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To: All Members of the Adults' Health,  
Adults' Care and Housing Overview and  
Scrutiny Committee

Please ask Rita Glen Gallo, 01793 463611,  
for: rglen-gallo@swindon.gov.uk

Dear Councillor,

**Adults' Health, Adults' Care and Housing Overview and Scrutiny Committee –  
Tuesday, 21 June 2016**

I refer to the agenda for the above meeting and enclose report(s) in relation to the  
following Agenda Item(s):

**12. SEQOL** (Pages 5 - 10)

Yours faithfully,

Rita Glen Gallo, 01793 463611, rglen-gallo@swindon.gov.uk  
for Director of Law and Democratic Services



**Stephen P. Taylor M.A (Oxon), Solicitor**  
Director of Law and Democratic Services



## SEQOL

### Adults Health, Social Care and Housing Overview & Scrutiny Committee

Date: 3 June 2016

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Author:	Katie Taylor-Neale, Head of Communications, Engagement and Brand
Wards:	All Wards
Locality Affected:	All Locality Area
Parishes Affected:	All Parish Area

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#### 1. Purpose and Reasons

- 1.1 This report provides the Adults Health, Social Care and Housing Committee with an update on key areas of delivery and performance of SEQOL, provider of community health and social care services in Swindon.

#### 2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.
- 2.2 Identify any areas of enquiry or concern which may require further follow-up.

# SEQOL

## Adults Health, Social Care and Housing Overview & Scrutiny Committee

Date: 3 June 2016

### 3. Detail

#### 3.1 What are the challenges that your organisation is facing?

Top Priorities	Process	Outcomes
Prevention of hospital admission and facilitation of safe and timely discharge Meeting demand	<p>SEQOL continue to provide a range of services to prevent unnecessary admission and ensure timely and safe discharge.</p> <p>SEQOL is working with partners on a whole system project to reduce the number of people whose transfer of care is delayed. The Discharge Assessment Referral Team (DART) co-ordinate this on a day to day basis.</p>	<p>The services work closely with Partners and have improved patient flows across integrated care pathways.</p> <p>Demand continues to be high and SEQOL's services have supported primary and acute care partners for example, in 2015/16 there were 25,194 attendances at our Urgent Care Centre compared to 20,011 in 2014/15. 7,199 of these attendances in 2015/16 were redirected from A&amp;E therefore supporting the flow of patients at the hospital front door and prevention of unnecessary admissions.</p> <p>The SEQOL Discharge Assessment and Referral Team continue to proactively plan for discharges and the SEQOL leadership team support the hospital planning and escalation processes to support safe and timely discharges. The work of SEQOL colleagues has enabled the length of stay to be at its lowest, at an average of 4.3 days.</p>

Further information on the subject of this report can be obtained from Katie Taylor-Neale, 01793 463409,  
[communications@seqol.org](mailto:communications@seqol.org)

## SEQOL

### Adults Health, Social Care and Housing Overview & Scrutiny Committee

Date: 3 June 2016

What have you done well?

Top Achievements	Steps taken	Next steps
Delayed Transfers of Care / Meeting Demand	Refer to the above 'challenges section' which states achievements in this area.	Refer to the above 'challenges section' which states achievements in this area.
Supporting Primary Care - Transformation of community based DVT diagnosis and treatment in Swindon	<p>The SEQOL deep vein thrombosis (DVT) service, led by DVT nurse specialist Jo Boyd, is the first service of its kind in the country - in which nurses working in the community have been trained to use ultrasound to confirm or exclude deep vein thrombosis.</p> <p>Before this pioneering development, almost all patients with a suspected DVT would be put on anticoagulants and have to experience a wait for a hospital-based scan for diagnosis. In 2014, a total of 1,476 patients received an average of three unnecessary doses of anticoagulants while waiting to be screened. This service enables referrals direct from primary care e.g. GPs and a community based service so no need to attend the Great Western Hospital.</p> <p>The symptoms of a DVT often mimic other conditions so an ultrasound scan is sometimes the only safe way to exclude the condition. Patients needed an injection of</p>	<p>Continued provision of this service.</p> <p>Continued liaison between services at the SEQOL Specialist Treatment Centre to where appropriate further join up services offered to the same patient group.</p>

Further information on the subject of this report can be obtained from Katie Taylor-Neale, 01793 463409, [communications@seqol.org](mailto:communications@seqol.org)

## SEQOL

### Adults Health, Social Care and Housing

#### Overview & Scrutiny Committee

Date: 3 June 2016

	<p>anticoagulants daily until they had a scan. This delay in diagnosis caused people to feel uncertainty and concern.</p> <p>Now, patients can be assessed, scanned and diagnosed at the SEQOL Specialist Treatment Centre (located out of Moredon Medical Centre) on the same day. Treatment and review is also carried out by SEQOL.</p> <p>Before SEQOL introduced this new way of working, only 20% of patients received a scan within 24 hours and only 4% at initial consultation. Since the service began, figures are now 97% and 94% respectively, and written feedback from patients is consistently positive.</p> <p>The innovation in this service and the impact for national practice was recognised at the National Royal College of Nursing Awards when SEQOL were awarded the Community Nursing Team of the Year 2016.</p>	
Supporting the well-being of people with memory loss and dementia	<p>As at 31 March 2016 95.36% of all SEQOL employees have participated in dementia awareness training.</p> <p>There is no statutory requirement for SEQOL to offer this training but it was a 'good practice' decision to invest and provide this training via our in-house specialist Dementia Lead. This is in recognition that</p>	<p>The next meeting of the YOLO group is on 14 March. There has been a good level of interest and promotion has also been supported via social media and the groups own YOLO facebook page is now up and running. SEQOL are also supporting the groups newsletter to share their views, ideas and up-dates. If you are interested in further</p>

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Date: 3 June 2016

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	there is an increase in people with dementia whom we need to enable to access all services not just our specialist dementia services.	information about the YOLO group email: <a href="mailto:Lynda.hughes@seqol.org">Lynda.hughes@seqol.org</a>
Supporting the well-being of people with memory loss and dementia	<p>SEQOL continue to support the development of YOLO ('think tank' peer support group of people with dementia), in partnership with the Alzheimer's Society and Avon and Wiltshire Mental Health Partnership (AWP)</p> <p>The YOLO group is going well and they have been working on a 'good language' guide to help people in their communication about dementia.</p>	Publication of the Good Language Guide.

# SEQOL

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### 3.2 Supporting Information

3.2.1 None

## 4. **Alternative Options**

4.1 None

## 5. **Implications, Diversity Impact Assessment and Risk Management**

### Financial and Procurement Implications

5.1 None

### Legal and Human Rights Implications

5.2 None

### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

5.3 None

### Diversity Impact Assessment

5.4 None

### Risk Management

5.5 None

## 6. **Consultees**

6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

## 7. **Background Papers**

7.1 None

## 8. **Appendices**

8.1 None