Working together to improve health and care

Our Draft Sustainability and Transformation Plan 2016-21
For Darlington, Durham Dales, Easington and Sedgefield, Hambleton, Richmondshire and Whitby, Hartlepool and Stockton-on-Tees and South Tees.
What is a Sustainability and Transformation Plan?

In 2014 NHS England published the Five Year Forward View – a national plan to improve the NHS.

This identified three challenges for health and care. These include how we:

- Improve the health and wellbeing of the population
- Improve the quality of care people receive
- Ensure the efficiency of NHS services. This will help us make sure we are spending the public’s money on services that get good outcomes for patients.

NHS organisations have been asked to develop plans to show what we are going to do to address these challenges in their local areas. These are called Sustainability and Transformation Plans, or STPs, and there are 44 of them across England.

Our STP describes some things that we are already doing and other things we plan to do. The STP brings these local plans together, and the organisations responsible for them, to make sure we have a clear picture of how they will improve health and care in our area over the next five years.

Over the next few months, more work will be done to develop our draft plan, working with local councils and other partners including the voluntary sector.

Our STP area
Our STP: A vision for our local NHS

During 2016, NHS staff, including doctors and hospital consultants have been talking to local people about NHS services at over 50 events (see page 4).

What has been clear is how passionate people are about NHS services, and how much they value them.

But people also express their frustrations at the way some services work, and concerns about some of their experiences, including how some services are used.

The NHS in South Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby has been working together looking at how we provide services.

Our STP identifies four areas for improvement:

1. Preventing ill health and increasing self-care
   This involves helping to stop people from becoming poorly and helping to manage their health and any medical problems they already have.

2. Health and care in communities and neighbourhoods
   Supporting people to stay well and independent for as long as possible by improving health and care services within their area.

3. Quality of care in our hospitals – “Better Health Programme”
   This is about improving the quality of care in hospital and reducing the distance you have to travel for routine appointments e.g. blood tests, but making sure that people get the best treatment and see the right specialist when they need to.

4. Use of technology in health care
   Using technology to improve our ability to determine what the problem is e.g. what is making you poorly, decide with you on any treatment you might need and to make sure this treatment or care is given to you in a convenient way.

This plan describes what we are going to do over the next five years.

We hope you will support us in this journey.
What patients have been telling us

NHS staff have been visiting communities to talk about what the NHS does well, and where it could improve.

Many people were concerned about access to their local doctor and the national and local shortage of doctors. We are working on plans to improve our recruitment of doctors, and to develop new roles to support them in caring for their patients.

We are also looking at how GP practices and other services can work together more effectively. People were also concerned about access to mental health services, and felt that more support should be available locally.

We asked people what issues we should consider when services need to change.

They thought the most important issues were:

Improving staffing, recruitment and retention, reducing temporary staff

Improving the results for patients

Transport and travel by car, public transport or ambulance

Another important theme was information and communication.

People didn’t feel they understood the services that were available, which they should use, and when. This was a problem in urgent care and emergency care. They also expressed frustration at the frequent need to retell the background to their illness and care when they came across a new professional.

People were surprised that hospitals did not have routine access to GP records that would provide this background – particularly in an emergency.

They were supportive of the NHS sharing their records, where this would improve their care, and with safeguards and opt-outs in place.
Priority 1: Preventing ill health and increasing self-care

We know that, in our area, people die younger than in the rest of the country. This is not acceptable. More people have strokes, heart problems and serious weight problems (obesity) and more people smoke than the England average.

The NHS is working with local councils to improve the health of the population, and we want to build on this.

Key areas for improvement

- We want to help people look after themselves by providing them with information about self-care and encouraging them to use services such as local pharmacies.
- We want to identify people who are at risk of becoming poorly and do something about it before problems occur, and offer better support to stay healthy and take care of their own health.
- There have been big improvements in cancer treatment and people surviving cancer, but too many people still die earlier than they should. We want people to get quicker access to tests and treatment.

Case Study – Childhood Illnesses

Research shows that parents are becoming less sure about what to do when their child is poorly.

The NHS across the North East is introducing an app and booklet aimed at parents and carers with children under five to give them advice and support. It has been developed by hospital specialists, doctors, health visitors and pharmacists across the North East.

Parent feedback: “The new NHS app is incredibly user-friendly. The well planned sections provide useful information and advice. My favourite section is the very clever ‘find the nearest Pharmacy’ function, which can be used on holiday, late at night or during bank holidays. The app is fantastic and a must for parents.”
Priority 2: Health and care in communities and neighbourhoods

In the past, the majority of care was only provided in hospital. Thanks to improvements and changes, we can now manage many long-term health problems – such as heart or breathing problems, or diabetes – with fewer visits to hospital and fewer, shorter, hospital stays.

Over the last few years, NHS organisations have worked together with local councils on services to support people to live as independently as possible.

Key areas for improvement

- NHS organisations will share things they have done that have worked well, so that other neighbouring areas can learn from and benefit more people.
- We plan to increase the number of NHS services provided in the community so people can come home from hospital more quickly, and have their care needs assessed at home, rather than having to stay in hospital when they are well enough to go home.
- We plan to improve access to mental health support locally, including services such as talking therapies and greater involvement of the voluntary sector.
- We are improving access to services locally by developing community based care arrangements in Darlington, Durham and Tees. These will bring together local NHS services with social care and voluntary sector services to improve the range and convenience of services available locally.
- In Hambleton, Richmondshire and Whitby, we will be implementing the proposals for developing care outside hospital that have been consulted on in “Transforming our Communities”.

Here are some examples of the services we are already providing in some areas and that we want to ensure everyone has access to.

**Mental health crisis support for children and young people in Hartlepool, Stockton-on-Tees and South Tees**

In July 2015 a specialist ‘crisis and liaison’ service began operating 24/7 across Teesside.

Building on a model trialled in County Durham and Darlington, the nurse-led team give a rapid response for under-18s experiencing serious mental health difficulties, in hospitals or at home.

In one year the team carried out over 500 assessments in hospital and over 300 in the community. Admissions to hospital for overdose, treatment or further monitoring fell by 70% compared to the previous year.
Bringing care professionals together in Darlington

Care for frail or vulnerable people hasn’t always been joined up, and patients experiencing problems have frequently ended up in A&E, or admitted to hospital.

Now, in Darlington there is a team made up of a number of different care professionals whose job it is to identify people who are frail or whose health is at risk of getting worse. The team develops a care plan for each person, providing better co-ordinated care and support for vulnerable people, as well as reducing 999 calls and unnecessary hospital stays.

Diabetes service in Durham Dales, Easington and Sedgefield

A new diabetic service in Durham Dales, Easington and Sedgefield is helping people to manage their illness better and therefore reducing hospital visits and admissions.

In the past some patients were cared for by the doctor of nurse in their practice. For others, care involved more visits to hospital and sometimes repeated hospital stays. Now patients are invited and encouraged to attend a programme to help them to understand and manage their diabetes.

Dr Winny Jose, GP: “There’s been variation in how patients have been treated with diabetes. Some go to the hospital, some are cared for in the community. If we can provide that service closer to their home, I think they would be more than happy to receive that.”

Step-up/step-down bed in rural North Yorkshire

A pilot community NHS bed, also known as a ‘step-up/step-down’ bed in the North Yorkshire Dales has received its first patients.

The pilot facility based in Sycamore Hall extra care housing at Bainbridge, is not just a bed, but an entire flat funded by the CCG. A patient who is referred there by their local GP is provided with a homely environment to both recover and recuperate, regaining strength and the confidence to undertake daily tasks in a safe place.

The scheme has been supported by Richmondshire District Council and local residents.
Priority 3: Quality of care in our hospitals – “Better Health Programme”

In the past, most hospitals could offer people the best treatment available at the time for most conditions.

Thanks to medical advances the way that people are cared for has improved greatly and the evidence we have now shows that if patients are seen in a specific specialist centre that sees lots of other people with similar problems then they have much better results. Cancer care and heart surgery have been delivered like this successfully for a number of years.

There is clinical evidence that people being seen at a specialist hospital also have better results in a life-threatening emergency.

Key areas for improvement

• To make sure that most people can be seen at a hospital close to where they live for routine care including outpatients appointments, tests, frail elderly assessment and childrens assessment and most care for those currently using A&E.

• To ensure that most of the care and treatments currently being accessed via A&E departments can continue to be provided locally.

• For situations where someone’s life is at risk people are cared for in a hospital that has specialist doctors and experienced teams of staff available 24 hours a day, 7 days a week, and see a large number of people with similar problems.

• Providing planned operations in dedicated facilities. These would be separate from the facilities dealing with patients whose life may be at risk but have access to intensive care if it is needed. This makes sure that patients don’t get appointments cancelled and have a better experience.

During 2016, NHS staff have been talking to local people and partners about the future of hospital services as part of the Better Health Programme.

We expect to carry out a formal public consultation on proposals from June 2017.
Hospital at Home in Hartlepool and Stockton

Hospital at Home provides planned care for patients with breathing problems, avoiding often repeated 999 calls and hospital stays.

Now, patients diagnosed with Chronic Obstructive Pulmonary Disease, which causes serious breathing difficulties, are referred to the Hospital at Home team.

The team will contact the patient within two hours and arrange to come and see the person in their own home. The team cares for the patient at home and helps keep a close eye on how they are managing for four weeks. At week six they will have an appointment with a respiratory consultant. For urgent cases an appointment is available the next day. As a result, the patient doesn’t need a hospital stay.

Patient feedback: “I know if I have trouble breathing or get another chest infection they’re a phone call away and I just don’t like going in hospital. I just felt alone before. I got the tablets, got the steroids, took them and that was it. Where now I’ve got people behind me and it’s just smashing.”

Early supported discharge following stroke in South Tees

Until recently, someone who had a stroke would need to stay in hospital to have rehabilitation.

Now, thanks to the early supported discharge scheme, around 40% of patients are able to go home for their rehabilitation.

The stroke team decides whether a patient needs to stay in hospital for their rehabilitation, or whether they are well enough to go home. If a patient wants to go home, the therapy team will visit the patient at home and offer support and guidance to help patients recover.

Patient feedback: “I can honestly say I wouldn’t be where I am now if it wasn’t for the early supported discharge team. I will be forever grateful.”
Priority 4: Use of technology in health care

Advances in technology have led to huge improvements in patient care. Technology can now support people with long-term conditions to live more independent lives.

NHS organisations are working with partners to develop and then put in place new products and devices. These can be available in a person’s home or local community so that they will have better access to care, avoid long journeys and stay independent.

We now have some good examples of how technology is helping patients to carry out some simple tests and help to monitor their condition at home.

Key areas for improvement

- Across the North East organisations including NHS, local councils and Newcastle University are working together to develop the Great North Care Record, which will allow the NHS, and other care organisations to share patient records, securely and with the patient’s permission.
- We are looking at ways of using technology so that patients living in remote rural areas can have appointments using video technology.

Case Study – Warfarin testing

A new digital health screening service introduced by County Durham & Darlington NHS Foundation Trust, is transforming the lives of patients who take an anticoagulant medication known as Warfarin.

Anticoagulants are prescribed for people who have had a condition caused by a blood clot. Over 350 people across in the area now monitor their condition from home instead of going to a clinic.

Patient feedback: “I used to have to attend clinic every two weeks, sometimes weekly. My readings fluctuate unfortunately, meaning I need very regular monitoring and the new system works around my life, rather than the other way around.”
Finance

The financial pressures on the NHS and social care have been well publicised.

In our area, we spend around £2.4 billion on health care every year.

Given the increased demand on services, and increases in costs, we forecast that the local NHS could be over budget by around £281 million in 2021 (about 12% of our funding) if we do nothing.

Over the next five years, we therefore need to improve our efficiency dramatically. Individual organisations are already required to identify opportunities for improving efficiency every year, but we now need to look at how we do this across the whole system.

Our priority will be to invest in and protect high quality frontline services that deliver the best care for our patients.

What happens next?

Over the next few months we will continue to talk to local people and colleagues in local councils and other organisations about our draft STP.

We have arrangements in place to involve staff from partner organisations in the more detailed development of plans, particularly around care outside hospital.

We are also carrying out detailed work to understand the impact of potential changes for local communities.

We plan to offer further opportunities for engagement and will share details of events on the Better Health Programme and other NHS websites, and promote them through the media and social media.
Find out more

You can find out more about our Sustainability and Transformation Plan on your local Clinical Commissioning Group website:

www.durhamdaleseasingtonsedgefieldccg.nhs.uk
www.darlingtonccg.nhs.uk
www.hambletonrichmondshireandwhitbyccg.nhs.uk
www.hartlepoolandstocktonccg.nhs.uk
www.southteesccg.nhs.uk

Email: necsu.stp@nhs.net

To find out more about our programme of events see below:

www.nhsbetterhealth.org.uk
Facebook: www.facebook.com/nhsbetterhealthprogramme
Email: necsu.betterhealthprogramme@nhs.net

NHS organisations involved in our Sustainability and Transformation Plan

**Commissioning Organisations:**
NHS Durham Dales, Easington and Sedgefield Clinical Commissioning Group
NHS Darlington Clinical Commissioning Group
NHS Hambleton, Richmondshire and Whitby Clinical Commissioning Group
NHS Hartlepool and Stockton-on-Tees Clinical Commissioning Group
NHS South Tees Clinical Commissioning Group

**Provider Organisations:**
County Durham and Darlington NHS Foundation Trust
North Tees and Hartlepool NHS Foundation Trust
South Tees Hospitals NHS Foundation Trust
Tees Esk and Wear Valleys Foundation Trust

**Ambulance Services:**
North East Ambulance Service NHS Foundation Trust
Yorkshire Ambulance Service NHS Trust