

# The North West London health and care partnership



# The North West London health and care partnership

## Introduction

In 2016, over 30 NHS organisations and local authorities came together to develop and agree a [plan](#)\* for health and social care across North West London.

This was our joint response to improve the physical and mental health of all our residents and meet the quality, demand and financial challenges we face today across the health and social care system.

Having the NHS and local authorities working properly together as a single health and care system will remove the snags that often build delays, confusion and frustration into your care. It also means we can run our services more efficiently, freeing up more time and money to keep you well and treat you well.

\*Sustainability & Transformation Plan published October 2016

## Our plan is simple

We will invest more in preventing illness, in more GPs, into more care you can get in or close to your home. Basically, we want to try and keep you out of hospital if we can.

If you do need hospital treatment, we will make sure you see the right experts at the right time in the right place. This will mean you get home again safe and well, as quickly as possible.

Our partnership is working hard to put in place the health and care improvements in our plan by April 2021.

## Moving forward together

To deliver our plan, the partnership is focusing on five areas:

- improving health and wellbeing
- better care for people with long-term conditions
- better care for older people
- improving mental health services
- safe, high quality and sustainable hospital services.

You can read more about these five areas in the rest of this guide ([link](#))

## What happens now

Our staff are already working together to make improvements. NHS and council colleagues are joining-up efforts to prevent illness, to improve care for diabetics and people with mental health needs. Teams are working hard to provide services in more convenient locations in local communities, and give older people a better experience. Other staff are helping to recruit and retain the professionals we need, to use our resources more effectively, and modernise our IT systems. These are all part of the plan.

Making improvements will sometimes mean changes to how you currently use services. Some changes will make it easier for you to get care more quickly and more conveniently. Other changes are needed so our staff can work better together, to always meet the highest standards of care, and get the most out of new treatments and technology.

As always, rigorous checks will take place before and after any new service starts, or we move or change an existing service. This makes sure you are getting the promised improvements and benefits before any permanent changes are made. More information is available on our [website](http://www.healthiernorthwestlondon.nhs.uk) - [www.healthiernorthwestlondon.nhs.uk](http://www.healthiernorthwestlondon.nhs.uk)

We will continue to update you on progress. We also ask that you get involved, have your say and help us shape improvements to your care.

## The NW London health and care partnership

The NW London health and care partnership is made up of over 30 NHS and local authority organisations. Between us, we plan, buy and provide health and care services for more than two million local residents across eight boroughs, spending around £4bn per year.

There are 400 GP practices, ten hospitals and four mental health and community health trusts across the eight boroughs.

## What happens now

To implement the plan, the NW London health and care partnership has chosen to focus on five areas which will make the biggest positive impact on your health, and the way we run our health and care services. These areas are:

- 1. Improving your health and wellbeing**
- 2. Better care for people with long-term conditions**
- 3. Better care for older people**
- 4. Improving mental health**
- 5. Safe, high quality and sustainable hospital services**

# Overview: Improving your health and wellbeing

To improve health and wellbeing, the North West London health and care partnership is working together on these priorities:

## Supporting local people to live healthier lives

Support all residents to live longer and healthier lives by preventing illness and promoting physical and mental wellbeing

## Promoting mental wellbeing and reducing loneliness

Support individuals to have the best possible mental health as an active member of their community

## Giving children the best start

Support vulnerable families to improve their children's life chances and reduce likelihood of needing longer-term mental health support.

## Roll out of the national Making Every Contact Counts programme

Train relevant non-specialist staff to have helpful health and wellbeing conversations with public, patients and families.

- Only half of NW London's residents take the recommended amount of physical activity per week and around one-in-seven smoke
- six of the eight boroughs in NW London have higher harmful drinking rates than the London average
- getting someone with an addiction into work boosts their financial independence, confidence and self-esteem and plays a key role in supporting recovery
- across NW London, one in three children do not reach a satisfactory level of development by reception year, and children who are not 'ready for school' are likely to struggle with social skills, reading, maths and physical skills
- stopping smoking, improving diet, increasing physical activity, losing weight and reducing alcohol consumption all help people to live well for longer.

# Overview: Better care for people with long term conditions

To improve care for people with long-term conditions, the North West London health and care partnership is working together on these priorities:

## Investment and support for GPs and their teams

Increase investment and support for GPs and their teams to provide more access and proactive and coordinated care for their local communities.

## Saving lives through improved cancer screening

Detect and treat cancer earlier through proactive contact of people at highest risk, encourage more people to be screened, and invest in the latest technology.

## Long-term conditions and mental health

Improve support for people with long-term physical illnesses and depression or anxiety.

## Providing the right care every time to prevent serious illness

Cut the risk of NW London residents developing a long-term illness through consistent, proactive and coordinated care, with diabetes and high-blood pressure as early priorities.

## Supporting people to take control of their own health

Support people with long-term conditions to be confident to manage their own health and take as much control as possible.

- Since April 2017, GPs across NW London have offered consultations from 8am-8pm
- across NW London, three people die early every day because of diabetes
- people who are confident in managing their own health have a better quality of life and fewer unnecessary overnight stays in hospital
- almost a quarter of million people in North West London will experience a common mental health need – like depression, anxiety or post-traumatic stress.

# Overview: Better care for older people

To improve care for older people, the North West London health and care partnership is working together on these priorities:

## Getting the whole health and care system working together for older people

Proactive and coordinated health and social care services supporting older people in their homes and in hospital.

## Home from hospital

Make sure people return home as soon as they no longer need hospital care, with the right support in place.

## Last phase of life

Make sure health and care staff are aware of and respect people's wishes during their last phase of life.

## Commissioning high-quality and effective care for older people

NHS and local authorities will work together to plan and buy the highest quality, most effective and best-value care for older people in their local communities.

- By 2032, there will be a 40 per cent increase in people aged 65 and over
- the NHS spends three times more on caring for a 75 year-old than a thirty year old, and this increases to five times more for over 80s

# Overview: Improving mental health services

To improve the experience and lives of people with mental health needs, the North West London health and care partnership is working together on these priorities:

## Supporting adults with serious and long-term mental health needs

Increase proactive community support for people with serious and long-term mental health needs, and improve their physical health to help them live full and healthy lives in their communities.

## Targeted support for specific groups of people

Tailor mental health support for specific groups of people, including new mothers and people with learning disabilities

## Crisis care

Work with police, hospitals, ambulance service, GPs and local authorities to improve care for people experiencing a mental health crisis.

## Children and young people

Make it easier for children, young people and their families to access mental health support, when and where they need it.

- One in four people will experience a recognised mental health illness each year
- in NW London, there are between 31,000-37,500 people with serious and long term mental health needs
- depression affects many thousands of new mothers across NW London and tragically, suicide remains a leading cause of death for expecting and new mothers.
- 25-40 per cent of people with learning disabilities have mental health needs and levels of schizophrenia in this group are three times that of the general population
- three in four lifetime mental health disorders start before the age of 18
- Healthwatch England named mental health as the biggest public concern for 2016

# Overview: Safe, high quality and sustainable hospital services

To provide safe, high quality and sustainable hospital services, the North West London health and care partnership is working together on these priorities:

## Improving commissioning of specialised services

Support NW London's hospitals to provide the most efficient and effective services to treat rare illnesses and disorders.

## Getting hospital patients better, quicker

Make sure all hospital patients get the right tests, expert advice and treatment as soon as possible, every day of the week.

## Organising hospital services

Continue to improve, adapt and organise community and hospital services to achieve high quality standards for patients, based on latest clinical evidence and expertise.

## Hospital productivity programme

Make sure our hospitals run as efficiently and effectively as possible to make the best use of NHS expertise, drive out waste, drive up quality and free up more resources for front line services.

- Latest King's Fund polling shows public satisfaction with outpatient services was 68 per cent and 60 per cent for stays in hospital



# Improving your health and wellbeing

## SUPPORTING LOCAL PEOPLE TO LIVE HEALTHIER LIVES

Support all residents to live longer and healthier lives by preventing illness and promoting physical and mental wellbeing

### Delivery date:

- By April 2021

### To do this we will:

- join up health, council and voluntary sector services across our boroughs to provide the most effective support
- take earlier action to make a bigger impact
- focus on reducing harmful drinking as an early priority.

### It is better for people because:

- preventing illness, by stopping smoking for example, is the best way to stay healthy
- people can rely on faster, joined-up support in their community
- reducing harmful drinking and unhealthy lifestyles means healthier lives and reduced impact on family, employment and mental health

### It is better for the health and care system because:

- keeping people healthy leads to less demand on services and more time to spend with sicker patients
- joining up services means resources and expertise will be used more effectively
- reducing harmful drinking will reduce pressure in A&E and see fewer people needing unplanned overnight stays in hospital.

### Key facts:

- only half our residents are physically active and up to one-in-four are obese
- over 300,000 people in NW London drink more than the recommended weekly units of alcohol – harmful drinking is a major factor in increasing risk of disease and early death
- around one in seven adults in NW London still smokes.

### Expected outcomes:

- reduction in harmful lifestyle behaviour for all residents in NW London.

# Improving your health and wellbeing

## PROMOTING MENTAL WELLBEING AND REDUCING LONELINESS

Support individuals to have the best possible mental health as an active member of their community

### Delivery date:

- By April 2021

### To do this we will:

- promote mental wellbeing in local communities and workplaces
- join up services so individuals benefit from coordinated support
- focus as an early priority on supporting people with mental health needs or substance misuse issues to find and stay in work

### It is better for people because:

- better mental health helps promote better physical health and better life chances
- being an active part of a community supports mental wellbeing
- being employed is good for physical and mental health.

### It is better for the health and care system because:

- people with serious and long term mental health needs who are in work, are less likely to need NHS care than those who are unemployed
- better mental wellbeing can mean better physical health, reducing demand on services
- being in work reduces demand on health and social care resources and unemployment benefits

### Key facts:

- 317,000 residents of NW London have a common mental health illness
- over 150,000 people over the age of 65 live alone in NW London
- mild to moderate mental health problems are the most common causes of health-related unemployment.

### Expected outcomes:

- job coaches to become part of frontline services in all boroughs, helping over 900 people each year

# Improving your health and wellbeing

## GIVING CHILDREN THE BEST SUPPORT

Support vulnerable families to improve life chances of their children and reduce likelihood of needing longer-term mental health support.

### Delivery date:

- July 2018

### To do this we will:

- train frontline staff, such as health visitors and school nurses, to identify children showing signs of behavioural disorders and be able to refer children and family members for expert support
- train primary school teachers and teaching assistants to run courses for parents to provide them with advice and skills to help families manage challenging behaviour.

### It is better for people because:

- early action means children and families can benefit from support to reduce the impact of challenging behaviour
- children who are helped earlier do better at school, are healthier and are less likely to come into contact with the criminal justice system later in life
- parents will have extra skills and support to build stronger relationships with their children
- teachers and assistants will have additional skills to better manage behaviour that challenges in the classroom, freeing up more time for teaching.

### It is better for the health and care system because:

- early action will mean less demand for children's mental health services to respond to conduct disorder or similar behaviour
- there will be less stress-related illness for families and health professionals
- our action means less pressure on other health services in future as fewer children will develop further health problems because of behavioural issues.

### Key facts:

- challenging behaviour, sometimes known as conduct disorder, is the most common mental health issue in childhood and adolescence, affecting one-in-20 of children aged five-15
- conduct disorder causes disruption to families and creates demand on a number of public services, including child and adolescent mental health services, the wider health and social care systems, education (particularly special-needs education), and the criminal justice system
- conduct disorder in childhood is associated with worse outcomes in adult life, including increased rates of mental illness, unemployment and criminal activity.

## Expected outcomes:

- frontline staff trained to promote positive mental health in children and young people, identify early signs and symptoms of mental health problems, and are aware of how to refer parents and families for expert support
- parents of children at high risk of developing conduct disorder receive high quality parent training
- improvement in the behaviour of children with early signs and symptoms of conduct disorder.

# Improving your health and wellbeing

## ROLL OUT OF NATIONAL MAKING EVERY CONTACT COUNTS PROGRAMME

Train relevant non-specialist staff to have helpful health and wellbeing conversations with public, patients and families.

### Delivery date:

- 31 March 2018

### To do this we will:

- train 2000 frontline NHS, local authority and voluntary sector staff on the best way to take opportunities to speak to residents and patients about health and wellbeing
- train staff to train others across our eight boroughs to increase impact
- encourage all NHS, local authority and voluntary sector organisations to make it 'business as usual' for staff to be able to have a chat and make difference.

### It is better for people because:

- they will get even earlier health and wellbeing advice and signposting to helpful services
- people will get more encouragement locally to seek advice and support, rather than relying on GP or hospital appointments
- prevention is better than cure – people will have a better quality of life if health and wellbeing issues are tackled earlier.

### It is better for the health and care system because:

- tackling health and wellbeing issues early will mean less pressure on GPs and hospital services
- frontline staff will be better equipped to help and support members of the public, making a real difference even when they're not clinically trained
- advice and support can help drive down lifestyle related illnesses like obesity, heart disease and type 2 diabetes.

### Expected outcomes:

- health promotion becomes part of day-to-day work for staff across public, voluntary and community, and private sectors
- more people attending lifestyle services such as smoking cessation, alcohol misuse, weight management services, and community activities
- reduced admissions due to lifestyle associated conditions (like heart disease and diabetes)
- improved health and wellbeing of NW London workforce.

# Better care for people with long-term conditions

## INVESTMENT AND SUPPORT FOR GPs AND THEIR TEAMS

### *(delivering the national GP Forward View)*

Increase investment and support for GPs and their teams to provide more access, proactive and coordinated care for their local communities.

#### Delivery date:

- By April 2021

#### To do this we will:

- support the use of online and other ways of speaking to a GP and their team so people have more access to the right support at the right time
- recruit and retain GPs and a skilled workforce to support local communities
- encourage GPs to work together in networks or larger premises so they have more cover, can share expertise and offer a wider range of services, including pharmacists.

#### It is better for people because:

- individuals and carers will get faster access to a GP or their team, more hours a day
- people will have more convenient ways to see or speak with a GP and their team
- people with one or more complex illnesses will benefit from more join-up between their GP, social care and hospitals.

#### It is better for the health and care system because:

- expertise and resources will be used more effectively
- GPs will have more time to spend with patients who need it the most
- fewer people will need to visit hospital for urgent care.

#### Key facts:

- timely access to a GP is usually the top public concern when asked about the NHS
- GP practices in NW London now offer extended opening weekday hours (8am-8pm) and weekend access to over a million people
- NW London has over 400 GP practices, but many of them are run by single GPs.

#### Expected outcomes:

- DELIVERED: increased 8am-8pm weekday access to a GP
- fewer people having to visit A&E to get help, advice and care
- people get proactive support to prevent, stop or slow illness
- increased staff satisfaction

# Better care for people with long-term conditions

## SAVING LIVES THROUGH IMPROVED CANCER SCREENING

Detect and treat cancer earlier through proactive contact of people at highest risk, encourage more people to be screened, and invest in the latest technology.

### Delivery date:

- By April 2021

### To do this we will:

- support GPs to screen more people to detect cancers earlier, prioritising prostate, lung, bowel and colon cancers
- make sure every cancer patient gets a fully coordinated recovery package of assessment, advice, and care to improve results for people living with and after cancer
- provide targeted and effective follow-up for all cancer patients to identify any issues as early as possible.

### It is better for people because:

- more cancers, particularly the most difficult to detect, will be caught earlier which will save lives
- people will get scans and other test results quicker, reducing worry and speeding up treatment
- this will improve cancer survival rates and the overall experience.

### It is better for the health and care system because:

- fewer people will be diagnosed in the later stages of cancer
- best practice standards will be achieved through closer working, better use of IT, data and research, and sharing expertise
- resources, expertise and innovative technology will be used more effectively, saving more lives and improving performance on key cancer standards.

### Key facts:

- fifty per cent of people born after 1960 will be diagnosed with cancer
- prostate, lung, bowel and colon cancer account for around a third of all cancers in NW London
- prostate, lung, bowel and colon cancer are some of the hardest to diagnose, and make up over half of all cancers discovered when people arrive in hospital as an emergency.

### **Expected outcomes:**

- more people will be proactively screened for cancer
- fewer people diagnosed in later stages of cancer in A&E departments
- more people surviving or living longer after being diagnosed with cancer
- increase in satisfaction with patient, family and carer experience.



# Better care for people with long-term conditions

## LONG-TERM CONDITIONS AND MENTAL HEALTH

Improve support for people with long-term physical illnesses and depression or anxiety.

### Delivery date:

- By April 2021

### To do this we will:

- train more psychological therapists to work in local communities and hospitals to help people with long term physical health conditions
- support teams to work together to identify more people who will benefit most from psychological therapies
- identify earlier those most at risk of poor mental health and offer a broader range of support.

### It is better for people because:

- better support and treatment will improve people's mental and physical wellbeing and quality of life
- taking more control of their health means more independence, more employment opportunities and fuller lives
- joining-up services will make people's treatment more effective.

### It is better for the health and care system because:

- more people will be treated and more effectively
- there will be less demand for emergency care
- more people will be supported to have longer, happier and healthier lives.

### Key facts:

- around one-in-three people with a long-term condition have a mental health need, but this often goes unnoticed and un-treated
- nearly 150,000 people in NW London have a long-term illness and mental health needs
- almost half of people with mental health needs also have a long-term physical illness.

### Expected outcomes:

- better and earlier identification of people with long-term illnesses and mental health needs
- improved access to psychological therapies, especially for older people and people with diabetes
- a fully skilled workforce able to support the emotional wellbeing of people with long-term physical ill-health.

### Evidence:

- studies suggest that collaborative working between mental and physical healthcare professionals leads to improved outcomes, especially for diabetes and lung disease, with the additional cost of extra psychological support off-set by savings from reduced need for physical health care.

# Better care for people with long-term conditions

## PROVIDING THE RIGHT CARE EVERY TIME TO PREVENT SERIOUS ILLNESS

Cut the risk of NW London residents developing a long-term illness through consistent, proactive and coordinated care, with diabetes and high-blood pressure as early priorities.

### Delivery date:

- By April 2021

### To do this we will:

- increase proactive management of diabetes, supporting people to make positive lifestyle changes and better manage their own health
- identify and treat more people with high blood pressure and irregular heartbeats
- join-up care, data and expertise across GPs, community and social care and hospitals.

### It is better for people because:

- better blood-sugar control for people with diabetes will lead to significant reductions in kidney disease, blindness, amputations, heart attacks, strokes and early deaths
- getting earlier treatment for high blood pressure and irregular heartbeats will lower people's chances of having a stroke
- people can be confident of getting the best care, at the right time, based on latest clinical evidence.

### It is better for the health and care system because:

- reducing diabetes-related complications could free up £10-20m over the next five years to reinvest in other services in NW London
- better diabetes care would mean 65 people every day could be at home in NW London, and not in a hospital bed.

### Key facts:

- £340m is spent on NW London residents with diabetes - that's around ten per cent of our total NHS spend
- over a quarter of emergency overnight stays in hospital are for people with diabetes
- diabetes is a significant factor in stroke, heart and kidney problems, and amputations
- over 2,000 people had a stroke in NW London in 2015-16
- average NHS costs for treating someone who has suffered a stroke is around £12,000, and follow-up social care is a further £6,800 a year.

## Expected outcomes:

- prevent over 200 strokes due to irregular heartbeats in year one, and over 400 by year two
- tackling high blood pressure could prevent a further 358 strokes over next five years
- 20 per cent fewer deaths, 14 per cent fewer heart attacks and 12 per cent fewer strokes related to diabetes.

# Better care for people with long-term conditions

## SUPPORTING PEOPLE TO TAKE CONTROL OF THEIR OWN HEALTH

Support people with long-term conditions to be confident in self-care, managing their own health and taking as much control as possible.

### Delivery date:

- By April 2021

### To do this we will:

- provide people with clear and consistent information, and digital and online support
- encourage social prescribing so GPs and other health and care staff can refer patients to a wide-range of local services run by voluntary and community sector organisations
- support health and care staff to assess how well individuals and carers can manage their own health and tailor support accordingly, through a standard assessment called a Patient Activation Measure (PAM).

### It is better for people because:

- people have a better quality of life when they understand their illness and take control of their own care
- the more people can confidently manage their own health, the less likely they are to have unplanned trips to hospital
- more involvement with voluntary and community organisations can be better for people's health than starting a cycle of reliance on the NHS.

### It is better for the health and care system because:

- better self-care means fewer GP appointments for minor problems, freeing up around an hour a day for every GP to spend with other patients
- every £1 invested in self-care frees up to £3 to invest into other services by, for example, reducing the number of unplanned overnight stays in hospital.

### Key facts:

- people with long term conditions spend just three hours a year on average with healthcare staff so are self-managing almost 100 per cent of the time
- more than 75 per cent of people with a long term condition said they would feel far more confident about taking care of their own health if they had guidance and support from professionals or others with the same condition
- 60 per cent of people with long term conditions in NW London already use digital health apps to help manage their own health, and many more would do so if recommended by health professionals.

### Expected outcomes:

- 60,000 patients will have been assessed for their ability to confidently self-care through a Patient Activation Measure (or PAM) by March 2018
- new apps and other digital support for patients with diabetes tried, tested and ready to implement by April 2018
- understandable and consistent material for the public rolled-out through 2017.

# Better care for older people

## GETTING THE WHOLE HEALTH AND CARE SYSTEM WORKING TOGETHER FOR OLDER PEOPLE

Proactive and coordinated health and social care services supporting older people in their homes and in hospital.

### Delivery date:

- start most effective ways of working by April 2018

### To do this we will:

- provide coordinated health and social care to keep older people well and able to stay at home whenever possible
- have senior doctors and multi-disciplinary teams assess an older person's health if it worsens and they need more care, to see if the right support and treatment can be provided at home if possible
- fully coordinate treatment if an older person does need to visit or stay in hospital, so they get well and back home as quickly as possible.

### It is better for people because:

- older people are supported to stay at home wherever possible, saving them, their families and carers the worry and stress of unnecessary visits to hospital
- a special team will be on hand if older people do visit hospital, sorting out the care and support they need to get healthy and home as quickly as possible.

### It is better for the health and care system because:

- health and social care expertise and resources will be used more efficiently
- with more older people being cared for at home or in their community, hospitals will run more smoothly, including scheduled operations and emergency care
- there is more capacity to care for other sick patients and for scheduled operations
- millions of pounds can be reinvested in other health and care services.

### Key facts:

- around 13,000 over-65s had to stay overnight in hospital in NW London last year because they didn't have the right support available either at home or in the local community.

### Expected outcomes:

- up to 3,300 fewer overnight stays in hospital for older people every year
- senior clinician input as standard
- consistent hours and level of service across NW London.

# Better care for older people

## HOME FROM HOSPITAL

Make sure older people return home from hospital as soon as they no longer need hospital care, with the right support in place.

### Delivery date:

- October 2017

### To do this we will:

- make sure older people who need extra support are seen at home within two hours of leaving hospital, so their needs are properly assessed and right support put in place
- never delay getting a patient home because of a hold-up over paperwork – we will get them home, and then sort out the red-tape.

### It is better for people because:

- people who are fit to leave hospital could be back home three days earlier on average
- older people who get home as soon as they no longer need hospital care recover better, and are less likely to go back into hospital.
- older people are less likely to catch an infection, fall or get pressure ulcers at home than in hospital.

### It is better for the health and care system because:

- older people will have a better overall recovery and experience.
- hospitals will run more smoothly, including scheduled operations and emergency care
- it is more effective to provide the support patients actually need at home to recover, rather than trying to fit them into existing standard packages and procedures.

### Key facts:

- a third of patients in a hospital bed today, are medically fit to leave the ward
- every day an older person stays in a hospital bed, they can lose 10 per cent of their muscle strength
- for people with mental health conditions or diseases like Alzheimers, longer stays in hospital can increase confusion.

### Expected outcomes:

- older people will spend less time in a hospital bed
- hospitals will run more smoothly, including scheduled operations and emergency care
- more effective spend on care packages
- fewer older people will need to move to a care home, rather than back home.



## Evidence:

A recent survey by the Care Quality Commission into patient satisfaction with their stay in hospital (published May 2017) found:

- twenty-one per cent of people in 2016, compared to 18 per cent in 2015, said they were not offered enough support from health or social care professionals to manage their condition after discharge
- just over half (56 per cent) felt definitely involved in decisions about their treatment, which is 3 percentage points lower than the previous year
- just over a third (36 per cent) of people said they did not receive enough information when leaving the hospital, an increase of 2 percentage points since last year.

# Better care for older people

## LAST PHASE OF LIFE

Make sure health and care staff are aware of and respect people's wishes during their last phase of life.

### Delivery date:

- By April 2021

### To do this we will:

- make sure patients have a plan in place for care during their last phase of life – and that health and care staff respect it
- provide care home staff with easy access to 24/7 advice, plus extra training and education, to help them support people in their last phase of life
- make sure there is sufficient nursing and GP care available for people in their last phase of life in care homes and the community.

### It is better for people because:

- most residents say they want to die at home, but majority end up in dying in hospital
- an agreed plan in place, with trained and supported staff, will save residents unnecessary unplanned overnight stays in hospital.

### Key facts:

- around fifty thousand residents of NW London are in their last phase of life
- nationally, just under half (47%) of all deaths happen in hospital but where care plans have been used in London, that has dropped significantly to 18 per cent
- 4 in 5 people would prefer to die at home, but only 1 in 5 currently do
- according to figures published by Macmillan Cancer Support in April 2017, 99 per cent of cancer sufferers say they do not want to die in hospital, but 38 per cent still do.

### Expected outcomes:

- staff in care homes fully trained to support residents during their last phase of life
- multi-disciplinary teams in place to support resident's care and wishes
- all care home residents should have an agreed and shared care plan in place.

# Better care for older people

## COMMISSIONING HIGH-QUALITY AND EFFECTIVE CARE FOR OLDER PEOPLE

NHS and local authorities will work together to plan and buy the highest quality, most effective and best-value care for older people in their local communities

### Delivery date:

- By April 2021

### To do this we will:

- make sure contracts give all care home residents consistent and coordinated high quality services
- bring together separate NHS and local authority contracts for residential and community care to make sure they meet the needs of older people
- make sure spending is effective.

### It is better for people because:

- older people will be able to rely on getting the right support, in the right place, at the right time
- better quality services will help keep older people healthier and at home
- it will save older people time, reduce delays, frustration and worry.

### It is better for the health and care system because:

- the best care and services affordable will be put in place
- planning and buying together will drive up quality and increase power to negotiate better value deals
- consistent higher standards will mean fewer older people needing unplanned overnight stays in hospital, so wards will run more smoothly, including scheduled operations and emergency care.

### Key facts:

- there are over 300,000 over 65's in NW London
- across NW London's eight boroughs, there is a twenty per cent difference in how much the NHS pays for nursing homes
- planning and buying together could reduce some costs by 20-30 per cent, freeing up more money to invest elsewhere in the health and care system
- by mid-2039, eight per cent of people (one in 12) will be aged 80 or over.

## Expected outcomes:

- all eight boroughs offer residents a consistent standard, removing the 'postcode lottery' effect
- more effective use of existing budgets.

# Improving mental health services

## SUPPORTING ADULTS WITH SERIOUS AND LONG-TERM MENTAL HEALTH NEEDS

Increase proactive community support for people with serious and long-term mental health needs, and improve their physical health to help them live full and healthy lives in their communities

### Delivery date:

- By April 2021

### To do this we will:

- offer more intensive GP support to address the physical and mental health and wellbeing issues of people with serious and long-term mental health needs
- support people, with their families and carers, to manage their own mental health and wellbeing in the community
- fully coordinate health and social care mental health teams to offer specialist support for all levels of need focussed on responsiveness and recovery
- put in place community-based alternatives to admission to a mental health hospital
- have a 24/7 single-point-of-access for support and assessment for people in crisis.

### It is better for people because:

- service users say they prefer being looked after in the community
- people will receive more appropriate, tailored and personal care
- service users will spend less time in hospital, and not lose contact with community life
- people's social care needs will be met, with a massive impact on mental health and wellbeing.

### It is better for the health and care system because:

- health teams and social care expertise will be used more efficiently
- improving people's mental health improves their ability to manage their own physical health, reducing demand on other services.

### Key facts:

- over 23,000 people in NW London have been diagnosed with schizophrenia, bipolar disorder and/or psychosis - rates that are double the national average
- around 50 per cent of people diagnosed with a serious mental illness in NW London, such as schizophrenia or psychosis, are not receiving specialist support.

### Expected outcomes:

- people report improved mental health & wellbeing
- better physical health for people with serious and long-term mental health needs
- shorter stays in, and less demand for, mental health hospital beds for people with serious and long-term mental health needs.

# Improving mental health services

## TARGETED SUPPORT FOR SPECIFIC GROUPS OF PEOPLE

Tailor mental health support for specific groups of people, including new mothers and people with learning disabilities.

### Delivery date:

- By April 2021

### To do this we will:

- develop more services in the community
- have staff with the right skills and experience to manage complex cases
- focus on helping new mothers during and after pregnancy (perinatal), and people with multiple and highly complex learning difficulties.

### It is better for people because:

- early and better support improves mental wellbeing for individuals and their families
- the wellbeing of mothers and children is improved by early identification and support being put in place
- people with a highly complex learning disability and/or autism will be housed locally and with a choice on living arrangements where possible

### It is better for the health and care system because:

- there will be fewer stays in hospital for mothers needing psychiatric support
- more specialised support at an earlier stage will mean fewer and shorter stays in hospitals for people with learning disabilities and/or autism
- residents will be able to rely on a consistent, high quality and joined-up services across NW London

### Key facts:

- challenging behaviour (aggression, destruction, self-injury and others) are shown by 10-15 per cent of people with learning disabilities
- perinatal mental health problems affect up to 20 per cent of expectant and new mothers
- between 24 and 40 per cent of people with learning disabilities also experience mental health problems.

### Expected outcomes:

- coordinated care across health and social care and shared learning across NW London
- increased capacity and capability in perinatal mental health services
- improved quality of life for people with a learning disability and/or autism who display challenging behaviour.

# Improving mental health services

## CRISIS CARE

Work with police, hospitals, ambulance service, GPs and local authorities to improve care for people experiencing a mental health crisis.

### Delivery date:

- DELIVERED: new way of providing urgent care started April 2016 / additional work on-going

### To do this we will:

- have a clear and agreed mental health crisis protocol in place across the NHS, ambulance service, police and other parts of the health and care system
- invest in more 24/7 mental health services in our hospitals
- provide more evening and weekend specialist mental health support for children.

### It is better for people because:

- a properly joined-up system will mean more effective support during a crisis and a better recovery
- people can rely on getting the care they need, when they need it the most
- effective, tailored support is in place so people are less likely to need a stay in hospital.

### It is better for the health and care system because:

- a better level of care can be provided with available resources
- fewer people will need a stay in hospital, so wards will run more smoothly, including scheduled operations and emergency care
- performance will improve for agreed national standards.

### Key facts:

- people with mental illness are more than three times more likely to visit A&E and nearly five times more likely to have an unplanned stay in hospital, compared to those without
- in a recent national survey, only 14 per cent of adults who had experienced a mental health crisis said they received the right support
- 15 per cent of people who experience an episode of psychosis will have repeated relapses.

### Expected outcomes:

- fewer stays in hospital for people experiencing a mental health crisis
- every hospital will have mental health teams in place to support residents of all ages
- joined-up approach across the NHS, ambulance service, police and wider health and care system.

# Improving mental health services

## CHILDREN AND YOUNG PEOPLE

Make it easier for children, young people and their families to access mental health support, when and where they need it.

### Delivery date:

- 2018/19

### To do this we will:

- provide timely support and care closer to home
- invest in professionals and volunteers to provide safe and effective support
- make it easier to access high quality community and digital support to identify problems and take early action, reducing reliance on children and adolescent mental health services (CAMHS).

### It is better for people because:

- support and care is personal, planned and proactive
- people's care will be co-ordinated across education, health and social care and the voluntary sector
- the earlier young people receive the right support, the better they are able to cope
- young people requiring specialist support will have local care on hand so they can leave hospital earlier.

### It is better for the health and care system because:

- easier access and earlier intervention will reduce the need for specialist CAMHS support
- targeted high quality care and intervention at the right time will help services be more effective and efficient
- highly skilled community teams will reduce stays in hospital and get young people home quicker.

### Key facts:

- almost 75% of adult mental health starts before the age of eighteen
- almost 10% of 5 to 16 year olds have a diagnosable mental disorder.

### Expected outcomes:

- improved resilience and life chances for children and young people
- community teams are able to manage the complex needs of children/young people at home, stopping unnecessary stays in hospital, and getting people well and home sooner if they do need hospital care.



# Safe, high quality and sustainable hospital services

## IMPROVING COMMISSIONING OF SPECIALISED SERVICES

Support NW London's hospitals to provide the most efficient and effective services to treat rare illnesses and disorders.

### Delivery date:

- By April 2021

### To do this we will:

- support NW London hospitals that provide specialist services (from renal dialysis and secure inpatient mental health services, through to treatments for rare cancers and life threatening genetic disorders) to make sure they deliver them as efficiently and effectively as possible
- implement the national Hepatitis C programme to reduce chances of liver disease
- complete reviews of Child and Adolescent Mental Health Services (CAMHS), HIV care, children's transport and neuro-rehabilitation and put in place any suggested improvements
- improve efficiency and quality of care for patients through innovation, reducing delays in treatment, more effective use of beds, cost effective prescribing and enhanced care at the end of life.

### It is better for people because:

- providing specialist service efficiently and effectively will improve their care and experience
- using the NHS budget as effectively as possible means the NHS can free up more funding for new drugs and technology to treat rare illnesses

### It is better for the health and care system because:

- by keeping spending on specialised services within budget, more funding will be available for other NHS services in hospitals and local communities
- by spending smarter, more funding will be available to invest in new drugs and technology for specialised services .

### Key facts:

- The NHS spends around 14 per cent of its budget every year on specialised services
- in 2015/15, NHS England invested £14.6bn in 146 specialised services in England, an increase of seven per cent in funding from the year before
- investment in specialised services included nearly £3bn on specialised cancer services and £2.6 billion on high-cost drugs in 2015-16

### Expected outcomes:

- around 500 people treated for Hepatitis C infection in 2016/17 reducing the likelihood of liver disease.
- work aligned to the NW London 'Like Minded' mental health programme
- identify opportunities for better patient care and greater efficiency by service so quality, outcomes and cost-effectiveness are equal or better than similar services in other parts of the country.

# Safe, high quality and sustainable hospital services

## GETTING HOSPITAL PATIENTS BETTER, QUICKER

Make sure all hospital patients get the right tests, expert advice and treatment as soon as possible, every day of the week

### Delivery date:

- October 2017

### To do this we will:

- get all hospital services working together, every day of the week, so people get better and back home again as soon as possible
- make sure people get expert advice and treatment from the right clinician as soon as possible, every day of the week
- make sure people get the right treatment from therapists if they need it, every day of the week.
- reduce waiting times for things like blood tests and imaging scans, medications and transport.

### It is better for people because:

- they will receive the right treatment, from the right member of the clinical team, as soon as possible, every day of the week.
- people will receive quicker treatment and recover sooner, so they can get home quicker
- people are less likely to catch an infection, fall or get pressure ulcers at home than in hospital.

### It is better for the health and care system because:

- individuals will have a better overall recovery and their families and carers have a better experience
- hospitals will run more smoothly, including scheduled operations and emergency care
- staff workload will be better managed, with less stress and an improved experience.

### Key facts:

- a third of patients in a hospital bed today are medically fit to leave hospital
- every day an older person stays in a hospital bed, they can lose 10 per cent of their muscle strength
- trials conducted in NW London have shown that patients can get home up to a day earlier when hospital services work together properly every day of the week.

## Expected outcomes:

- people will have access to services, expert advice and treatment seven days a week
- hospitals will run more smoothly, including scheduled operations and emergency care
- patients will get better quicker and get home sooner

## Evidence:

Recent trials of new ways of running hospital services across the whole week in hospitals in NW London showed :

- patients reported being less anxious as therapists and consultants were available at the weekend
- up to 16 per cent reduction in the average time spent in a hospital bed
- up to 14 per cent reduction in people returning to hospital once home
- up to 25 per cent reduction in patients that were fit to go home but were stuck in hospital over the weekend due to lack of staff
- more patients going home on Monday and Tuesday, rather than later in the week, due to treatment starting over the weekend
- more patients going home before midday, because wards are running more smoothly.

# Safe, high quality and sustainable hospital services

## ORGANISING HOSPITAL SERVICES

Continue to improve, adapt and organise community and hospital services to achieve high quality standards for patients, based on latest clinical evidence and expertise.

### Delivery date:

- By April 2021

### To do this we will:

- deliver more care and services in local communities, for example through new and existing community hubs
- continue to bring specialist hospital teams together into larger units to provide rapid access to expert advice and treatment – like surgery and life-threatening injuries
- make sure hospitals offer the range of care, services and treatment people need which can't be provided by GPs or in local hubs
- secure additional funding for GP, community and hospital buildings and facilities

### It is better for people because:

- they will receive the right expert advice, in the right place, at the right time
- people can rely on high quality hospital services every time, to get them well and home more quickly
- hospitals will concentrate more specialist teams, like surgery, to give people rapid access to expert care and a better experience
- people can be confident rigorous checks will take place before and after any new NHS service starts, or an existing service is moved or changed.

### It is better for the health and care system because:

- expertise and resources are used more effectively, and hospitals will run more efficiently
- buildings and facilities will be improved, to provide staff with a modern workplace able to get the most out of today's technology and medicines
- facilities and services will be designed around best practice, clinical evidence and results, not constrained by history or buildings.

### Key facts:

- recent changes to maternity services in NW London means there are more senior doctors and midwives on the ward 24/7 now to support new mothers
- Professor Tim Brigg's 2015 national review of orthopaedic services in England found surgeons who carry out low numbers of specific surgery resulted in poorer results for patients, increased rates of reinfection and patients spending more time in hospital
- concentrating specialist stroke and major injury (trauma) care into fewer but larger hospitals units across London since 2010 has saved hundreds of lives.

### Expected outcomes:

- around £500m additional funding secured from national sources this year to invest in GP, community and hospital buildings and facilities in NW London
- 27 community hubs fully operational by 2025/26
- continued improvements to patient care, performance and affordability, in line with agreed NHS [plan](#)\* from 2013.

\*Shaping a Healthier Future 2012 (available at [www.healthiernorthwestlondon.nhs.uk/documents](http://www.healthiernorthwestlondon.nhs.uk/documents))

# Safe, high quality and sustainable hospital services

## HOSPITAL PRODUCTIVITY PROGRAMME

Make sure our hospitals run as efficiently and effectively as possible to make the best use of NHS expertise, drive out waste, drive up quality and free up more resources for front line services.

### Delivery date:

- By April 2021

### To do this we will:

- standardise the approach to treating muscle, bone, joint and soft tissue (muscular skeletal – or MSK) conditions
- encourage all NW London's hospitals to use their joint spending power effectively every time they buy goods and services
- get maximum value from our staffing budget by driving down use and cost of temporary staff
- make sure people get the right outpatient advice first time with most convenient type of appointment.

### It is better for people because:

- patients will be up on their feet and home quicker after surgery
- spending NHS budgets more effectively means more money available for frontline services
- they will have faster access to expert opinion when they need it
- they won't waste time on unnecessary trips to hospital

### It is better for the health and care system because:

- buying smarter improves quality and drives down cost – having a single supplier for nails, screws and plates for trauma surgery will save £1m in 2017/18
- using standard kit will reduce training time for doctors, and remove risk caused by using unfamiliar equipment
- buying in volume means better value for money
- more effective staffing will reduce costs and drive up quality
- an improved and consistent approach to outpatients referrals will make best use of expert opinion and resources.

### Key facts:

- in 2015, the NHS spent £10bn treating MSK problems
- the NHS in NW London spends around £2bn every year on goods and services, including £20m on gas and electricity
- NHS hospital trusts spend around £2.3bn a year on permanent staff, £185m on in-house 'bank' staff and £193m on agency staff - spending on agency staff was cut by a quarter in 2016/17
- there are over 300,000 outpatient appointments every day across the NHS in England and patients do not show up for around one in five appointments. in England's NHS

### Expected outcomes:

- more rapid access to specialist opinion
- efficiency gains from working more closely together and doing things the same way
- stop another £30m this year being spent on staff from private agencies, including £4m on locum doctors
- patient and GP outpatient experience will be improved, thank to rapid access to specialist input at the start.