



Our five year forward plan for south west London

Start well, live well, age well

*Croydon, Kingston, Merton, Richmond, Sutton and Wandsworth NHS Clinical Commissioning Groups and NHS England
‘Working together to improve the quality of care in South West London’*

About our five year forward plan

- Following the NHS Five Year Forward View, all regions of the NHS in England are required to produce five year Sustainability and Transformation Plans (STP)
- Our plan is the product of genuine collaboration between all NHS commissioners and providers in SW London, working with our six local authorities and GP federations
- An initial draft was submitted to NHS England on 30 June
- STP will be published following assurance and further public and stakeholder engagement will take place.
- Should any proposals emerge for significant service change – this will be subject to formal public consultation

We are clear about the challenges we face

- A life expectancy gap
- Our population is growing and ageing
- Services in SWL are not set up to achieve this.
- Quality of care varies enormously across SWL depending on where and when patients access services
- None of our acute hospitals meet all of the London Quality Standards for acute urgent and emergency care
- As a result of these pressures, the cost of providing care are rising far quicker than inflation and the money we are allocated

Our draft plan suggests we should:

- Set up locality teams across south west London
- Address both mental and physical needs in an integrated way
- Introduce new technologies to deliver better patient care
- Use our workforce differently
- Review our acute hospitals



Summary of suggested changes

Start well, live well, age well

Prevention and early intervention

- We need to better support people to live healthy, active and independent lives for as long as possible
- Where people do get ill, we need to ensure they are diagnosed and supported at an early stage
- Mental and physical health issues must go hand in hand
- We need to do more to identify people at risk of developing long term conditions
- Much closer work between the NHS and local authorities is critical to supporting the prevention agenda

Transforming access to outpatients

- We want to deliver more consistent outpatients services
- We aim to stop unnecessary follow-up appointments
- We want to reduce variation between GP practices
- Better use of technology
- More community-based clinics

Primary care

- Locality teams
- Commitment to accessible, coordinated and proactive primary care
- Investment in primary care will be higher than baseline core contract allocations
- Community Education Provider Networks (CEPNs) to deliver a range of training to practice staff
- GP federations: 6 established and have formed a collaborative

Acute hospital services

- We want to improve quality and optimise our workforce
- NHS England has announced a review of specialised services in south London
- Demand for services is likely to increase by 2020/21
- All our hospitals have areas of estate that need improvement and investment
- Potential scenarios for configuration of acute sites

Estates

- Fundamental change is needed in the way we manage SWL health and social care estate
- 20 multi-specialty community hubs across South West London
- Future acute estate will depend on bed audit/bed volumes, future configuration and review of specialised services
- We are working with local authorities and across the local NHS to develop an Estates Strategy for south west London

Workforce

- We need to develop our health and social care workforce
- National shortage of qualified staff such as GPs, nurses and paediatricians.
- Four core priorities to develop our workforce:
 - Securing sustainable workforce and improving recruitment and retention
 - Capacity and skill mix
 - Working differently
 - A healthy workforce
- Education and training is a key enabler running across all priorities.

Delivering an information revolution

- Technology is a critical enabler for many of the recommendations set out in our draft plan.
- Self-care for patients can be supported by digital technology
- Technology can help clinicians get rapid specialist input when needed
- Information sharing

Closing our financial gap

- By organising services better and delivering the initiatives set out in our plan, we can close our financial gap with **no reduction in the quality of care**
- Programmes to increase acute provider productivity by sharing non-clinical 'back office' functions are underway
- CCGs have also identified that they can make significant savings by working together more closely
- Pharmacy teams across SWL are working together to identify opportunities for medicines-related savings

Involving local people

- We published an Issues Paper in 2014
- In May, we wrote to over 1,000 local voluntary, community and campaigning organisations in SWL setting out our emerging thinking and asking for their views
- We will produce regular 'You Said We Did' reports summarising feedback received and our response
- We plan further public events later in 2016, where we will discuss the content of our draft plan and seek people's views
- We are running a large grassroots engagement programme with local Health watch organisations
- Patients and the public are directly involved in each of our clinical workstreams

Our plan for the next six months

- Once national assurance is complete, the final plan will be published and further public engagement will take place
- We anticipate a series of public events in the autumn
- Should any proposals emerge that require public consultation we would envisage this would take place in late 2017
- A number of plans are already underway
- Further modelling work, further information and further public engagement will be needed before we can finalise our strategy.