



## Report of public engagement event

**“A New Dawn”  
MARLOW**

**14<sup>th</sup> January 2022**

OUTSTANDING CARE

HEALTHY COMMUNITIES

AND A GREAT PLACE TO WORK

## 1. Executive summary

### Introduction

Buckinghamshire Healthcare NHS Trust launched its community hubs programme in April 2017, at two pilot sites in Marlow and Thame. This followed an extensive public and patient engagement exercise in 2016, and then again between September 2017 and March 2018, to find out what people wanted from a community hub. The findings informed the development of the pilot hubs.

At the end of 2019 senior leaders from across BHT began to review and update our strategy. In the summer of 2020, our Board agreed a new vision to reflect our aims for the future.

Our Vision is Outstanding Care, Healthy Communities and a Great Place to Work.

As a result, our priorities became:

1. Provide outstanding, best value care because people deserve to receive the safest care, have the best experiences and achieve the best outcomes. This is the best value care.
2. Take a leading role in our communities because we are not just here to treat sick people. We have a role to play supporting people at home and in their communities to live long and healthy lives.
3. Ensure our workforce is listened to, safe and supported because our people are everything. When our workforce is inclusive, compassionate, happy and healthy people receive outstanding care

During September and October 2020, we asked our workforce to tell us what they thought about our mission and our values. Over 300 people (75% from patient-facing services) participated in either online polls or focus groups. As a result, we made a small change to our mission. We replaced safe with personal to emphasise person-centred care. It acknowledged safe care as a central component of outstanding care and our quality strategy.

Our mission at work, no matter what happens, is to deliver personal and compassionate care every time.

Our CARE values guide us at work in everything we do to Collaborate, Aspire, Respect and Enable.

On Friday 14<sup>th</sup> January, this new strategy was communicated to a group of 20 attendees at Marlow Community Hospital.

The objectives were:

- To engage with and involve the local community to ensure their views and experience inform future decision making around the community hub in Marlow and more widely across the county
- To get feedback from staff and patients, and partner organisations involved in the community hubs to inform on going service development

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### **Aim of this report:**

To provide a record of the feedback from the “A new dawn” Marlow public event.

### **Participant profile:**

- 20 attended
- 6 of those attending were from the ARC PCN
- 2 attending represented the local and parish council
- 2 attending represented the Community hub stakeholder group
- 2 of those attending represented a local carer support organisation
- 8 of those booked represented different services which are currently operating out of Marlow Community Hospital

16 out of 20 attendees filled out an equality monitoring form.

- 14 Females and 1 male attended this event
- 3 considered themselves to have a disability or long term health condition
- 13 identified themselves as White British
- 8 describe their sexual orientation as heterosexual with 3 not wishing to declare

### **Methodology**

The Trust’s Deputy Director of Strategy delivered a presentation on Buckinghamshire Healthcare Trusts (BHT) new strategy (please see Appendix 1). Each representative within the room then gave a brief explanation of the service/s they provided to the local community.

### **Key findings**

- Services offered by both the local PCN and BHT compliment each other well but communication needs improving
- Communication about services being offered at the hub and at the PCN need to be improved both with local communities and between each organisation (BHT and PCN)
- Current appointments at the community hub are giving patients time to discuss their concerns with specialists in an intimate, very personal space
- The local community would like to see more charitable voluntary organisations have clinics within the community hub space
- Some of the local community need help with digital services available from BHT

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## Discussion results

Suggestions given within and following the Strategy presentation:

Suggestions	Concerns
<ul style="list-style-type: none"> <li>• Early diagnostics within community hub amazing but could an outreach service also be included which would see BHT and PCN staff attending local support organisations/groups who already hold meetings for the local community E.G. Marlow OPAG, Marlow WI etc. This would Foster good relations within the local community and good assist patients getting early diagnosis for ongoing health conditions or issues they are facing</li> <li>• Could a digital hub be implemented at Marlow Community hospital to help patients with attending digital appointments or learning how to use various systems to access additional resources or services provided by BHT</li> <li>• We have a contact locally for medical dogs. Could the Trust work with this organisation?</li> </ul>	<ul style="list-style-type: none"> <li>• Transport to the hub</li> <li>• Parking at the hub</li> <li>• Out of hours provision for local community</li> <li>• SCAS taking patients to Wexham because it is nearer their home base</li> <li>• Funding streams – PCN contracts separate to GP contracts</li> <li>• Does the Trust have relationships with local development/building companies so the Trust understands the amount of additional housing and infrastructure needed within the community? Should these organisations contribute to additional facilities and resources within the county?</li> </ul>

The second part of the meeting saw attendees highlighting the services they provide locally:

Name of Service/Dept	Services provided
Rapid Response and Intermediate Care - RRIC	Rapid Response & Intermediate Care or 'RRIC' service which provides urgent care for patients in crisis in the community within two hours, allowing them to remain safely in their own home and empowering recovery. This team includes health care professionals ranging from Physiotherapists to paramedics, Occupational therapists to Nurses and many more. This service works very closely with social care to assist patients with short and long term healthcare needs.

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Community Assessment and treatment service - CATS	<p>Currently situated in Marlow, Thame and Amersham the CATS service is a multi-disciplinary team that currently offers:</p> <ul style="list-style-type: none"> <li>Occupational therapy</li> <li>Physical therapy</li> <li>Vague symptoms pathway</li> <li>Blood pressure checks and blood tests</li> <li>Electrocardiograms (ECG's) – a method of checking the health of you heart</li> <li>Intravenous Antibiotics and Infusions – specialist medicine that need a nurse to give them to you</li> <li>Falls Specialists - experts in helping people who are at risk of falling, or who have fallen</li> <li>Wound dressing clinics</li> <li>Catheter care</li> <li>Diagnostics – equipment such x-ray, to help doctors understand more about your health.</li> <li>Outpatients – clinics where specialist doctors see patients locally. These include neurology, urology, rheumatology, cardiology, and a range of surgical specialties to provide advice and care</li> <li>Cancer Care – Services such as chemotherapy that allow cancer patients to be cared for closer to their home</li> <li>Cancer outreach programme</li> <li>Cancer rehabilitation</li> </ul>
Marlow Adult Community Healthcare Team - ACHT	Please see appendix 2
Marlow Medical Group - ARC Primary Care Network - PCN	<p>Dr Penny Macdonald gave a brief description of the services available at Marlow Medical group above the usual GP practice services: Community Paramedics that are involved with home visits. They also work in the Rapid Access Clinic, the practice Doctors and Minor Illness Nurses. This service includes:</p> <ul style="list-style-type: none"> <li>• Home visits</li> <li>• Assessment, examination, treatment plan</li> <li>• Referral to ACHT (Adult Community Health Team), prevention matters, social services, palliative care</li> <li>• Admissions to hospital</li> <li>• Follow up visits / phone calls</li> <li>• Care Plans</li> </ul>

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	<ul style="list-style-type: none"><li>• Rapid Access Clinic</li><li>• Minor illness and injury</li><li>• Flu Vaccinations</li><li>• Best interests meeting</li><li>• MDT meetings</li></ul> <p>Inhouse Pharmacist and Pharmacy Technicians - Healthcare Assistants – blood tests, ear checks, flu jabs, simple dressings, diabetic foot checks, suture and clip removals, blood pressure checks Practice Nurses - Wound care, dressings and removal of stitches, Immunisations, vaccinations and injections, Cervical smears, blood pressure and pill checks Maternity clinics Health and wellbeing representatives Social prescribing/care coordinators</p>
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## Group discussion

Having heard the information presented at this session, attendees were asked for their ideas and vision for the future of Marlow Community Hospital. The responses are below:

- Social prescribing - tell community about services available at both Marlow Community Hospital, the community hub and the local GP practice services
- Link the diagnostics, care and treatment communications to explain the above
- The community need access to emergency care, similar to Multi-disciplinary Day Assessment Unit (MuDAS) at Wycombe Hospital. Doctors, Nurses and Paramedics available for this service maybe 8am-8pm 7 days a week?
- Look at the whole community and see how it works. Make sure there is no social isolation within the community and where there is, ensure these people have access to the hospital/hub for all healthcare related needs including social services
- Community matrons – for patients who do not have a specific immediate healthcare need but is managing a long-term health condition to give advice. Prevention care rather than treatment. Building relationships with patient, district nurse team and community prescriber
- Army of volunteer roles within our community so ensure they know exactly what services are available locally so they can refer the local community into these services
- We need to ensure that we protect confidentiality with many of these roles but also have to share information from primary to secondary care
- Many people in the local community are struggling not knowing what is wrong with them but knowing that they are not feeling right. Walk in clinic or outreach programme to groups that already exist but give more access to various services
- Bring back the old-fashioned nouse neighbour. Encourage the local community to check on neighbours and report anyone they are concerned about or feel needs additional support. Community care workers could help ensure the right services were directed to these people
- Encourage local services to help communicate the services available at both GP practices and the Marlow Community hospital. Train local post office workers, pubs owners, hairdressers, shop owners, community sign posters, taxi drivers, bus drivers etc. to know what primary and secondary care services are available locally
- Look into the Health connector pilot in Aylesbury – could work for local Marlow community
- Provide strength and balance classes. Teach volunteers to run these classes at the Community hospital. Have a health care assistant or similar available to speak to attendees of these classes to see if they need any additional support
- Face to face communication from the Trust and the Marlow Medical group really important. Take the opportunity to go and speak to local groups
- Run social prescribers clinics from Marlow Community hospital
- Get key messages out to school pupils so they can help direct the local community to the services available
- Create short videos that can be played within the local community (libraries, GP surgeries, BHT waiting rooms, on social media platforms explaining what community services are available. The

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local community tend not to distinguish between primary and secondary care. So these videos need to be very clear, simple and directed to the local audience

- Create an actual “Community Hub” within Marlow Community hospital. The place to go for primary, secondary and voluntary organisation information on services. So the local community just have one place to go and they can be referred as and when needed for all their health needs
- Create a manned digital hub for the local community. This needs to have privacy so people can have online consultations/appointments should they need to but have someone available to help them with the technology for this
- Accessibility into Marlow Community hospital extremely important. The old ramp needs to go and be replaced
- Create social spaces within Marlow Community hospital for things like Maternity classes or fitness classes
- Invite voluntary sector organisations to run clinics at Marlow Community hospital
- Bring representatives from the PCN into Marlow Community hospital so they can help signpost people

### Next steps

- Arrange a focus group with the Marlow Surgery team and the BHT community teams – in the first instance - to strengthen working relationships and see how we can perhaps use the Marlow Community hub space jointly (Jenny/Verity)
- Create a list of all the clinical team roles and what they do to share with the group – Laura/Claire/Verity
- Arrange a ‘way to communicate better with the local community’ working group. This might mean creating the social prescribers, attending local groups, social media, posters etc. – Claire Jones and someone from Marlow Surgery and perhaps Alison
- Speak to Stephen Holt (BHT Head of Estates) about replacing the ramp – Jenny
- Arrange a future meeting continue the conversations and actions in May/June when it is warmer and we can meet outside – Jenny/Dee
- Talk to the local community and voluntary sector organisations to arrange some focus groups to begin discussions about the space at Marlow Community hospital? Could they use the space to bring local people into the hospital space? – Jo Birrell/Alan

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Appendix one – Buckinghamshire Healthcare NHS Trust Strategy

# Buckinghamshire Healthcare NHS Trust 2025 Strategy

## Developing our Strategy



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At the end of 2019 senior leaders from across BHT began to review and update our strategy. During September and October 2020 over 300 members of our workforce (70% patient-facing) contributed to updating our mission, vision and values. During the second half of 2020 we led in-depth community engagement. We received almost 3,000 responses to an online survey and held more than 30 focus groups and interviews.



~~Any planned changes are subject to appropriate patient~~

Our new strategy (including clinical strategy) was approved in private by our Board in May.

We have engaged partners in the Integrated Care Partnership and other stakeholders including local politicians, MPs, regional clinical senate and the regional NHSEI team.

Plans were presented at the Joint ICS Governing Body and discussed with Buckinghamshire Council Executive in July 2021. We plan to publish our strategy in September and begin workforce and public engagement.

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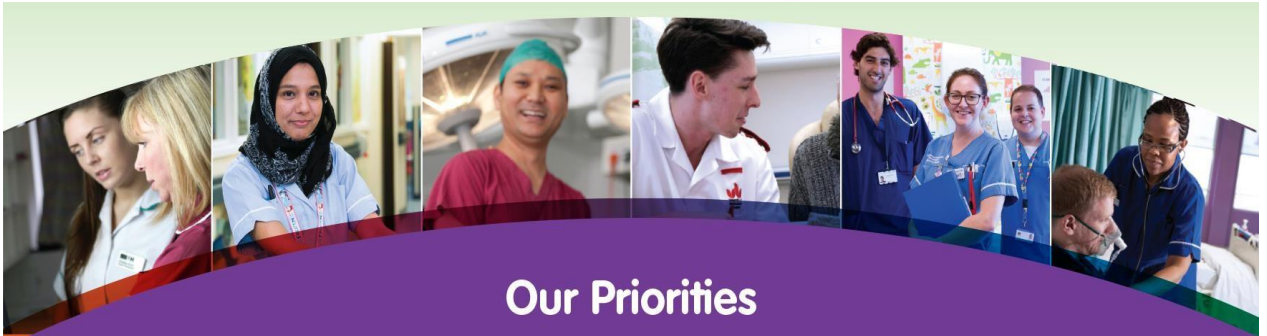
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# Our Vision, Our Priorities

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## Our Priorities



Provide outstanding, best value care



Take a leading role in our community



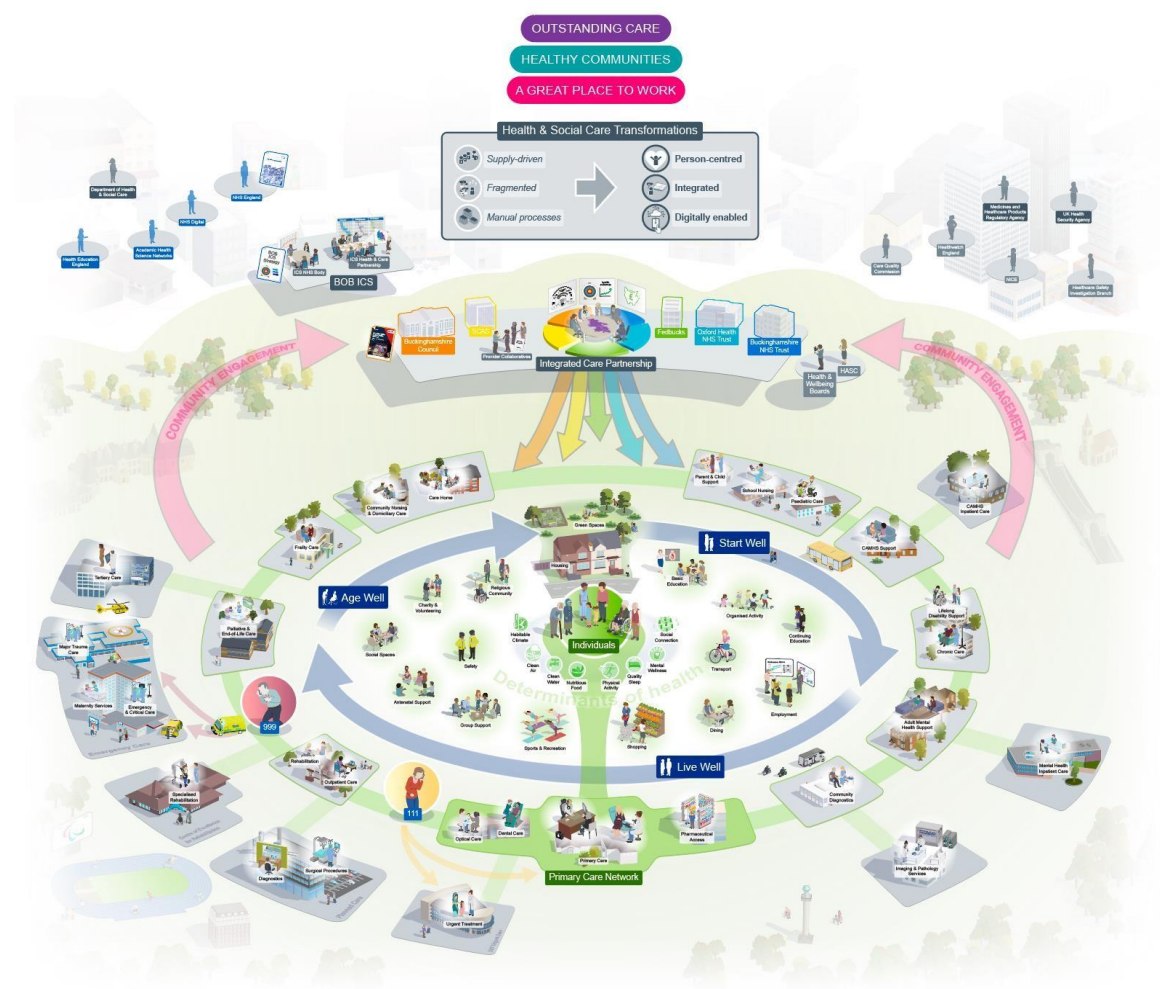
Ensure our people are listened to, safe and supported

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# Our Strategy, Our System

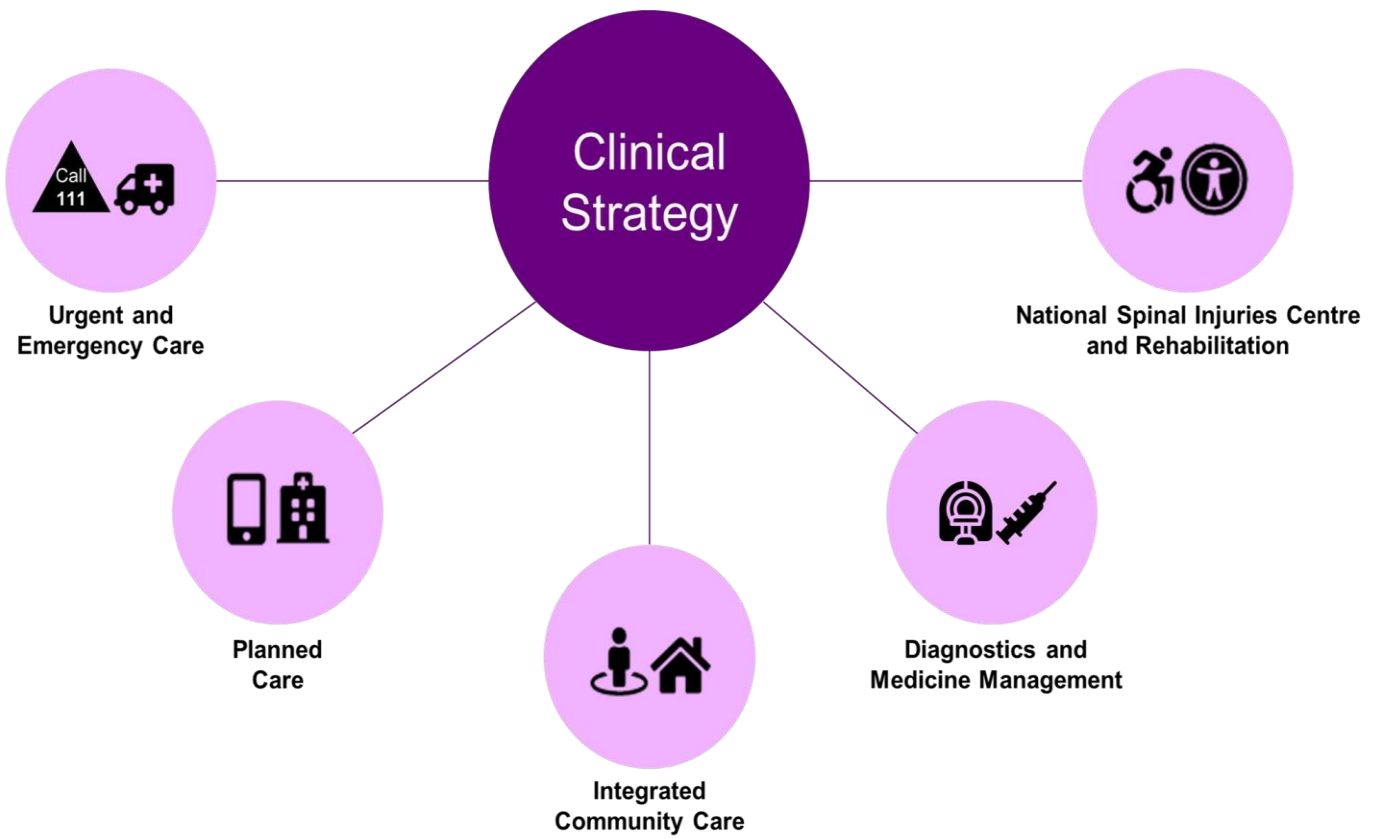


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# Our Clinical Strategy



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# Urgent and Emergency Care

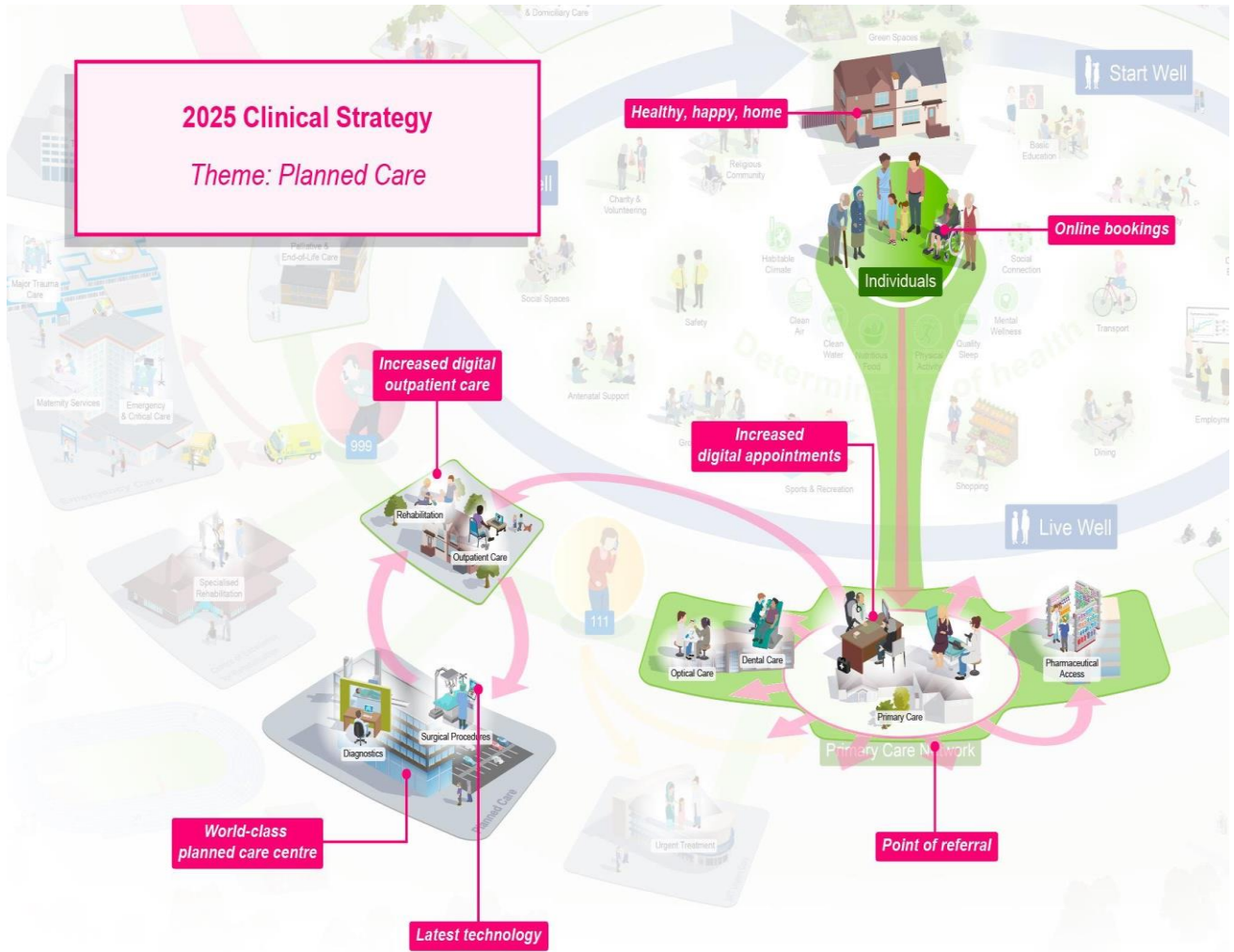


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# Planned Care

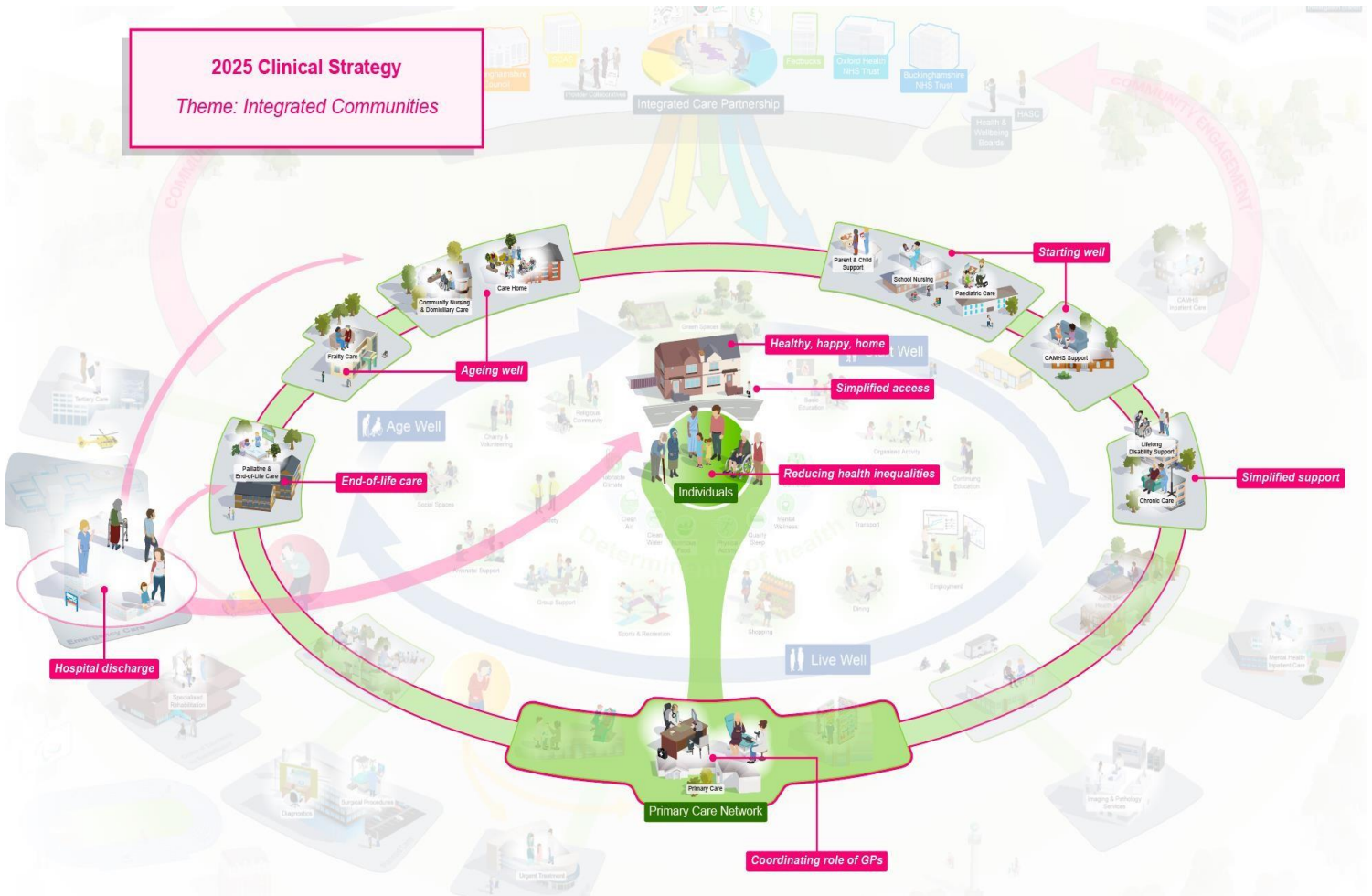


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# Integrated Communities



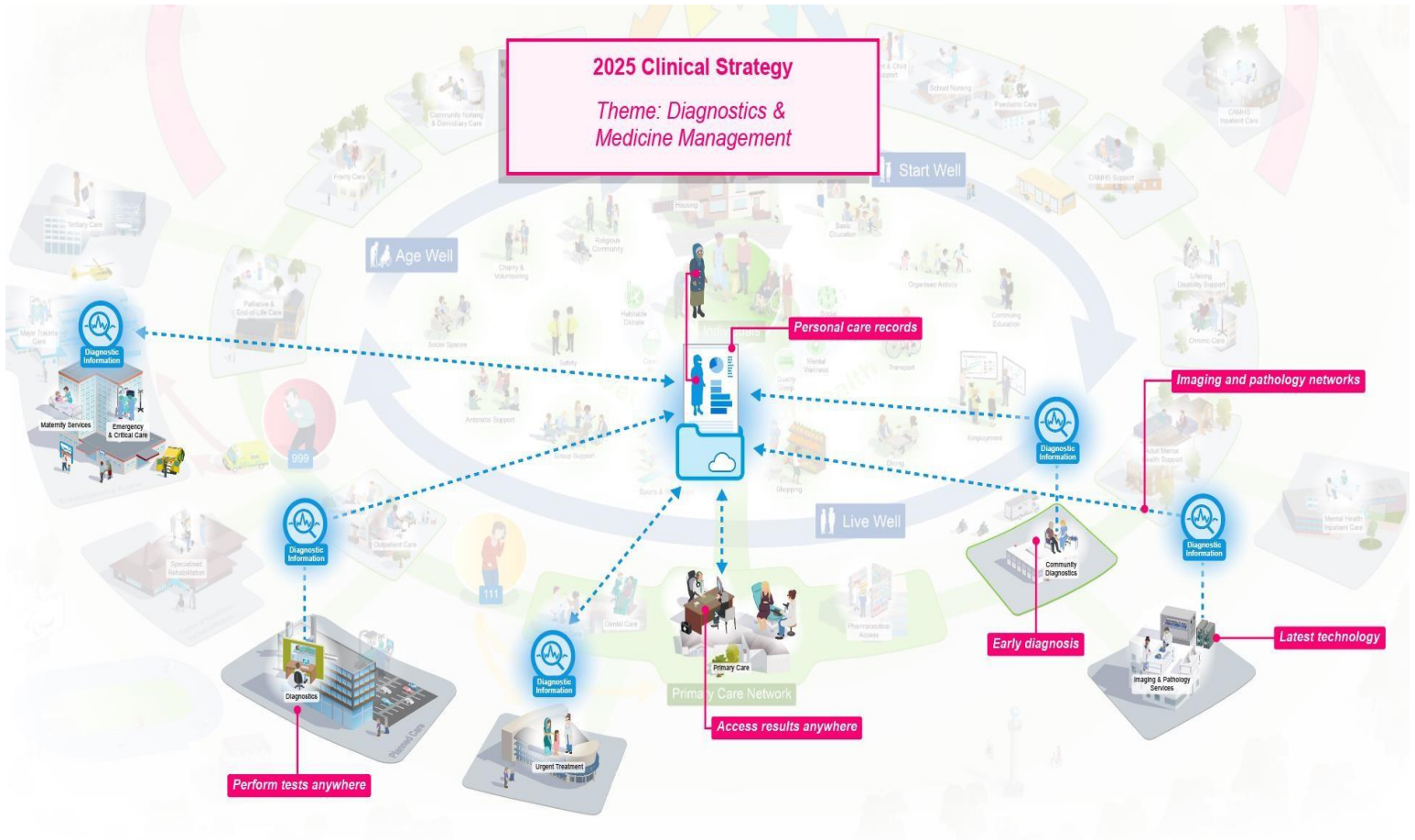
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# Diagnostics and Medicine Management



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# Centre of Excellence for Rehabilitation



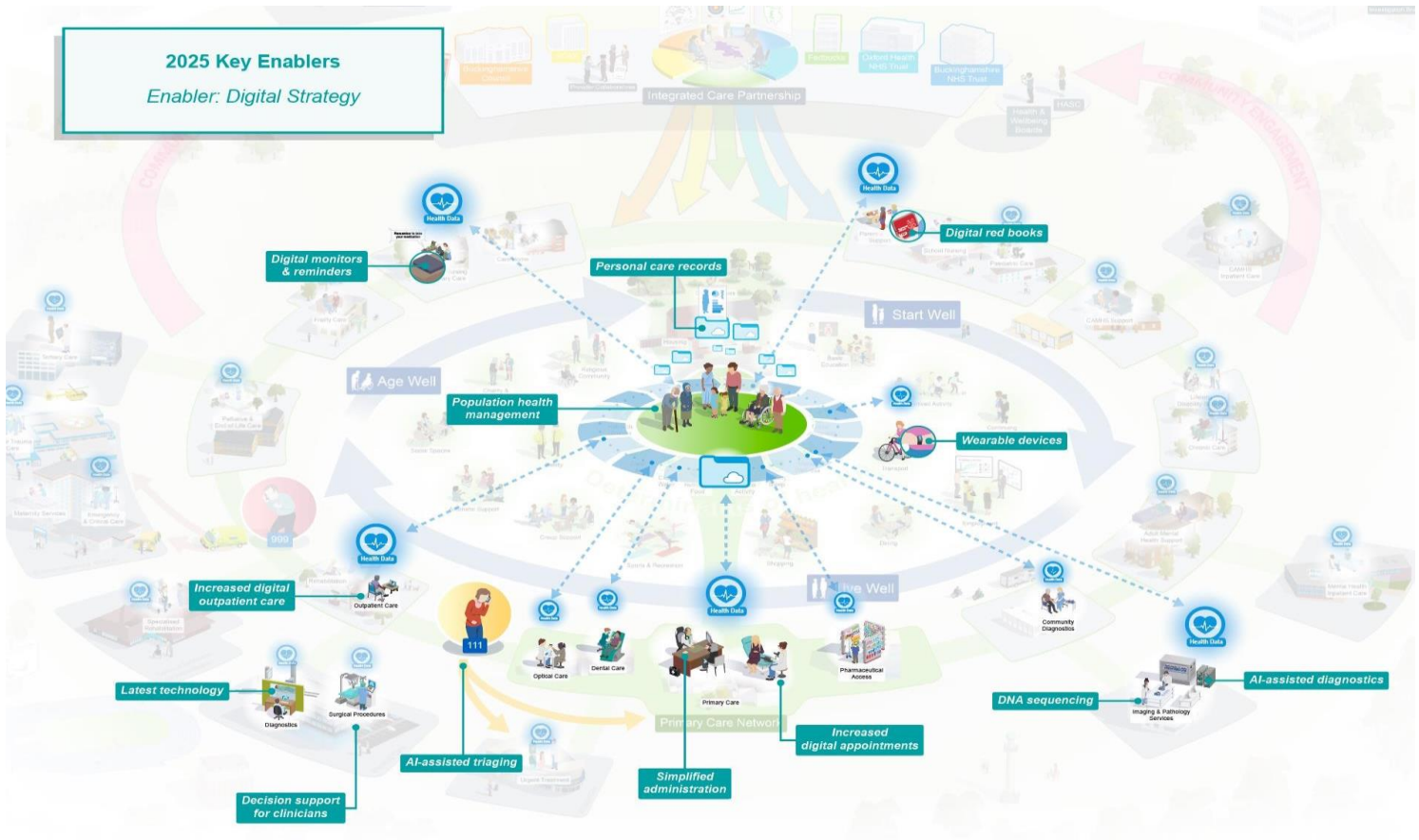
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# New Technologies



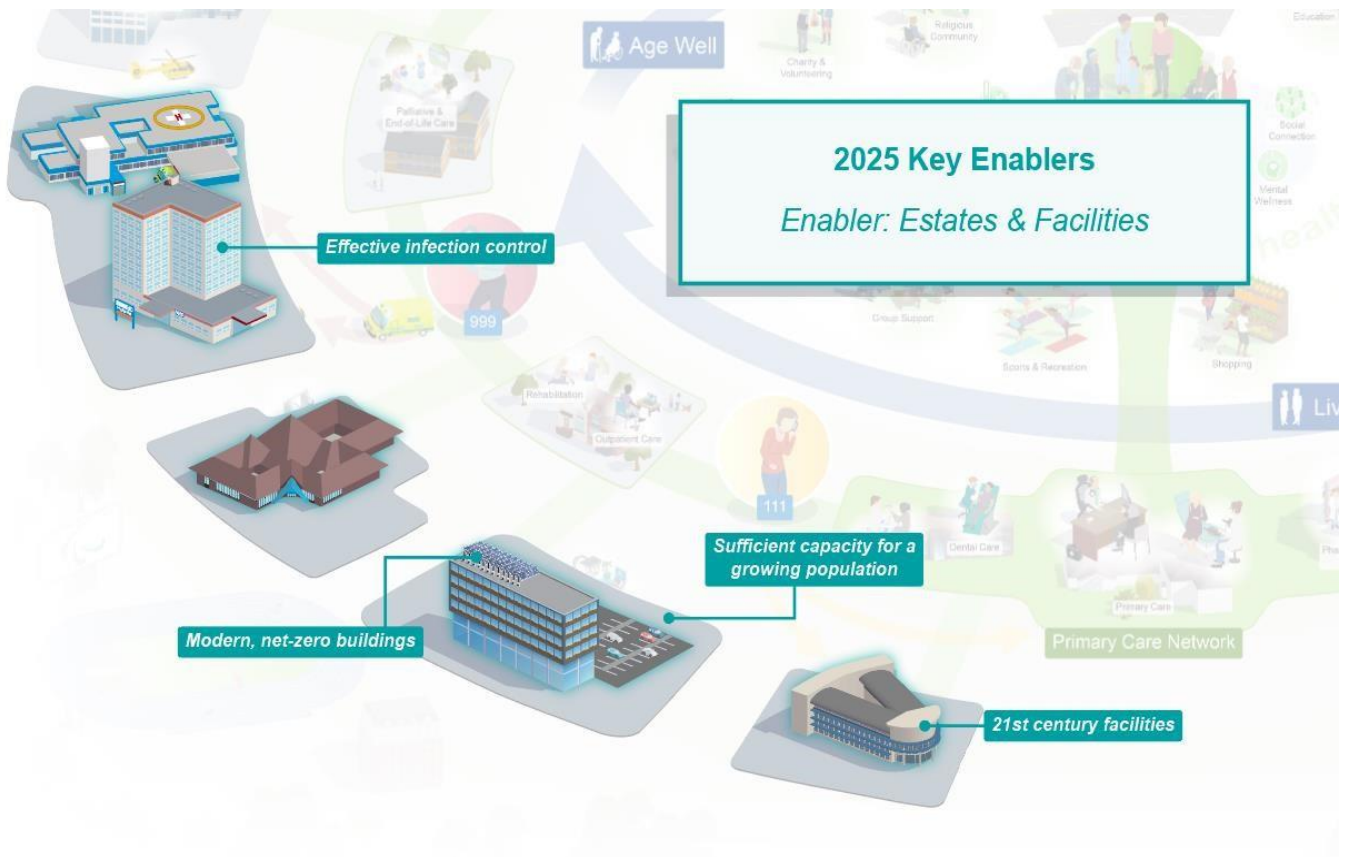
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# Our Estate and Facilities



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# Our Strategy



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## Adult Community Healthcare Team (ACHT) Marlow

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Presented by:  
Claire Jones Lead Nurse – Community Nursing and  
Transformation  
and  
Sarah Leonardi – Community Team Lead Marlow  
Date 14<sup>th</sup> January 2022



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## This is (some of) Us



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ACHTs are seven locality-based teams within Buckinghamshire, led by experienced District Nurses, all of whom have the specialist Practitioner Qualification. All patients referred are assessed, care planned, and the nursing interventions delivered in the patients' home environment, as is appropriate. We work with a range of health and social care professionals and other agencies to provide holistic care. The service operates 24 hours a day, 365 days a year.

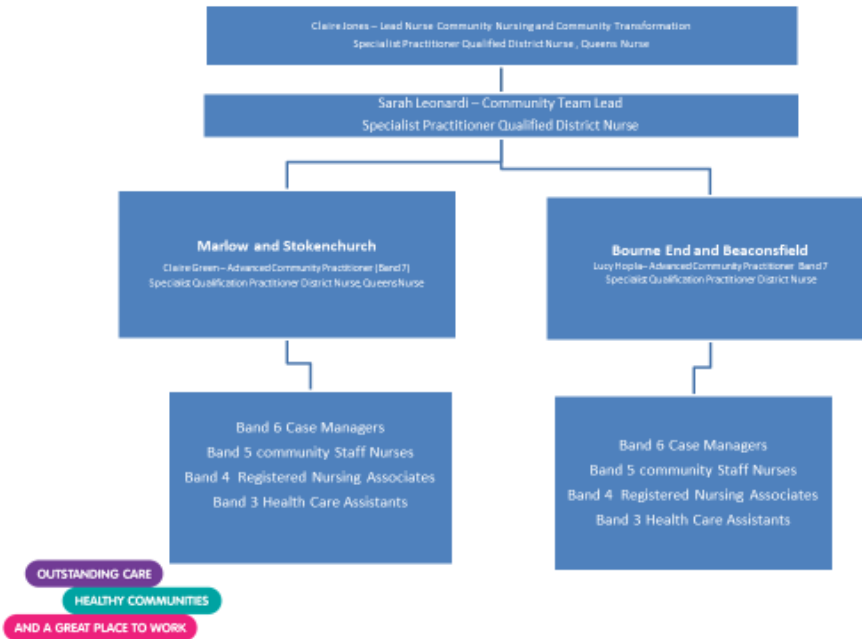
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# We are Marlow ACHT



# A Day in the life of life of the Adult Community Healthcare Team (not exhaustive)

Correct use of PPE – Keeping us and patients safe



Safeguarding where our patients are at risk of self neglect



Management and prevention of pressure ulcers



Daily Team Handovers and safety huddles

Management of urinary catheters



Management of simple and complex wounds



End of life and palliative care



Safe administration of medication



Management of central venous access devices



In depth assessment and treatment for leg ulcers



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## This is what we do

- Referrals will be accepted for adults for the following:
  - An urgent assessment in response to a sudden and unforeseen change in health or need
  - Assessment and/or intervention to avoid an admission
  - A change in health status following an episode of illness now requiring /nursing intervention
  - Palliative or end of life care
  - Nursing care following an inpatient stay
  - Case management of a long-term condition or ongoing need

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### Example Interventions to be offered by the ACHT / DN teams include:

- Rapid response to urgent care needs that would prevent an avoidable admission e.g. blocked catheter, short term illness/decline in function
- Administration of medications up to twice a day, three times a day in exceptional circumstances to patients that meet the referral criteria
- Management of bladder and bowel dysfunction at level 1 including catheterization not to include referral just for prescription of continence pads.
- IV therapy for patients that meet the referral criteria. Referrals for IV therapy to come via the OPAT Service.
- Palliative Care and end of life
- Wound management (to include complex wound care, and leg ulcer management) for patients who meet the referral criteria.
- Prevention and management of pressure ulcers
- Phlebotomy for those currently on the caseload (not one-off bloods)

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## Exclusion criteria:

- Not registered with a Buckinghamshire GP
- Under the age of 16 years old
- Able to attend GP practice or clinic, outpatient appointments including on weekends and public holidays.
- The level of care required is not within the capability of the DN teams
- The environment in which care is to be provided is unsuitable and unsafe for the team to work in
- Patients who do not meet the criteria for housebound:
  - An individual will not be eligible for a home visit if they are able to leave their home environment on their own or with minimal assistance to visit public or social recreational public services (including shopping, going to the hairdresser, social events). It is acknowledged that an individual's needs may change impacting upon their eligibility for a home visit.
- Patients who require support for interventions that a person would be expected to fund or do for themselves e.g., weekly change catheter bags, long-term changing of support stockings
- Welfare checks for patients' unknown to the service

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## Facts and figures

### Support the following GP surgeries:

- Bourne End & Wooburn Green Medical Centre
- (Hawthornden, Pound House & The Orchard Surgeries)
- Cherrymead Surgery
- Milbarn Medical Centre
- Stokenchurch Medical Centre
- The Marlow Medical Group
- (Doctors House & Lane End Surgeries)
- The Simpson Centre (Incl. Penn Surgery)

### Current caseload size ( subject to daily variation)

- Marlow – 160 patients – 1 x band 7, 2 x band 6, 1x band 6 on mat leave
- Bournefield – 204 – 1 x band 7, 3 x band 6, 1 x band 6 on DN training

For financial year 2020 – 2021

**We received 2858 referrals**

This equated to **26748** contacts with patients.

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## This is what our patients think of us

- [Community nursing: what it means to our patients \(subtitled\) - YouTube](#)

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