

# Healthwatch Kingston Open Meeting

Merger between Kingston Hospital and Hounslow and Richmond Community Healthcare (HRCH)

Tuesday 22 January 2024



**healthwatch**  
Kingston upon Thames

# HWK Open Meeting Agenda

Tuesday 22 Jan - 12pm

## AGENDA:

- 12.00pm - Welcome and introductions - Stephen Bitti, Healthwatch Kingston, CEO
- 12.05pm - Presentation - Acute and community services working together in Kingston (HRCH) - Joint presentation by leads from Kingston Hospital, Your Healthcare and HRCH:
  - Jo Farrar, CEO, Kingston Hospital and HRCH
  - Annette Pautz, Kingston ICS Clinical Director
  - Nic Kane, Chief Nurse, Kingston Hospital and HRCH
  - Ed Montgomery, Managing Director of Your Healthcare
- 12.20pm - Q&A
- 12.45pm - Case Studies - Joint presentation by leads from Kingston Hospital, Your Healthcare and HRCH
  - Urogynaecology - Rebecca Geraghty-Staunton, Lead Nurse for Urology and Colorectal Service (YH)
  - Deconditioning - Caroline Hopper, Chief Allied Health Professional (KHFT)
  - Occupational therapy
- 1pm - Q&A
- 1.15pm - Lunch
- 1.45pm - Welcome and introductions to Community Voices Kingston (CVK) - Stephen Bitti, Healthwatch Kingston, CEO [Community Voices Kingston](#)
- 2.00pm - Veteran engagement with community services - Alison Smith, KHFT/HRCH
- 2.45pm - Wrap up and AOB - Stephen Bitti, Healthwatch Kingston, CEO
- 3.00pm - Open Meeting close



**Hounslow and Richmond  
Community Healthcare**  
NHS Trust



**Kingston Hospital**  
NHS Foundation Trust



# Acute and community services working together in Kingston (including HRCH / Kingston Hospital merger)

**Jo Farrar**, CEO, Kingston Hospital and HRCH

**Nic Kane**, Chief Nurse, Kingston Hospital and HRCH

**Ed Montgomery**, Managing Director of Your Healthcare

**Dr Annette Pautz**, Kingston GP

# Purpose

- Here today to discuss the **plans for community and acute health services** in Kingston
- We will talk about the coming together of the Richmond Community Services (HRCH) and Kingston Hospital - what this means for the residents of Kingston

## Questions and answers

- Joined by clinical colleagues with examples of some of the great work we are doing to join up services in Kingston
  - Urogynaecology: Rebecca Geraghty-Staunton
  - De-conditioning: Caroline Hopper
  - Occupational therapy home assessments: Olivia Frimpong

## Questions and answers

# Hospital and community providers in Kingston

## Kingston and Richmond NHS Foundation Trust

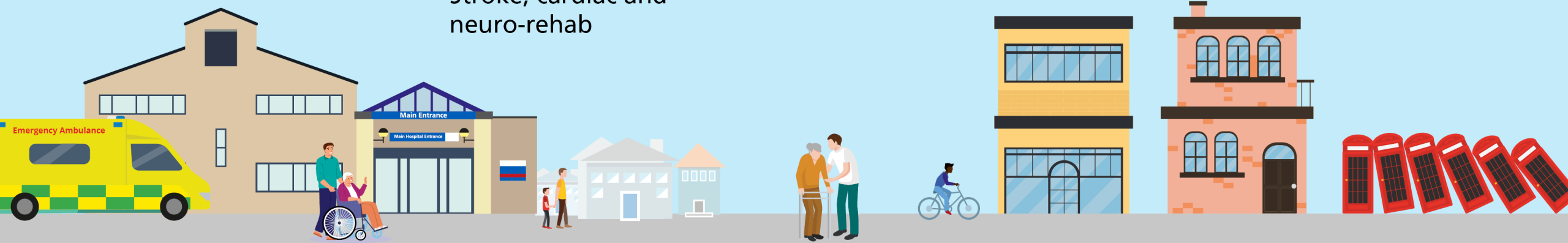
- Inpatient beds
- Planned and unplanned hospital care
- Maternity services

- Adult community nursing and therapies
- Rapid response and rehab services
- Children's nursing, community paediatrics, therapies and immunisations
- Dementia and care home support
- Stroke, cardiac and neuro-rehab

## Your Healthcare

- Adult community nursing and therapies
- Urgent response
- Community contraception and sexual health
- Neuro-developmental
- Adult social care
- Children, including health visiting, school health and speech and language therapy

Primary care  
Social care  
Voluntary and  
community



# National direction - changing the focus of care

## Where we are now



Many people are treated in hospital unnecessarily when their care could be delivered closer to home.

Care can be delayed and people have to repeat their story, with not enough emphasis on supporting healthy living.

## Where we want to be



Resources will be prioritised for work in neighbourhoods and prevention, as opposed to hospital.

- Delivering **community services in Kingston** since 2010 – social enterprise
- Deliver services in Kingston, under a **partnership agreement with HRCH** (soon to be part of Kingston and Richmond NHS Foundation Trust)

### Your healthcare is celebrated for:

- High quality **clinical service delivery**
- Efficient and **cost-effective** operational management
- Proven **financial resilience**
- As an independent provider, can pursue other business (e.g. IT contracts), generating financial surplus that can be reinvested for the **benefit of the community.**
- **Effective partnership working** with health, social care and voluntary sector.



# Working in partnership since 2020 – one leadership team

## Kingston Hospital

General hospital for people in Kingston, Richmond, Elmbridge, Merton, Wandsworth and Sutton (**more than 3,500 staff**).

Care to over half a million people a year, with 450 inpatient beds, emergency department, urgent treatment centre, and busy maternity unit.

**CQC rated as 'Outstanding'**

## HRCH

Community services for around **222,000 people** registered with GPs in Richmond as well as school-age immunisations across south London.

Around **650 staff** in Richmond community services.

HRCH also oversees community services for Kingston via a contract with Your Healthcare.

**CQC rated as 'Good'**



# Our ambition for Kingston



Improve the **health and wellbeing** of people in our places.



Work as one **team** across the hospital and our communities.



Be more **sustainable**.



Provide **person-centred care** across all stages of life.



**Foster innovation**, and make it easier to receive care.



**Empower our staff** to be at their best when they are at work.

**Our places**

**Our services**

**Our people**

# Questions from residents

- Will I still get to see my local GP?
- Are we expecting there to be redundancies?
- Will I come to Kingston Hospital for my appointments as usual?
- How will the merger affect Your Healthcare services?
- Will services feel different as a result of the merger?



# Working in partnership

- In many areas we work closely between primary care, community teams in Kingston and Richmond and Kingston Hospital – and we continue to find more opportunities – where it will improve care.
- Clinical quality governance is integrated across the three organisations – and shared quality priorities

**Services where we work in direct partnership include:**



# Urogynaecology

Integrating services in Kingston and Richmond

**Rebecca Geraghty-Staunton,  
Lead Nurse for Urology and Colorectal Service (YH)**

# Who we are – three services coming together



**Kingston Hospital**



**Your Healthcare**



**HRCH**

# Urogynaecology

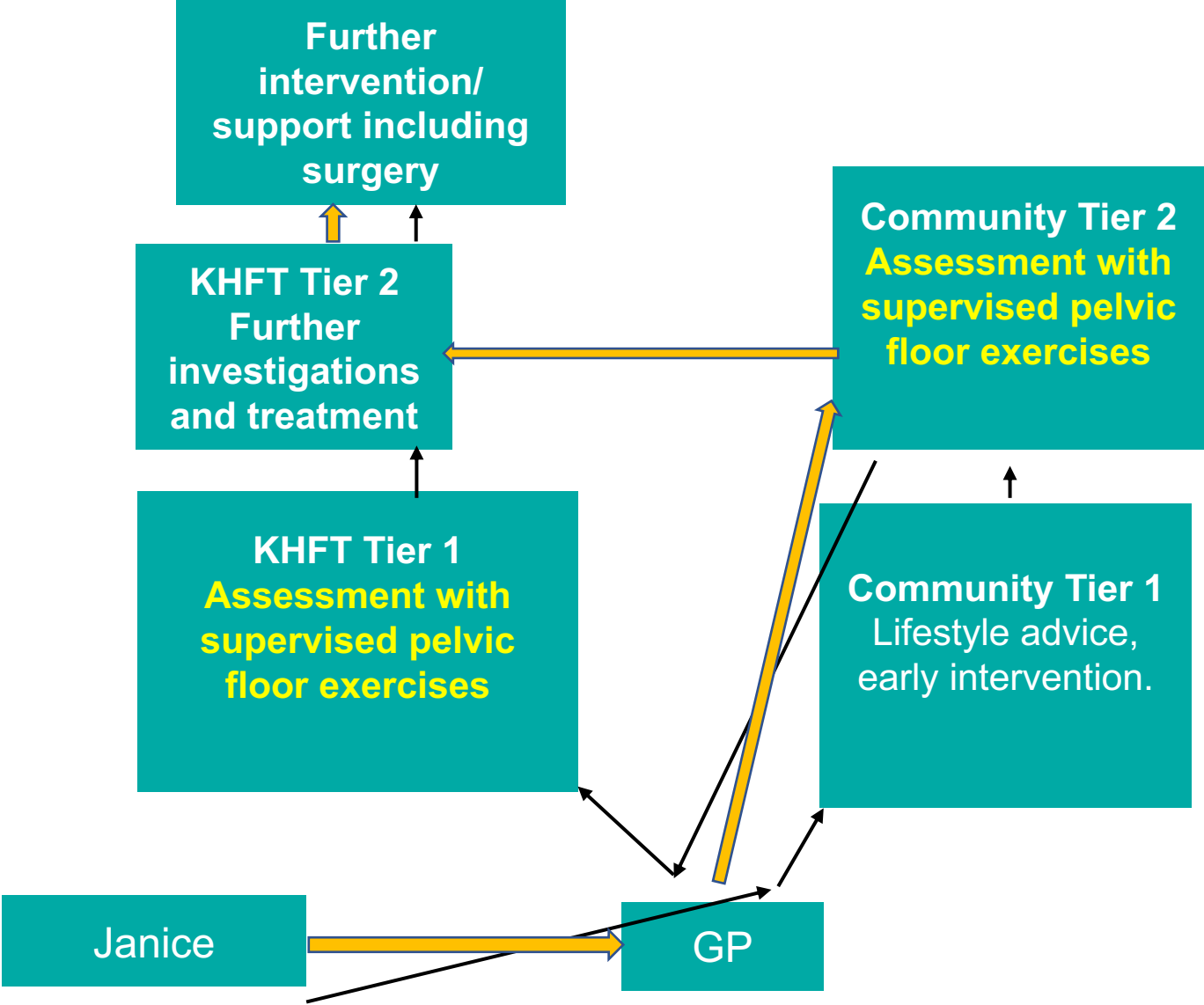
- **60%** of UK women have at least one symptom of poor pelvic floor health
- **1-in-3 women** experience urinary incontinence three months after pregnancy. One-in-12 women report symptoms of pelvic organ prolapse.
- Kingston - **high demand across providers** - referral between providers causes delays and there is duplication
- Long waits significantly impacting patients, causing added discomfort and worsening of the condition. In turn, this causes a greater burden on resources.

# Current versus planned pathway

Planned pathway:  
shorter with no  
duplication



Current pathway



# Patient benefits



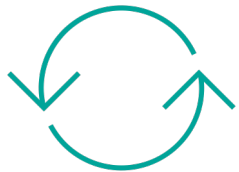
**Improved, timely access to specialist treatment**



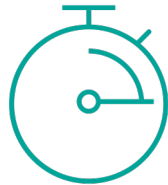
**More convenient for patients – older population**



**Opportunity to review and recruit specialist roles, upskill workforce in advanced practice roles**



**Seamless comms, referral and transfer of care between community and hospital services**



**Reduce wait time for secondary care complex/surgical patients**



**Avoid A&E/ hospital admissions for UTI/urinary retention in women**



**Reduce cost of follow-ups**



# Deconditioning

A joint approach to tackling deconditioning  
across Kingston and Richmond

**Caroline Hopper, Chief Allied Health Professional (KHFT)**

# Deconditioning

- **Sedentary behaviour** is a huge problem for patients in any hospital.
- Deconditioning in hospital can contribute to **adverse outcomes** and increased risk from harm, including pressure ulcers, falls, delirium, venous thromboembolism, loss of independent function and increased length of stay.

Acute patients  
are sedentary  
**90%** of their  
time in hospital



An elderly patient can become incontinent within **48 hours** of bedrest.

**10 days** bed rest is equivalent to 10 years of muscle ageing

# Deconditioning

## What is the deconditioning programme?

- Although deconditioning can start at home, we decided to start with what we can directly influence and change more rapidly by tackling deconditioning **across our inpatient wards**
- We are **working across YH, KH and HRCH** with support from both local authorities, patients, carers, and other non-statutory organisations.
- Each of our **4 workstreams** has a lead from YH, HRCH and KH to co-ordinate and lead the work.



# Four workstreams

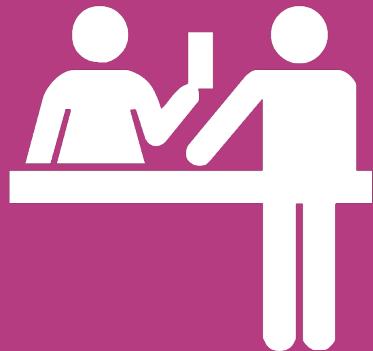
## Patient information

Sharing functional information about our patients



## Access to services

Reducing barriers to access and making better use of our community resources.



## Environment and equipment

Using an 'enabling' approach to increase overall activity and mobility



## Staff / patient education

Deconditioning curriculum to tackle the behaviour change required in staff.



# **Occupational therapy**

**Piloting a new way of working across our  
three organisations**

**Olivia Frimpong, Physiotherapy and Occupational  
Therapy Manager, Kingston Hospital**

# Occupational therapy project

Building on the partnership working around deconditioning and our OT@Place work, our occupational therapists at Your Healthcare and Kingston Hospital have come together to pilot a new way of working together across our organisations.



# Occupational therapy project

- Guidance published in 2022\* recommends that therapy assessments are carried out in the home instead of in hospital, to promote safer discharges and reduce length of stay in hospital.
- A KHFT therapist will **assess patients at home** so they can be seen in their usual living environment, where a more accurate assessment of needs is made.
- This collaborative project **reduces duplication** of effort and uses the expertise of both hospital therapists and those based in the community, blending their skills to provide the **safest experience** for patients on discharge.
- There is currently an over prescription of packages of care for patients assessed in hospital. It is anticipated that assessments in patients' own homes will be more accurate.



# Collaborative working

- Due to the relationships that have developed through the OT network events and OT@place groups, there is an **increased level of trust** that has enabled more congruent joint working and eased the development phase of this pilot
- There is a sense that the services involved are **working as one team** to problem solve for the patients best interests rather than a push/pull model of who will accept the risks.
- Positive risk taking to facilitate an **earlier discharge** is easier to achieve when there is a high level of trust between services.





# In summary

- Described the **plans for healthcare in Kingston and Richmond** – including the merger of the Richmond Community Services (HRCH) with Kingston Hospital
- Given you an insight into **some of the areas where we are working more closely together** as healthcare organisations in Kingston
- Given you some insight into **what all of this means** for the residents of Kingston



**Your questions...**

Break (1.15pm - 1.45pm)



# Community Voices Kingston (CVK)

- 1.45pm - Welcome and introductions to Community Voices Kingston  
Stephen Bitti, Healthwatch Kingston CEO
- 2.00pm - Veteran engagement with community services - Alison Smith, KHFT/HRCH
- 2.45pm - Wrap up and AOB - Stephen Bitti, Healthwatch Kingston, CEO



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# Introduction to Community Voices Kingston (CVK)

**Stephen Bitti, Healthwatch Kingston, CEO**

Welcome and introductions to Community Voices



# Introduction to Community Voices Kingston (CVK)

Community Voices Kingston working with HWK and KVA is one of the ways the Kingston health and care partnership connects with local groups and communities.

Community Voices Kingston wants to gather insight on experiences of health and care services with a hope to improving local services. We especially want to hear from those most likely to experience health inequalities and the worst health outcomes to try and capture voices not typically heard from.

To achieve this, Healthwatch Kingston and Kingston Voluntary Action have joined with Community Voices Kingston, to work in partnership to engage our local communities. To avoid groups and organisations having to attend multiple meetings and forums, we will be tapping into existing ones, aiming to further the reach of Community Voices Kingston. Community Voices Kingston will have a regular slot at Healthwatch Kingston's Open Meetings, as well as at KVA's Health & Wellbeing Network and/or VCSE Forum.

If you'd like more information on Community Voices Kingston please contact:

[charlotte.jones@swlondon.nhs.uk](mailto:charlotte.jones@swlondon.nhs.uk)



## Veterans' Healthcare in Kingston upon Thames

**Alison Smith**  
Associate Director – ED&I Strategy



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## What is the Military Covenant?

It is a promise from the nation to those who have served in and their families that they should face no disadvantage compared to other citizens in the provision of public and commercial services.

## The Armed Forces Act

Passed in 2021 and came into force November 2022.

Armed Forces Covenant Duty which requires NHS services to have due regard to the following:

1. the unique obligations of, and sacrifices made by, the Armed Forces;
2. the principle that it is desirable to remove disadvantages arising for Service people from membership, or former membership, of the Armed Forces; and,
3. the principle that special provision for Service people may be justified by the effects on such people of membership, or former membership, of the Armed Forces.



## How many veterans live in Kingston?

| Kingston upon<br>Thames | Population   |                             |      |     |
|-------------------------|--------------|-----------------------------|------|-----|
|                         |              | Royal<br>Navy or<br>Marines | Army | RAF |
| Veterans                | 2,658        |                             |      |     |
| Non-Veterans            | 3,455        | Spouses and Children (<18)  |      |     |
| Cadets                  | 41           | Adult Volunteers            |      |     |
| Reservists              | 70           | 0                           | 70   | 0   |
| Regulars                | 5            | 0                           | 5    | 0   |
| General Population      | 168,000      | Total Population            |      |     |
| <b>Total</b>            | <b>6,229</b> |                             |      |     |
| Percentage              | 3.7%         | 1in27                       |      |     |
| Veteran Percentage      | 1.6%         | 1in63                       |      |     |

- We have a significant population of families of serving personnel in the borough – 3,455 spouses and children.
- This is important for supporting children in our schools. What additional resources do we currently have in place to support them and are there any gaps?
- Do we make enhanced provision in maternity services, for example?

## What are the specific health services offered to veterans?

*Op COURAGE:* mental health and wellbeing service. Brings mental health services for Veterans under one umbrella. Self referral, GP or health care representative can refer or a charity

*Op RESTORE:* GP referrals for physical injuries and conditions related to a Veteran's armed forces service

*Op COMMUNITY:* a telephone service which is a point of contact for supporting the Armed Forces Community and can advise on navigating NHS services



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## What are we doing to support veterans and their families?

The wider community in Kingston has many organisations that support Veterans and their families

Alongside the national charities such as the Royal British Legion, SSAFA, Help for Heroes, The Poppy Factory in Richmond is a unique local charity with an international reputation that can support employment for veterans

[Visit the home of Remembrance Wreaths - The Poppy Factory](#)



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## What are we doing to support veterans and their families?

We have a number of GP practices that are Veteran Accredited and trained to support the health needs of Veterans and their families. The practices that are so far accredited cover almost 60,000 residents in the borough.

Kingston Hospital and HRCH are working towards accreditation under the Armed Forces Covenant to ensure all veterans can be offered the most appropriate care and support when they use our services



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# Please get in touch

## THANK YOU!

Contact: [alison.smith154@nhs.net](mailto:alison.smith154@nhs.net)



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# Thank you for joining us for the Healthwatch Kingston Open Meeting

## Next Open Meeting:

29 October 2024 - Social Care (MS Teams)

12 December 2024 - Christmas meeting - Cold weather services for vulnerable communities (face 2 face)

11 Feb 2025 - Help us prioritise community engagement project 2025/26 (MS Teams)

Any questions please email:

[info@healthwatchkingston.org.uk](mailto:info@healthwatchkingston.org.uk)



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