

Help us build a new NHS in south west London

Raynes Park Community Forum 1st December 2015



Why things need to change

1. Quality of care - All patients should get the best possible care, but the quality and safety of all our health services varies enormously and depends on where and when you are treated. This costs lives.

2. Changes in what patients need - People getting older and sicker - demand rising rapidly. Need much more care to be outside hospital.
3. Financial and workforce challenges - We do not have the money or staff to go on as we are, despite increased funding. There is a national shortage of clinicians in some key areas and we need to transform workforce..

4. We can provide better care with the same budget - compelling evidence that if we spend our money differently, we can get services that are both better and more affordable. (E.g. Stroke, major trauma, cardiac).

5. The need for joined up services - Patients need services that work together and across professional boundaries.

South West London Collaborative Commissioning

Meeting the challenge

- In June 2014 we published a 5 year strategic plan that sets out how to improve local health services Page 17
 - NHS England provided
 - guidance on the areas to focus on...
- From this, we developed 8 • work stream areas which we will be discussing today



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Work streams (1)



Transforming primary care



Out of Hospital



Urgent and emergency care



Children and young people's services

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Work streams (2)



Maternity Care



Planned care



Mental health



Cancer

Transforming primary care



Demand for primary care is increasing rapidly **90%** of healthcare work is carried out by GPs and other primary care professionals – for which they receive less than **10%** of NHS funding.

We need to do more work to help people live healthier lives.

Increasing the use of technology will create more capacity and be more convenient.

We need to make better use of NHS staff by enhancing the role of nurses, pharmacists and healthcare assistants.

Developing better out of hospital care



Patients stay in hospital longer than they want or need to because community services are not in place

The standard of care outside hospital varies enormously.

Too many people go to hospital when they could be treated in the community There needs to be better support in the community for people with long term conditions

We need to transform our workforce so more care can be delivered outside hospital.

Improving outcomes in urgent and emergency care



We do not meet all of the London Quality Standards for emergency care.

There are not enough senior doctors to meet these standards.

Services are hard to navigate so patients end up in A&E – especially out of hours and at weekends.

Hospitals must deliver round the clock care, led by senior doctors

We need to increase the capacity in urgent care services outside of hospital along with giving better information to patients about alternative services to A&E.

Improving outcomes in children's services



Children and young people often end up in hospital when they could be better looked after in the community.

Not enough senior children's doctors (senior doctor on children's wards seven days a week, minimum of 14 hours).

None of our hospital children's wards meet the minimum safety standards Children's services do not work closely enough together.

Childhood obesity is increasing across the UK and in south west London.

Improving outcomes in maternity and new born care



Women do not always get the support they need.

We do not meet the quality standards, and there are not enough maternity doctors to meet these standards.

We need more, and better quality, of maternity care. Birthing options like home births or midwife-led units are not as widely available as we would like.

The needs of women with chronic medical conditions are not always assessed early enough in their pregnancy.

Improving outcomes in planned care



We need to separate planned operations from emergencies Too many operations are cancelled because there is an emergency somewhere else in a hospital.

Specialists don't always get to carry out enough operations often enough, to develop their expertise to the very highest level.

Separating planned operations from emergency care might lead to a better system – with fewer cancellations.

Improving outcomes in mental health services



We need to focus much more effort on treating people as soon as they become unwell. Mental health services often treat people too late, meaning they have to be admitted to a mental health hospital.

Mental health services should be working more closely with GPs, local councils, mental health charities, acute hospitals and others to get people well and keep them out of hospital where possible.

Improving outcomes in cancer services



Greater focus on prevention and personalised care. Cancer is one of the major causes of premature death in south west London.

We do not always detect and treat cancer early enough.

Cancer patients are often treated in hospital when they could be better cared for in the community.

We need to focus on prevention of disease, early diagnosis and patient experience.

All this will mean big changes – but it will make services safer



Changes will be led by doctors, nurses, therapists and clinicians working in the NHS. The way health services are currently organised is very likely to change and this may mean changes to local hospitals, GP surgery, community services or mental health services.

There are not enough doctors to provide the required level of consultant care in all our hospitals, so we are talking to local hospitals about the best way to make sure we can meet these standards.

We aim to improve patient care within our existing budget.

What happens next?



You can keep in touch with developments or contact us with feedback about the Issues Paper at <u>www.swlccgs.nhs.uk</u> or follow @swlccgs on Twitter

- The six CCGs have been working together with NHS England on a long term plan to overcome the challenges we have set out today and to improve the quality of our services.
- We have published an issues paper to generate a dialogue with which will set out the challenges we have talked through today.
- We held six large-scale focus groups in each of the Boroughs in September to discuss the challenges in the Issues paper and we are also talking to local people about them. A report summarising the findings of the large scale focus groups has been published.
- If major service changes are proposed in the future, there will be a formal public consultation, but we are not at this stage.

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