Your Care, Your Future

Working together for a healthier West Herts

Update to Health and Wellbeing Board

October 2015

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NHS Herts Valleys Clinical Commissioning Group

Hertfordshire Community NHS Trust

West Hertfordshire Hospitals NHS Trust

as one

Hertfordshire Partnership NHS University NHS Foundation Trust

East of England Ambulance Service NHS Trust

Hertfordshire

Key objectives

Recap on:

- Objectives of the Strategic Review
- What's driving the Case for Change?
- Principles underpinning the future model of care for West Hertfordshire

Developing proposals

Discussion

Next steps

(Attachments: Final Case for Change, Draft Booklet on Proposals)

Who are we?

- Hertfordshire County Council
- NHS Herts Valleys Clinical Commissioning Group
- West Hertfordshire Hospitals NHS Trust
- Hertfordshire Partnership University NHS Foundation Trust
- Hertfordshire Community NHS Trust
- East of England Ambulance Service NHS Trust

Your Care, Your Future

The review has been addressing the following four questions:

1. How well (how effectively and efficiently) are patients' needs met by the current health and social care system across West Hertfordshire?

2. What are the opportunities to meet future health and social care needs of the West Hertfordshire population more effectively and efficiently?

3. How should health and social care services across west Hertfordshire be configured to realise these opportunities?

4. What organisational form(s) and commissioning/contracting model(s) best support the deliver of the preferred future configuration of services?

What's driving the Case for Change?

- **Patient and service users' needs not being met**
- **Demographic changes**
- **Variation in performance**
- **Financial pressures**
- **National challenges and the *Five Year Forward View***

www.yourcareyourfuture.org.uk/case-for-change/

What we have heard

Key themes that emerged from extensive stakeholder engagement to date include:

- ✓ More effective prevention to support people to stay well;
- ✓ More patient-centred care and care closer to home;
- ✓ Better access to services, particularly primary care;
- ✓ Better signposting to services and services being more joined-up;
- ✓ Making efficient use of facilities and estates; and
- ✓ Better community care for older people.

Over 100+ community and stakeholder meetings, over 1000 interactions through our website, across the four localities

Future Model of Care – principles

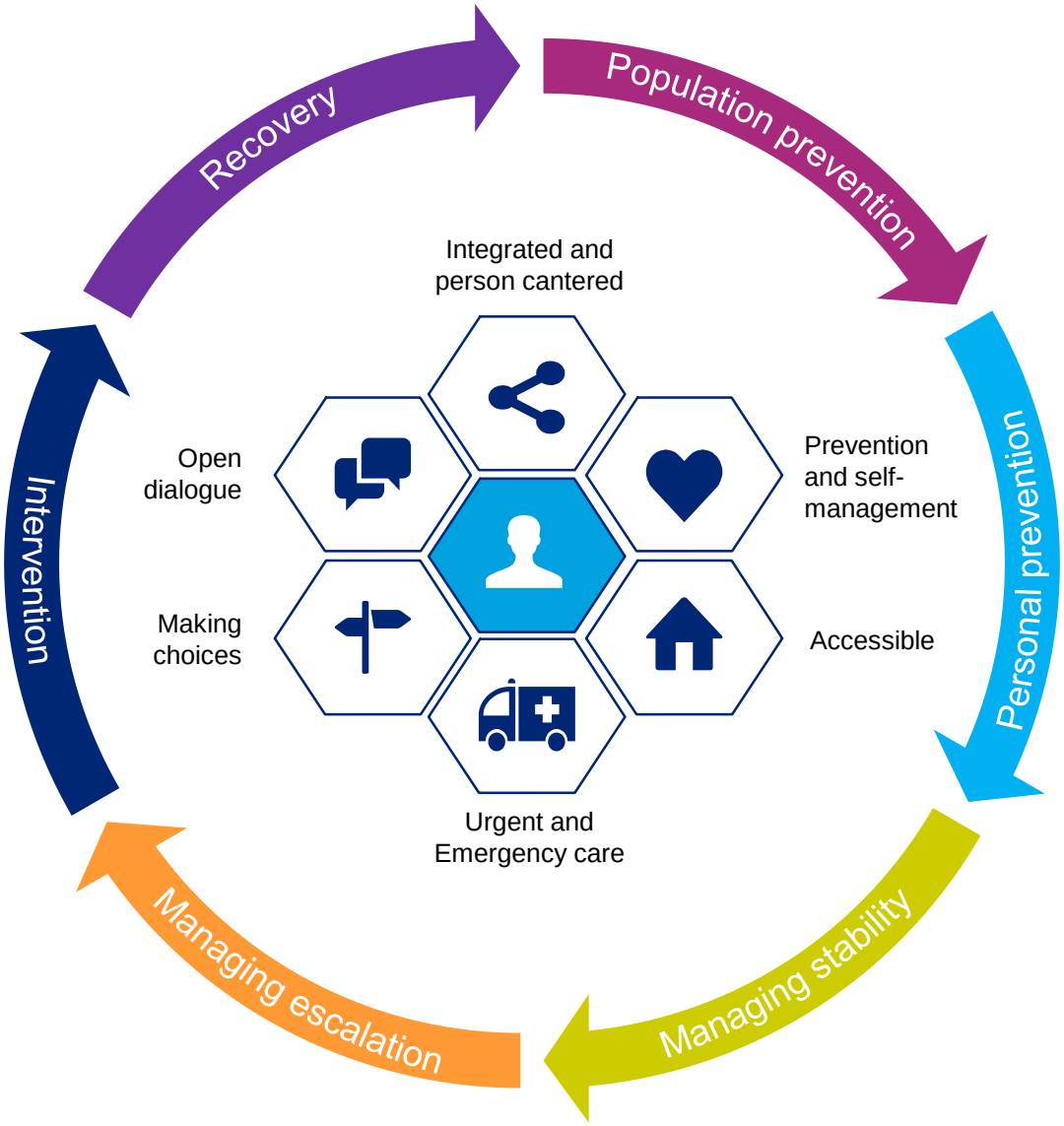
- More effective prevention
- Joined-up care
- Locality based delivery
- Managing stability & escalation
- Efficient and effective specialist care

Our future model of care will better support our population groups in the right place at the right time

Returning to normal function for that person

Specialist care that is safe, effective and responsive

People with an illness understand how it may change and what to do to prevent deterioration and it becoming an emergency



The population in the locality are well informed and supported to adopt healthy behaviours

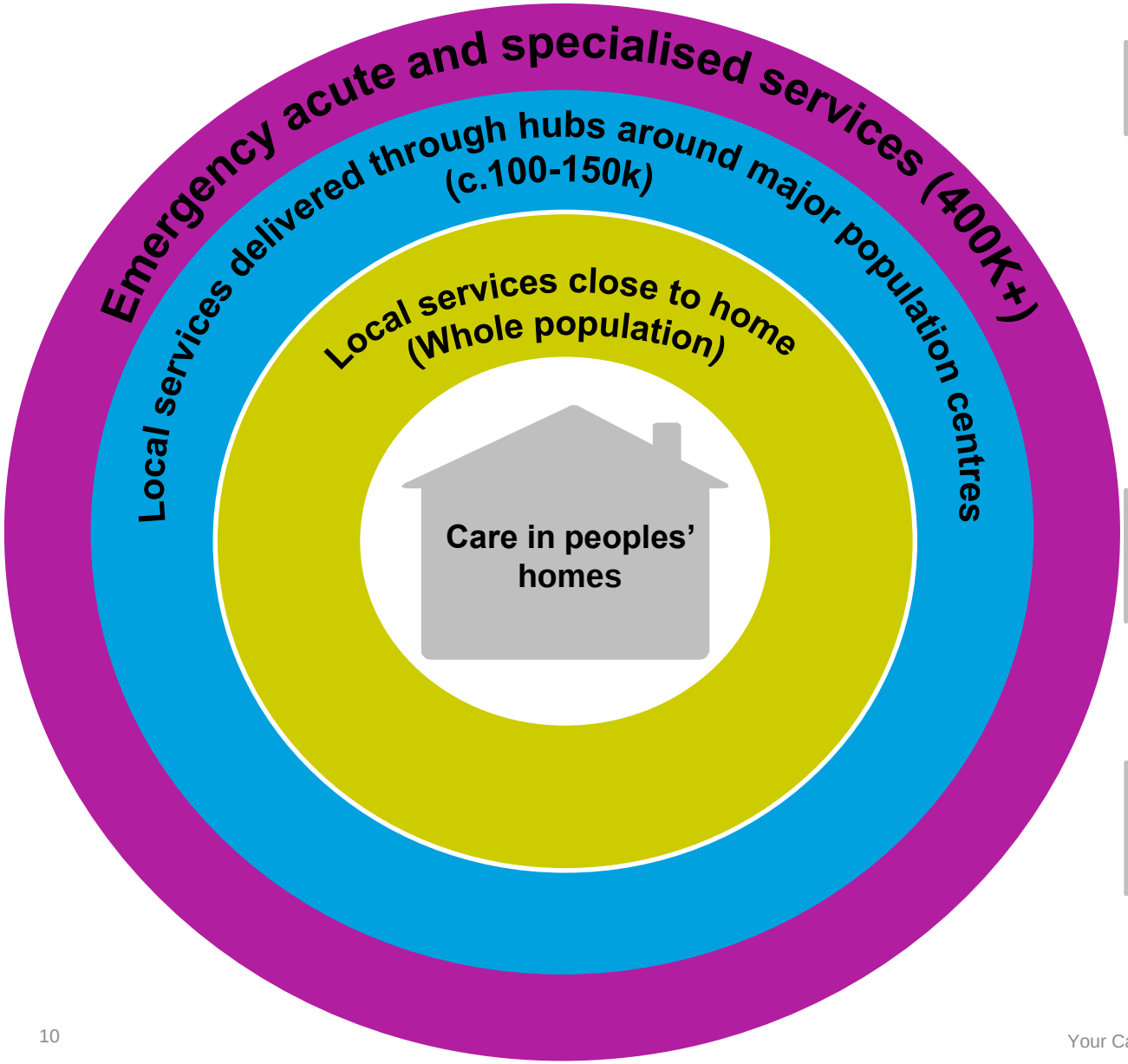
People know about specific risks they face and are supported to take positive steps to maintain health and wellbeing

People with early stage illness participate in structured care and support to reduce the progression of their illness

This is leading to developing proposals for the future that will look and feel different

- Greater emphasis on prevention and support to stay well.
- A foundation of joined-up services provided closer to people's homes – multi-specialty teams operating across clusters of GP practices to include a care navigator, district nurse, community care, specialist care, social care worker and community psychiatric nurse. Up to 40% care more local.
- Health and social care providers (including the third sector) will be better connected with each other. This will mean patients find it easier to access the right care and because information will be shared more effectively they won't have to repeat their story over and over.
- Some services will benefit from co-location in a physical space. The type and amount of services provided will be designed to meet the needs of the local population.
- Specialist services will be delivered to a population size of 400,000+. This will include things like vascular, acute stroke care and aspects of cancer and paediatric care.

The Future Model of Care – developing proposals



Health and care services delivered in peoples' homes

Communal spaces
Wellbeing services
Primary care
Pharmacy services

Therapy services
Imaging
Lab services
Clinical services
Urgent care services
Community beds

Emergency acute care
Specialist acute services
Planned care
Complex diagnostics
Specialist mental health

Outcomes

This will ensure improvements in patient's experience, quality and safety of care

Returning to normal function

- People are supported to return to their independence and fewer have a permanent disability
- More people return to their usual residence more quickly
- Fewer people are re-admitted or need additional long-term care
- More people die in their place of choice

Population prevention

- More people live healthy lives and have better life expectancy
- More people live in safe, clean accommodation
- More people are connected to their local community

Intervention

- More people have a positive experience of the intervention
- Harm and ward moves re minimised
- More people receive interventions that are more efficient and effective

Personal prevention

- People are more empowered and informed to make decisions about their health
- People are more motivated and supported to make changes to improve their lifestyle
- People are diagnosed earlier

Managing escalation

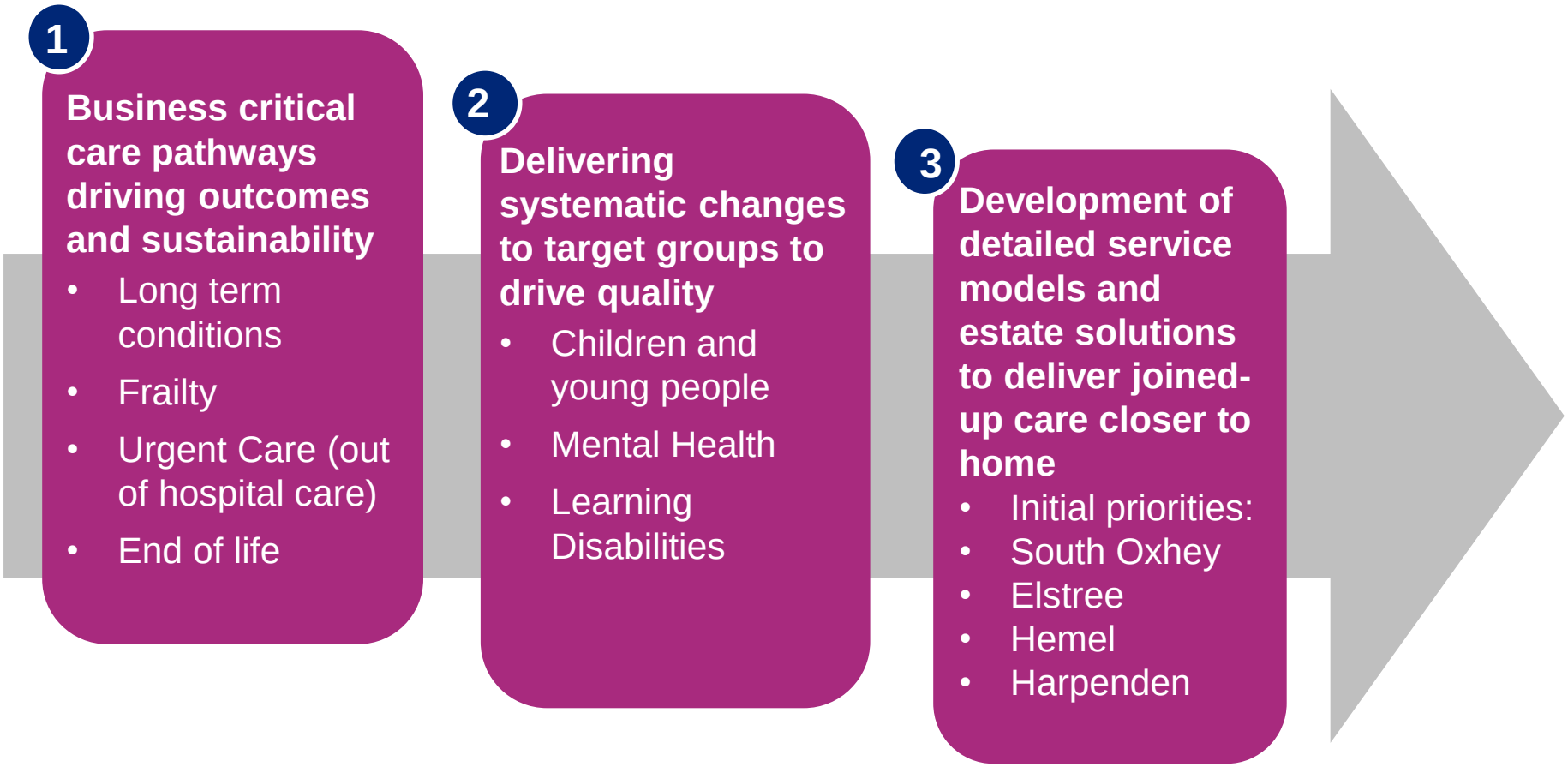
- People are more in control of their condition(s)
- Fewer people need to be admitted to hospital
- More people return to stability more quickly

Managing stability

- More people are living well with their condition(s)
- Fewer people have unnecessary complication and/or acute crisis
- People are less isolated and more involved in their local community

High impact programme areas

The diagram below illustrates the priorities to achieve West Hertfordshire's vision of a patient-centred, joined-up health and social care system which ensures the long term financial viability of West Hertfordshire's health and social care economy.



Underpinning the priority areas are enablers which will support the implementation phase. Enablers include workforce and OD, estates, IM&T and the continuation of the communication and engagement programme which has been key in the design phase.

How will acute services interact with the joined-up, care closer to home model?

In the future we want to…

- Deliver more effective prevention
- Join up care more effectively
- Maintain stability and prevent escalation to more acute levels of care
- Centralise and rationalise care that needs to be in modern facilities
- Deliver more care closer to home in localities

Future Model Of Care

To do this we will have

- Develop the role of the specialist
- Design the new interface between acute and community – joining up
- Develop and implement the long term condition model
- Consider which services are best delivered at scale in specialist centres…
- …and where to locate those bearing in mind current and future estate
- Consider which services are better delivered out of hospital in localities

Developing Acute Clinical and Site Strategy

Scenario 1	Consolidate all acute care services onto a single site at “another site”
Scenario 2	Consolidate all acute care services onto a single site at WGH
Scenario 3	Consolidate acute, emergency and specialised care services at WGH. Deliver the majority of planned care and complex diagnostics at SACH.
Scenario 4	Consolidate acute, emergency and specialised care services at WGH. Deliver the majority of planned care and complex diagnostics at HHH.
Scenario 5	Consolidate acute, emergency and specialised care services at WGH. Deliver the majority of planned care and complex diagnostics at “another site”.
Scenario 6	Consolidate acute, emergency and specialised care services at “another site”. Deliver the majority of planned care and complex diagnostics at WGH.
Scenario 7	Consolidate acute, emergency and specialised care services at “another site”. Deliver the majority of planned care and complex diagnostics at SACH.
Scenario 8	Consolidate acute, emergency and specialised care services at “another site”. Deliver the majority of planned care and complex diagnostics at HHH.

Next Steps

- **23 October 2015** – joint boards meeting to approve and adopt the Strategic Outline Case as the framework for service transformation over coming years. H&WB represented at this event.

- **October 2015 and beyond** – on-going engagement with local community, stakeholders, patients and carers on implementing joined-up services closer to people's homes.

- Developing networks of integrated care, close to home: develop multi-disciplinary implementation teams to design and develop local services relevant to local populations
- Acute care options: work up detailed business case and identify preferred option
- Refreshing programme governance to best enable implementation and factor into 2016+ commissioning plans

Your Care, Your Future

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Thank you

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