



Flash of brilliance

Completed by: Helen Merrick

Service: Public Health Bus



Kent Community Health

NHS Foundation Trust

Aim: What were you trying to achieve?

The Public Health Bus was identified as a way:

- To increase the visibility of wide range of Public Health Services
- To increase activity within key target groups
- To offer more accessible and diverse options to access care for client groups.

Change ideas: What changes did you make?

- Changed the desks in the bus so that they could fold down, maximising floor space for wheelchairs, buggies and walkers.
- Steps changed so that the drop between each step was even and they were boxed in to avoid injuries.
- Installation of storage box under the vehicle for the ramp to reduce staff time around setting up the vehicle.
- Acquired equipment for services for storing on the bus to save time for staff needing to collect this from bases.
- A set of risk assessment templates and guidance for checking the suitability of venues for the vehicle was created.
- In the process of moving the bus and supporting staff booking process to our room bookings page on our staff intranet.
- Installation of imagery, a frame display board and poster clip frames.
- Learning from other mobile units in Kent around key issues. Staffing and confidence to drive was a common theme that was mentioned. Therefore, funding applications were completed for some Public Health outreach workers.
- Changing the window to an opening one and adding way signage to make the bus compliant with trust Covid guidance.
- Applied to the Greener NHS funding for solar panels to provide more reliable power and to help reduce our carbon footprint.
- Setting up of an events calendar in Microsoft Excel for all bus bookings.
- Added the bus as a location code to patient data systems and patient experience surveys to save additional paperwork for recording bus activity and to be able to act on complaints and share compliments.
- Creation of a how to guide including photos which is kept in the driver door of the vehicle.

Measures/results: What was the impact of the changes?

Bus at the point of delivery:



Upon delivery of the vehicle it was apparent that work would need to be completed in partnership with representatives across multiple areas, including health and safety, sustainability, health inequalities, quality improvement, equality and diversity, communications and marketing, infection prevention and control, facilities and Public Health. Services were kept informed at all points and changes were negotiated in order to find solutions which were safe, practical, good value, and impactful.

Changes have been made to the vehicle which have helped to future proof it in the event of needing to operate within social distancing measures again at any point, or when there is a need to take measures to reduce the spread of airborne viruses. Changes have also been made that have enabled the vehicle to be more multi-purpose by being able to change the layout and adapt to different service needs. Support staff also have helped to reduce barriers to use and have freed up service colleagues to have more time for service delivery which would have been spent on set up and driving.

Since the changes were made to the vehicle, support staff have been appointed and marketing has been carried out to promote the Public Health Bus as a unique opportunity for service delivery. There has been an increase in booking requests going from just one regular booking to three for 2023-2024 with a number of one-off requests having already come in from a range of Public Health Services. The hope is that once other services hear about case studies of the bus delivery model being successful for encouraging engagement with previously disengaged communities, that additional bookings from more services will follow, increasing the reach of the bus.

Bus today:



Lessons learned and what's next?

If considering the procurement of future vehicles, a lot has taken place from procuring the Public Health Bus that could be really helpful. This learning has been put into a lessons learned guidance document, which has already been shared with other NHS services who are looking into procuring mobile health units.

The bus exists in a wider context than just Kent Community Health NHS Foundation Trust (KCHFT) and so links have been re-established with external partner organisations in the community since the pandemic. A monthly event update is now sent out which has grown month on month since it was started. It has encouraged external services and agencies to get in touch about additional event opportunities which assists with continuing to scope out appropriate opportunities for the bus. In addition, the bus can be used by any of our services across KCHFT and so there is the opportunity to partner with any external services including voluntary, community and social enterprise organisations for clinic, service or event delivery using the bus. We are using our trust data (including insight data from past events attended) and joint strategic needs assessment data to help identify priorities and identify key partner organisations.

As the bus starts to be used more and data becomes available, it will be possible to start to evaluate its impact. Our patient systems and the satisfaction survey will provide the quantitative data such as number of patients seen, length of appointments, percentage of satisfaction with facilities etc (as long as the bus location code is used). For outreach events a simple data collection sheet was created and de-brief sessions with staff using the vehicle will continue to provide qualitative information. The Public Health engagement team's contact details are also being circulated to those using the vehicle, to encourage continual feedback opportunities from the public.

Looking forward, the bus needs to continue to be a welcoming space. To this end, work is currently being completed around installing a welcome message in multiple languages for the internal door, as it is the first part of the vehicle people will see if approaching from the side. Resources on the bus will also be reviewed in line with the accessible information standards in partnership with the Patient and Carer Partnership Team. Once initial data and information has been gathered, evaluation will be expanded to include patient stories. The intention is also to use tools such as statistical process control charts to be able to analyse reach month on month, with the ability to compare to expected.