

Transforming health and social care

in Kent and Medway

Updated November 2016





What's this about?

People in Kent and Medway need safe, high quality, integrated and sustainable health and social care services that meet their needs now and into the future. So the NHS, social care and public health in Kent and Medway are working together to plan how we will transform our services to meet the changing needs of local people. It is the first time we have all worked together in this way and it gives us a unique opportunity to bring about positive and genuine improvement in health and social care delivery over the next five years.

We need your help with this. Please see the end of this leaflet for details of how you can help shape services for the future.



How will our plan benefit you as someone who lives in Kent and Medway?

You can expect to see:

- **joined-up services** to treat and care for you at home and support you to leave hospital as soon as you're medically fit to leave: "your own bed is the best bed"
- **health and social care professionals** coming together to work as a single team for your local area, able to access your records 24 hours a day (with your consent)
- **a modern approach** to health and social care services using the best technology, from booking your appointment online to virtual (but secure) consultations, online assessment and diagnostic systems, and advice on apps to monitor your health
- **timely appointments** with the right professional
- **care for you as a whole**, for both your physical and mental health
- **regular monitoring** if you have complex health conditions affecting your physical or mental health, or both
- **more support** from voluntary and charitable organisations which already play such an important part in our communities
- **better access** to health improvement advice and services to help you improve and manage your own health and so reduce your risk of serious illness
- **"social prescribing"** - information to help you access relevant support from voluntary, charitable and local community groups or services
- **quality hospital care** when you need it – and more care, treatment and support out of hospital when you don't.



Currently, in Kent and Medway:

- **4,000 people** a year die early as the result of diseases which are mostly preventable¹
- **240,000 people** over 50 are living with long-term disability which could potentially be avoided or delayed²
- around **one in four people** in our hospital beds at any given time could be at home or cared for elsewhere. (This varies by area.) For older people this impacts on their recovery - 10 days in hospital (whether it is a main or community hospital) leads to the equivalent of 10 years' ageing in the muscles of people over 80.³

To help people make the most of their lives, we want to:

- prevent ill health
- help people with treatment and advice earlier
- have excellent care wherever it is delivered.

Working like this will also enable us to make better use of staff and funds to secure the long-term future of health and care services.



¹ such as lung cancer, heart disease and type 2 diabetes.

² the disability is largely as a result of health conditions which can often be avoided or delayed by lifestyle changes, such as being more active in everyday life.

³ this comes from a study by Kortebein P, Symons TB, Ferrando A, et al. (2008): Functional impact of 10 days of bed rest in healthy older adults.



So what is the plan?

We – the leaders of all the NHS organisations in Kent and Medway, and Kent County Council and Medway Council which plan and pay for public health and social care – have developed a draft Health and Social Care Sustainability and Transformation Plan (STP). It is based on what people have told us they want from services over recent years, and detailed work carried out by health and social care professionals to assess what will best meet people's needs. It sets out how we think services need to change over the next five years to achieve the right care for people for decades to come and to improve people's health and wellbeing.

It is a work in progress because we need to engage with you, the people who live and work in Kent and Medway, including frontline health and care professionals, so we can get it right.

The plan will provide:



Better health and wellbeing

We want to:

- create services which are able to meet the needs of our changing population, as people age, and more people move into Kent and Medway
- reduce health inequalities (unfair differences in health and life expectancy that people experience in some parts of the county) and death rates from preventable conditions
- increase services to prevent and manage long-term health conditions such as diabetes and lung disease.



Better standards of care

We want to:

- make sure people are cared for in the right place and get high quality, accessible social care across Kent and Medway
- reduce attendances at Accident and Emergency departments, and emergency admissions to hospital beds

- make sure local providers of health and social care deliver high quality services, which meet nationally recognised clinical quality standards.



Better use of staff and funds

We want to:

- attract, retain and grow a talented workforce – and use them to the best effect
- consolidate some of our specialist clinical staff and equipment so they can work more effectively across a wide population as expert teams
- work within the budget we have for health and social care across Kent and Medway.

Across this area, the NHS and social care have £3.4billion in funding but overspent by £141million last year. Without change, we would be looking at a gap of £486million in our budgets by 2020/21.

We have identified key priorities for the transformation of care:



Prevention of ill-health



Local care



Hospital care



Mental health



Prevention

everyone has a part to play

A number of the health problems people face in Kent and Medway are preventable, and sometimes small changes can make a big difference. We are enlisting the whole Kent and Medway community in improving health and wellbeing so people stay well, look after each other, and use services only when they need to.

Our prevention programme will:

- treat both physical and mental health issues at the same time and effectively

- concentrate prevention activities on key areas – obesity and physical activity, reducing alcohol-related harm, preventing and stopping smoking
- deliver workplace health initiatives, aimed at improving the health of staff delivering services.



Local care

better access to care and support in people's own communities

GPs, nurses, therapists, social care workers, mental health staff and urgent care staff in Kent and Medway are already looking at how they can work together across towns and rural areas so that you can get the care you need at home and in your community wherever possible, reducing the need for you to go to hospital.

People with long-term health problems and disabilities have told us they want:

- to have all their needs and what works for them taken into account
- co-ordinated support given by professionals who talk and work together
- to tell their story once and have easy, co-ordinated, access to services.

The aim is for you to be supported by a single team of health and social care professionals, with GP leadership, which treats your physical and mental health needs, seven days a week. And helps you take control if you have a long-term health problem, so you are expert at managing your own health.

The table on the next page shows the number of teams (called extended practices) each area expects to have: three in the Ashford area, five in the Canterbury and Coastal area, and so on. GP practices within these teams will work together, to share expertise and to enable them to provide a range of different services for people seven days a week. Community, mental health, social care and other staff will be “wrapped around” the practices to form “place-based” teams, focused on working together to care for the patients in that place.

This integrated approach will enable GPs, nurses, therapists and others to spend more time on looking after frail patients, people with complex needs including mental health needs, and patients at the end of their lives.

We also intend for every part of Kent and Medway to have access to more specialist and out of hours services, provided by a hub.

The services provided could be:

- outpatient appointments with a GP who specialises in treating a particular health problem, a highly trained nurse or a consultant – either in person or via your phone or your computer
- minor injuries units where clinicians can see and treat a range of conditions, such as suspected fractures of arms and lower legs, sprains and strains, wound infections, minor burns, bites and stings
- mental health screening and assessment
- dementia diagnosis
- end of life care
- social care.

	Ashford	Canterbury & Coastal	DG&S	Medway	Thanet	Swale	South Kent Coast	West Kent
Population	129,000	220,000	261,000	295,000	144,000	110,000	202,000	479,000
No. GP practices	14	21	34	53	17	19	30	62
Average list size	9,200	10,500	7,700	5,600	8,500	5,800	6,700	7,700
Extended practices	3	5	TBC	9	4	TBC	4	9
Population	30-60k	30-60k	20-40k	30k	30-60k	20-40k	30-60k	TBC
Hubs	1	1	5	3	1	2	1	3-5
Population	129,000	220,000	50k	100k	144,000	50k	202,000	TBC

Note 1: "hub" is used in two ways – in east Kent, it means the organisation that will purchase and provide the full range of local care (irrespective of where that care is provided). In the rest of Kent and Medway, it means the building from which more specialist and out of hours services will be provided, such as a community hospital.

Note 2: This table sets out emerging ideas. TBC means there is not yet a view of how many teams there will be in a CCG area, or how many people each team or hub will serve.

Next steps on local care

We want to:

- enable all health and social care professionals to be able to access your health records in one place, 24 hours a day when they need to (with your consent)
- use anonymous information from the whole of Kent and Medway health and social care, looking at it for the first time as a whole, to improve planning and care delivery
- work towards pooling of budgets and staff from different organisations and break down barriers to integrated health and social care, and community-based and hospital care
- maximise co-location of staff and the best use of our buildings.



Hospital care

in a community, mental health or acute (main) hospital

We will provide hospital care when it is needed and ensure it is of the best possible quality, whether it is in a community, mental health or acute (main) hospital. At the moment, around 25 per cent of the beds in our main hospitals (this varies by area) are occupied by people who could be better treated in their homes or local communities. Our plan is to make sure local care facilities and support are in place so we can reduce the total number of beds in our main hospitals by 10 per cent and reorganise the way services are provided. By doing this we believe people will get the best possible care and we will be able to reduce some of the high costs associated with hospital-based care. We will use the same money to strengthen access to care and support in people's own communities.

Stroke and vascular reviews

Someone who has just had a stroke needs treatment in a highly specialist stroke unit where they get rapid access to first class diagnostics, specialist assessment and intervention, seven days a week. This saves lives and reduces disability.

Reviews of stroke services in Kent and Medway and vascular procedures (for artery and vein problems) are already underway and will continue as part of our plan. We expect to carry out a public consultation next summer. More information about the reviews is available on the clinical commissioning group (CCG) websites – details are at the end of this leaflet.

Separating planned and unplanned care

We are also exploring the idea of creating specialist centres for planned surgery such as hip and knee replacements to separate these services from emergency care. Experience from other parts of the country shows this can significantly improve care for patients, including speeding up how quickly they get the operation they need, and reducing the risk of cancellations because of surgeons being called away to operate on emergency patients.

Enhancing recovery

We are learning from each other and from best practice round the country – particularly a programme known as NHS RightCare – about how we can reduce complications from surgery or other planned treatment so you get a better result, needing less time in hospital, and less follow-up.



Next steps on hospital care

East Kent health and social care leaders have been working together as the East Kent Strategy Board since September 2015, to determine how best to provide health and social care services to the population of east Kent. This programme, which is now part of the Kent and Medway STP, has carried out engagement with local people, councils, MPs and other stakeholders, and frontline professionals.

Building on this work, we have looked at a number of options and, making sure we enhance local care closer to people's homes as described above, we now want to explore the creation in east Kent of:

- one emergency hospital centre with specialist services, including planned care
- one emergency hospital centre, including planned care
- one planned care hospital centre focusing on planned inpatient orthopaedic surgery or treatment, supported by rehabilitation services, and a GP-led urgent care centre
- all supported by strong local care (the care and support people can get in their own communities).

The main hospitals in east Kent already work in different ways. For example, there are Accident and Emergency departments at the hospitals in Margate and Ashford, and

an Urgent Care Centre at Canterbury; acute general surgery is based at Margate and Ashford, and some of the hospitals provide a service for the whole of Kent and Medway, for example, specialist cardiology at Ashford.

In the rest of Kent and Medway, Medway NHS Foundation Trust and Maidstone and Tunbridge Wells NHS Trust have agreed to complete by the end of 2016:

- a strategy for development of acute (main) hospital services
- a strategy for planned care.

Without merger or acquisition, Dartford and Gravesham NHS Trust and Guy's and St Thomas' NHS Foundation Trust are working together to develop a model of care locally that will improve outcomes for patients, meet the challenges of increased demand and reduce costs. They have been selected to work together as a pilot site called the Foundation Healthcare Group, sharing information, knowledge and building new networks to enhance care in a way that can be replicated elsewhere.



Mental health just as important as physical health

Mental health will be an integral part of local care. In addition we have several specific schemes to improve care including:

- a single phone number for people in Kent and Medway in a mental health crisis
- reducing to zero the number of people placed in private mental health beds out of county
- bringing back to Kent and Medway as many people as possible placed out-of-area for specialist care
- improving interventions for people experiencing psychosis for the first time
- improving care for children and young people with mental health and emotional wellbeing issues.



Greater efficiency through smarter working

In addition, we are looking to become more efficient by sharing services. These include a shared pathology service (which tests blood and cells) and looking at how we can make better use of our buildings by sharing space. And we want to develop computer systems that all parts of the health and social care network can use (your consent will be sought if this involves looking at your records).

The organisations which commission (plan and purchase care) are also planning to develop arrangements that enable health and social care commissioning at a strategic level across Kent and Medway.

How will the STP help us do better with the resources we have?

The draft STP maps out how, by improving care for patients, being more efficient and providing higher quality services, we can make better use of our staff and money so we can meet rising demand.

If we do nothing, patients will not get the best care, people's health and wellbeing will not improve, and we will be looking at a hole of £486million in our budgets by 2020/21.

We intend to invest millions more every year in local care to enable the improvements to people's care outlined above. We believe this will release around £165million currently spent on hospital care, though this is still work in progress and forms part of the work we want to engage on with you.

Commissioners and providers will continue to manage services in the most cost-effective way. For the NHS, this means continuing with our routine cost improvement programmes and our drive to improve quality, innovation, productivity and prevention. By working in new and different ways, we think we can reduce costs by £292million.

We expect to be in balance by 2020/21 apart from £29million, which is the expected annual cost of the health services required by the population of the new town at Ebbsfleet. We will be bidding for additional funds for this.

Background information

Our plan for Kent and Medway builds on good work already undertaken. To find out more, visit

- www.eastkent.nhs.uk to read Better health and care in east Kent: time to change
- www.westkentmappingthefuture.nhs.uk
- <http://consultations.kent.gov.uk/consult.ti/adultstrategy/consultationHome>





Have your say

The STP will bring about a profound shift in where and how we deliver care. Our draft plan builds on conversations held with local people over several years about the care they want and need, and has the patient at its heart.

A Clinical Board, which includes local GPs, hospital doctors and senior social care practitioners, is overseeing development of the plans for prevention, local care, hospital care and mental health. They will ensure these plans are underpinned by professionals' knowledge and expertise.

We are also setting up formal groups – including a Partnership Board and a Patient and Public Advisory Group – to test and discuss the programme with us. We expect to produce a more detailed case for change early next year.

We recognise that people's needs are different across Kent and Medway. Our proposals for the future, which will be based on the thinking outlined in this document, will take this into account.

That's why it is so important that you have your say at every stage, to shape the services available to you.

In the New Year, along with more detailed information about the STP, we will publish a timetable for engaging with the public in Kent and Medway in 2017. In the meantime, we ask you to help us shape our ideas and plans by filling in this survey, which closes on 23 December 2016:

www.surveymonkey.co.uk/r/KandMstp

You can also access the survey via the website of your local clinical commissioning group (see below) where you will also find more information about how you can get involved. Many CCGs have health networks which you can join to get a regular update.

www.ashfordccg.nhs.uk Ashford, Tenterden and rural area

www.canterburycoastalccg.nhs.uk Canterbury, Faversham, Herne Bay, Sandwich and Ash, Whitstable

www.dartfordgraveshamswanleyccg.nhs.uk the boroughs of Dartford and Gravesham and the northern part of Sevenoaks district including Swanley town

www.medwayccg.nhs.uk Medway Council area

www.southkentcoastccg.nhs.uk Deal, Dover and the district of Shepway, including Folkestone and Romney Marsh

www.swaleccg.nhs.uk Sittingbourne, Sheppey and surrounding villages

www.thanetccg.nhs.uk the district of Thanet

www.westkentccg.nhs.uk the boroughs of Maidstone, Tonbridge and Malling and Tunbridge Wells, and the southern part of Sevenoaks district