Q: What is ‘Healthy Weston: joining up services for better care in the Weston area’?
A: It is North Somerset CCG’s new vision to improve health and care services in Weston-super-Mare, Worle, Winsombe and the surrounding villages of the south rurals.

Our vision places greater emphasis on organising and delivering services that help to keep people healthy and out of hospital, and when they do need care, providing a more seamless experience across the range of health and care services with a focus on being treated in the community and closer to home.

It sets out a proposed way forward for organising and delivering health and care services across the local health and care system in a way that better meets the needs of local people, and ensures services meet national quality standards and are affordable within available funding for the long-term.

This is in response to the increasing demand and changing needs that come with an ageing and growing population, as well as the need to address challenges in attracting, recruiting and retaining specialist staff to run services, alongside significant financial pressures.

Q: Which groups of people will this affect?
A: In order to start to tackle the unacceptable variation in health between different communities in our area we are focussing on three priority groups where improving services is most urgent:
   - Frail and older people
   - Children, young people and pregnant women (including those people with complex needs and young people’s mental health)
   - Vulnerable groups eg people with mental health needs, learning difficulties and those who struggle with drug and alcohol addiction.

Q: Which services are included in the vision?
A: It includes services provided by GP practices, community healthcare services, mental health, the voluntary sector, social care and services provided at Weston General Hospital and neighbouring hospitals. We think we already have all the right services available in our area, but we could make them work together in a more joined up way across different services and organisations in order to deliver the best, most effective and efficient care for local people.

Q: What are the key areas that the vision covers?
A: There are four key areas:

Developing a new model of care for Weston
   - Looking at how the overall health and care system in North Somerset must change to provide a better balance of providing community services as well as hospital services, enabling more joined up service provision and organisational working between services provided in the community and services provided in a hospital setting.
• Creating the right environment and providing the right services to help people stay well and stay out of hospital.

**Placing greater emphasis on primary care**

• Supporting GP practices to work more closely together, and more effectively with other organisations who provide health and care services by working in locality based ‘clusters’. This will enable them to offer patients access to a greater range of services and more integrated community services, as well as improved cover and the option for increased evening and weekend appointments. Working in this way also gives financial efficiencies through improved economies of scale.

**Redefining the role of Weston General Hospital as a new ‘care campus’**

• Creating a new community focused role for Weston General Hospital by putting it at the heart of the new model of care and developing it into a ‘care campus’ where integrated primary, community and acute hospital services will be provided in one place and with greater involvement by GPs and their primary care teams.

• This will require more collaboration between primary care, out-of-hours primary care, community services, mental health, the ambulance service, the local authority, and the voluntary sector working with each other, as well as working more collaboratively with the hospitals in our area. Examples of the types of services that could be provided are:

  o **A frailty centre 7 day of the week** providing proactive and reactive services to a clearly defined group of patients to keep them well and at home. If an individual is appropriately admitted to a hospital bed, the system will react quickly to pull them through the system and will provide excellent rehabilitation and support services to help them get home as soon as possible.

  o **A day unit** providing services such as intravenous (IV) therapy in the community and blood transfusions in a more comfortable environment so patients don't have to be admitted to hospital.

  o **Rapid access to diagnostics** to provide access to a range of diagnostic tests for those patients whose symptoms are non-specific, but are concerning, and who need a diagnosis so that a treatment plan can be put in place. The service could offer patients further investigation of symptoms they may have discussed with their GP through additional tests. These could include: imaging tests such as MRIs, CT scans and endoscopy.

  o **Acute mental health services** supported by clinicians from Avon and Wiltshire Mental Health Partnership NHS Trust's Long Fox unit which is co-located at Weston General Hospital, this will help to better manage patients with both mental and physical health needs. Services could include in-patient or crisis teams, IAPT and community mental health.

  o **Rapid access to social services** to cope with patients attending with complex social issues requiring quick intervention to avoid admission to hospital.

  o **Local cancer services** so more patients can be treated closer to home and don't have to travel to Bristol for treatment.

**Looking at how Weston General Hospital and neighbouring hospitals can work together to deliver the highest quality acute services in the future**

• The vision recognises that some of our current acute hospital services at Weston are struggling to meet national quality standards, particularly in relation to safe levels of staffing. There is a risk too they are not financially viable when costs of delivering the
Neither service are higher than the income they receive (particularly when they see a relatively low number of patients).

- As a response to this we will look at how acute hospital services can best be delivered collaboratively with the hospitals in our area, and identify where some changes may need to be made to make sure we can consistently deliver high quality and safe sustainable services that are affordable within available funding.

**Q: How will this vision affect Weston General Hospital?**

**A:** We envisage a vital and dynamic role for Weston General Hospital as a ‘care campus’ where integrated primary, community and hospital services will be provided in one place and let by GPs and their primary care teams. This is supported by Weston Area Health Trust who have been long term champions of the ‘care campus’ model.

**Q: What does this mean for the temporary overnight closure of Weston General Hospital’s A&E services?**

**A:** The long-term future of urgent and emergency care services at Weston is a crucial strand of our work. We will continue to gather views from our health and care partners, staff, stakeholders and the public on how we could deliver sustainable services. Our shared goal with WAHT, the organisation that runs Weston General Hospital, is to make sure local people can access safe, high quality, sustainable urgent and emergency care services from wherever they live in North Somerset, as close to home as possible.

In the meantime, the temporary closure of overnight A&E services remains in place until safe and sustainable staffing levels can be achieved throughout the night. Whilst WAHT are making progress with recruiting permanent medical staff, and continue to do all they can to recruit the numbers needed, we acknowledge that it will continue to be difficult and the A&E department will not reopen overnight in the short-term.

During the temporary overnight closure, patients continue to receive safe care at an alternative hospital and the NHS continues to cope well.

**Q: Who has been involved in developing the vision?**

**A:** The vision marks the continuation of a process we began earlier in Spring this year when we, together with Weston Area Health NHS Trust, talked to local patients, staff and the wider public about a number of long-standing challenges at Weston General Hospital. An independent report written on the findings was written by Healthwatch North Somerset and published in June [here](#).

During the engagement, we learnt that local people wanted to have a conversation about the future of healthcare services in the round, rather than just focussing on one specific issue at a time.

In response to this, over the course of the summer we worked intensively with local GPs, hospitals, mental health services, social care and voluntary sector agencies, patient representatives and Weston General Hospital, to develop a vision for how local healthcare services could look in the future in Weston-super-Mare and the surrounding towns and villages.

**Q: Can I get involved?**

**A:** Yes. It is vitally important that the views of staff, stakeholders, patients and the public continue to help develop the vision. On 18 October we will be launching the next stage of our conversation with staff and local people that will look at the options available to us and
help identify the choices that we need to make to turn our vision into reality and deliver our ambition for better and more sustainable care. If you would like to get involved in or be kept informed of our work, please email northsomerset.feedback@nhs.net.

Q: What are the next steps?
A: Health leaders in North Somerset are to consider and formally set out the new vision ‘Healthy Weston: joining up services for better care in the Weston area’ to improve health and care services in Weston-super-Mare, Worle, Winsombe and the surrounding villages of the south rurals at the clinical commissioning group’s monthly Governing Body meeting on 3 October 2017.

A final version was published on the CCG website on 11 October 2017. A public-facing summary of the document will follow.

The next phase of talking and listening to views of staff, stakeholders, patients and the public will be set out in more detail on 18 October 2017.