements could be made.

1 Introduction

- 1.1 The National Health Service (NHS) has needed to change and evolve in response to different pressures, especially during the COVID 19 pandemic. This change can put pressure on hospitals and General Practices (GP). In addition, healthcare facilities can feel the burden of a growing population with a variety of needs across different demographics. For example both Andover and Romsey have seen a growing, ageing population recent years. In Andover, 18.7% of the population is forecast to be 65 years and over in 2020 compared to 21.4% in 2026. Romsey has a larger forecasted percentage of those over 65, with 29.1% of the population in 2020 65+ compared to 31.0% by 2026¹.

¹ This population data is taken from the Small Area Population Forecasts (SAPF), provided by Hampshire County Council. Further information on this is available online at: <https://www.hants.gov.uk/landplanningandenvironment/facts-figures/population/estimates-forecasts>.

- 1.2 OCSOM agreed to establish a review of health provision in the Borough, led by Cllr Baverstock, to investigate what the Council could do to help support health commissioners and providers. This review focused on the existing system of the NHS in the Borough and how the Council can assist. The Council does not have a direct role in health provision but has the potential to support the NHS through infrastructure provision as part of the planning process. There is also a role in wider work with meeting the needs of the community.
- 1.3 This review was completed during a time of national crisis and pandemic. However, the panel met and investigated this topic in the year preceding the pandemic. The health service is experiencing an unprecedented impact as a result of the current pandemic and the Council appreciates the work done by all members of the health service during this difficult time.

2 Corporate Objectives and Priorities

- 2.1 A key priority in the Council's [Corporate Plan 2019-2023](#) 'Growing Our Potential' is growing the potential of communities. As part of this a commitment to bring local communities together alongside councillors and partners to plan for future needs. This sets the context for working with our communities and partners to deliver and support healthcare facilities in the Borough.

3 The complex picture of different health providers

- 3.1 Following the review, the panel identified several areas which emerged as key areas of interest through the meetings and conversations with members of the health service.
- 3.2 The NHS consists of a large and complicated family of organisations whose structure has been altered in recent years. Currently the West Hampshire Clinical Commissioning Group covers the Borough, commissioning GP practices and some services in hospitals. There are two hospitals in the Borough, located in Romsey and Andover, which have separate structures and are run by different NHS Trusts. As an example of the complexity of the structure of a hospital, the panel focused on Romsey Hospital. Cllr Parker produced a useful diagram which indicated the connections between commissioners and providers of staff and resources (Appendix 1). Romsey Hospital is supported by the local Clinical Commissioning Group (CCG), NHS Trusts and private companies who work together to provide services. These groups have different responsibilities within the hospital, such as caring for the building, inpatients rehabilitation and palliative care services, outpatients clinics, X-ray and physiotherapy. The number groups involved and range of services provides has created this complicated structure.
- 3.3 One challenge that emerged through the panel's discussions with members of the NHS was resource provision. The NHS has a number of funding systems which can be complicated and involve a bidding process. This can take a long time and in some cases can provide a barrier to the provision of services.

- 3.4 Nationally groups of GP practices are encouraged to join together in Primary Care Networks along with a range of other local organisations². The panel found that GP practices in Andover have come together to form Andover Hub which is currently working well. Andover is at a more advanced stage of the Primary Care Network model than Romsey.
- 3.5 The panel recognised the different approaches and experiences in accessing health care experienced by local residents, such as difficulty in booking GP appointments. As part of ongoing changes/ improvements to the NHS some practices are looking towards technological solutions to appointments. One Romsey GP surgery uses e-consult where the patient fills in a questionnaire and is then directed to the appropriate health practitioner. This can help to ensure that the best appointment is chosen for different conditions and ailments and can reduce pressure on GPs. In the future there will be an increasing reliance on technology in health care provision but additional support may need to be provided for those who are not 'tech savvy'.
- 3.6 Staff shortages are an issue faced by GP surgeries and hospitals within the region and nationally. This is an ongoing issue which is outside the control of the Council.
- 3.7 Although the Council does not have any influence on the structure of the NHS, understanding its structure helped the panel's understanding of the nature of the health service. The review provided an opportunity for a greater understanding of the tiers and connections with health commissioners and providers within the Borough. In the future, the panel recommends that the Council engages closely with the health service to understand the challenges faced by the NHS and how the Council and NHS can work together to solve these challenges. With the development of the new Local Plan, the Council will engage closely with the CCG to determine the future requirements for health service infrastructure. The CCG will also have the opportunity to comment through the statutory consultation stage.

4 Recognising the different types of need of buildings and facilities

- 4.1 It is important that our existing infrastructure is adapted and improved to meet the changing needs of the Borough's population. One way of supporting this provision is through obligations and contributions taken during the development of new neighbourhoods. Effort has been made on a number of sites in Test Valley to include healthcare facilities, with sites such as at Abbotswood and East Anton granted planning permission with a requirement that some land is reserved for use as a health facility. Financial contributions have also been secured for developments, such as at Hoe Lane. On these larger developments so far, it has not been possible to arrange for a health practitioner to move onto the allocated land and some existing facilities have experienced additional pressure. Extensions/ improvements to existing facilities could be a solution to this. It is only more recent conversations where a financial contribution has emerged as the preferred way to secure improvements in health provision in the area to mitigate the impact of development. This requires robust evidence to forecast the need generated by new development which is a gap in understanding that the CCG are trying to

² <https://www.england.nhs.uk/primary-care/primary-care-networks/>

fill. The Council supports this approach as it necessary to justify all contributions which are sought as part of the planning process.

- 4.2 There is a complex funding regime in the NHS with the CCG able to bid for funding for facility improvements. This is a competitive process and it can sometimes be difficult for health providers to be able to get sufficient financial support to expand as required. Therefore going forward they would benefit from being able to rely on other sources of funding, such as financial contributions from development, as it will enable improvements and alterations to existing facilities to reflect the needs of a changing local population. Should applications for funding be submitted (such as a bid for funding from the Community Infrastructure Levy), TVBC is able to assist where possible.

5 Review of parking standards for health centre

- 5.1 The panel explored the parking provision at health centres currently and discussed the role of parking standards in the Local Plan. The importance of easily accessible parking spaces near to health centres was discussed along with the range of existing provision at centres. Due to the nature of a visit to a health facility a car is likely to be the preferred means of access for visitors and at peak times there can be issues of availability of parking provision. Often site constraints mean that it is difficult to increase the provision of spaces once a health centre is constructed. Therefore, it is important to ensure that sufficient spaces are provided when a new centre is granted planning permission.
- 5.2 The panel discussed that as part of the creation of the emerging Local Plan there will be a review of parking standards in order to assess whether the existing parking standards are adequate or whether it would be possible to increase the requirements. The emerging Local Plan will also seek to address changing transport provision in the next 5-10 years as a result of advances in technology. Electric cars may be more prevalent and alternative modes of transport may be more popular. This has the potential to influence how people access healthcare facilities and will impact on the nature of parking required.

6 Recognise the changes to health provision and the role of social prescription

- 6.1 The panel explored the new approach of social prescribing which allows GPs, nurses and other primary care professionals to refer people to a range of local, non-clinical services in addition to appropriate medical care. Social prescribing is where health professionals refer patients to local agencies in the community with the aim of improving their health and wellbeing. There are many different models for social prescribing, but most involve a link worker or 'buddy' who works with people to access local sources of support. It can be successful in treating a range of people, such as those with one or more long-term

conditions, those who need support with their mental health, those who are lonely/ isolated or those who have complex social needs which affect their wellbeing.

- 6.2 In order to achieve social prescribing, the NHS needs to invest its time in working closely with local authorities to understand local needs and links within the community. The West Hants CCG covers the entire Borough and in Andover, the CCG has been working closely with Andover Vision on promoting social prescribing. Whilst this will have a benefit the panel recognised that there may be an increasing pressure on groups/ organisations as increasing numbers of patients are referred to them.
- 6.3 The panel also heard that pharmacists would have an increasingly important role going forward as members of the public are encouraged to go to them for a range of ailments. The pharmacists are able to talk to the individual and recommend the best treatment thereby reducing the demand on GP appointments. There are several pharmacies located across the Borough which reduces the demand on one facility.

7 Making sure we have the right services for a growing and changing population

- 7.1 There are changing demands on the health service reflecting the impact of people's demographics and behaviour. Analysis of these issues helps indicate the kind of resources that will be required to treat future illnesses. Going forward there may be changes in the future to the structure and organisation of these healthcare providers as they respond to these illnesses.
- 7.2 The Panel heard that there will be structural changes made to the NHS, for example GP Practices will provide a greater range of healthcare provision in the future. GP Practices will have services such as physiotherapy and Primary Care Mental Health services provided within their buildings. Following the introduction of the NHS 111 service, a simplified process for accessing urgent and emergency care services 24/7 has been implemented. The new 'Use the Right Service' initiative was introduced to improve advice and guidance to the public. Online consultation tools will be increasingly going forward and the NHS has procured e-consult across Hampshire, enabling patients to resolve health concerns without visiting their practice. The increasing number of services provided digitally and the centralising of health care provisions towards 'hubs' has been designed to streamline the NHS services and to provide targeted support to the population.
- 7.3 Some surgeries have sought to help patients access care by offering longer opening hours. However there will be some members of our communities who may find it difficult in accessing these extended services due to difficulties in the timing of public transport or community transport.
- 7.4 In Andover, it has been reported that the Adelaide Medical Practice will close at the end of the year (2020). The panel are aware of the work of the CCG and local GP practices in ensuring that patients will continue to be served in the future. Such changes to provision and types of services mean it is important that the right infrastructure is provided.

- 7.5 The panel discussed the ways in which the Council can support the CCG. As the Council is currently working on the new Local Plan, the Infrastructure delivery Plan (IDP) will be updated. The IDP is a document that sets out what infrastructure may be needed to support the delivery of development proposals and growth across the Borough. Health facilities will form a part of this infrastructure and the Council will engage with the CCG to understand the potential future need in the Borough. Through this process it is important that the Council and the CCG communicate effectively and ensure that the IDP is based on sound evidence and is kept up to date so that it can help to secure the required infrastructure in the Borough to meet the needs of the population.

8 The provision of health care in the rural area/ rural communities

- 8.1 Healthcare services in the Test Valley are predominantly centred at Andover and Romsey with smaller practices in other settlements e.g. North Baddesley and Valley Park. Access to healthcare provision for communities that don't have direct access to healthcare services is often more difficult due to the distance they are required to travel to access services. This is especially the case given the wide geographic area which some practices cover. Rural communities travelling to sources of health care often must rely on cars as a means of transport or potentially public or community transport. This can put pressure on parking provision at these centres. In the future the increasing reliance on technology in healthcare provision, such as online GP appointments, may be increasingly relied upon by those in rural areas. This is an area which could be explored further to understand the specific problems faced by rural communities.

9 Conclusion

- 9.1 Our health service adapts to changing populations, healthcare pressures and changes to policy. Although the Council does not have an active role in decisions which are made by healthcare providers, it is able to assist in certain areas. The Local Plan, currently under development, provides an opportunity for the Council to review the contributions taken as part of larger developments and the parking requirements of new healthcare facilities. It also will provide an indication of the future growth areas within the Borough, helping to understand potential future pressures on the health services.
- 9.2 In the future, the Council should review its relationship with healthcare providers regularly to check that it assists the health service as much as possible. In light of the recent COVID-19 outbreak, a review is also recommended of the way the Council has worked with the health service, in order to consider any areas for improvement.

Background Papers (Local Government Act 1972 Section 100D)

Confidentiality

It is considered that this report does not contain exempt information within the meaning of Schedule 12A of the Local Government Act 1972, as amended, and can be made public.

No of Annexes:	One		
Author:	Graham Smith/Katie Dowle	Ext:	8141/8082
File Ref:			
Report to:	OSCOM	Date:	22 July 2020