

## **Responses from Workshop Day – May 2006**

### **Organised by Carers Together in Hampshire**

#### **Session 2 - Reconfiguration of the NHS in Hampshire**

##### **Consultation held by Carers Together Hampshire – 22 May 2006**

- The consultation session involved 60 carers, who sat at tables of between 7 and 9 people.
- People were asked to discuss the new configuration and make comments
- The comments below reflect the variety of responses, comments and concerns
- No attempt has been made to amend or change the comments - they have been recorded as written by the groups

##### **Reconfiguration of the NHS in Hampshire**

There are new proposals for reconfiguring the Health Service in Hampshire Portsmouth and Southampton and the Hampshire Strategic Health Authority for implementation in July and October 2006.

##### **Organisation and benefit**

- How many more committees and chief executives does it take for reorganisations?
- Smaller units more accessible to chief execs for clients
- Larger ones have a better overview
- Needs local and individual knowledge
- Need local representatives in some way – could be carers
- Get it right then stick to it!
- If district level – all boundaries should be co-terminus
- Once changes have been made, stick to them so they can work.
- Will health and social care be combined?
- Good in theory provided there is no reduction in funding & resources.
- What will happen to premises? Particularly need to protect community hospitals.
- Actual benefit?! Of the latest reconfiguration over previous
- Does reorganisation necessarily mean greater efficiency?
- Believe it could be better and more efficient if health and social services work together.

##### **Effect on patients, carers and staff**

- If less trusts and responsible for wider range of services will it stop some being Cinderella services?
- If less layers of management/bigger areas (trusts), will it? :
  - SAVE money
  - SPEED up decisions
  - UNIFORMITY across the country and stop the postcode lottery
  - EFFICIENCY
- Will all the different former Trusts computer systems be able to talk to each other?
- Lack of organisational continuity is a nightmare for staff and cannot help patients or services.
- Individuals get lost in a large unit, makes communication difficult
- Hard for staff to work when keep changing structure?
- Are the “savings” going to be put into frontline services?
- What will be the benefits to carers and users?
- No matter where we live, are we going to get same service as our “neighbours”?

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- If you have mental problem go to one locality, if you have a physical problem need to go to a separate locality
- Hopefully all patients will get same drugs and level of services – at highest level not all brought down to the lowest level.

#### **Cost and budgets**

- What is the cost of reorganisations – who pays?
- ?Actual cost?
- Costs of paperwork etc
- Joining Oxford and Berkshire will affect wages for staff. Does this help Hampshire's budget?
- Would like to see budgets distributed evenly between services.
- What is the cost of all this reorganisation? We would prefer money to be spent on CARE!
- How many more times are you going to change your logo and are we going to pay for it?

#### **General comments**

- Same as 210 B.C.
- “Change for change sake”
- Isle of Wight is lucky!!
- We have a strong feeling of Deja Vous.
- The words “piss up in a brewery” spring to mind!!!
- Carers have no boundaries.
- Not user friendly
- Effect on P.P.I.Fs and P.A.Ls? Why not ask people to get involved in localities – less costly than the major organisations proposed and better done locally with local champions and people with local knowledge