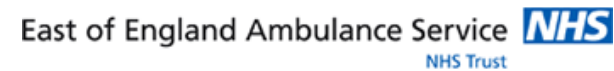




Update to Dacorum Health Committee

9th December 2015





Our vision

Our vision is that people are healthier; we want to prevent people from becoming ill in the first place. We want people to get the care they need in the right place - often close to where they live - at the right time. More joined up community health and social care services will help people stay well and get the support they need. It will also help us live within our means.



Key objectives

- Progress update
- New vision for health and care in West Herts
- Next steps



Your Care, Your Future

The review has been addressing the following four questions:

1 How well (how effectively and efficiently) are patients' needs met by the current health and social care system across West Hertfordshire?

2 What are the opportunities to meet future health and social care needs of the West Hertfordshire population more effectively and efficiently?

3 How should health and social care services across West Hertfordshire be configured to realise these opportunities?

4 What organisational form(s) and commissioning/contracting model(s) best support the deliver of the preferred future configuration of services?

What we have heard

Key themes that emerged from extensive stakeholder engagement to date include:

- ✓ More effective prevention to support people to stay well
- ✓ More patient-centred care and care closer to home;
- ✓ Better access to services, particularly primary care;
- ✓ Better signposting to services and services being more joined-up;
- ✓ Making efficient use of facilities and estates; and
- ✓ Better community care for older people.



Working together for a healthier West Hertfordshire

The case for change





And we've listened...

- Our vision is to ensure more people can access the care and support they need in their own community, rather than travel to hospital unnecessarily.
- By 2024 we would like 40% of current hospital trips shifted to a community setting.
- Patients' experience and the quality of care they receive will be better. We also want to ensure care is joined-up and better co-ordinated.

“We must challenge the status quo. Our health and social care services must be organised around patients' needs. We need to remove the boundaries between GPs, community based staff such as pharmacists, hospital doctors and the social care workforce.”

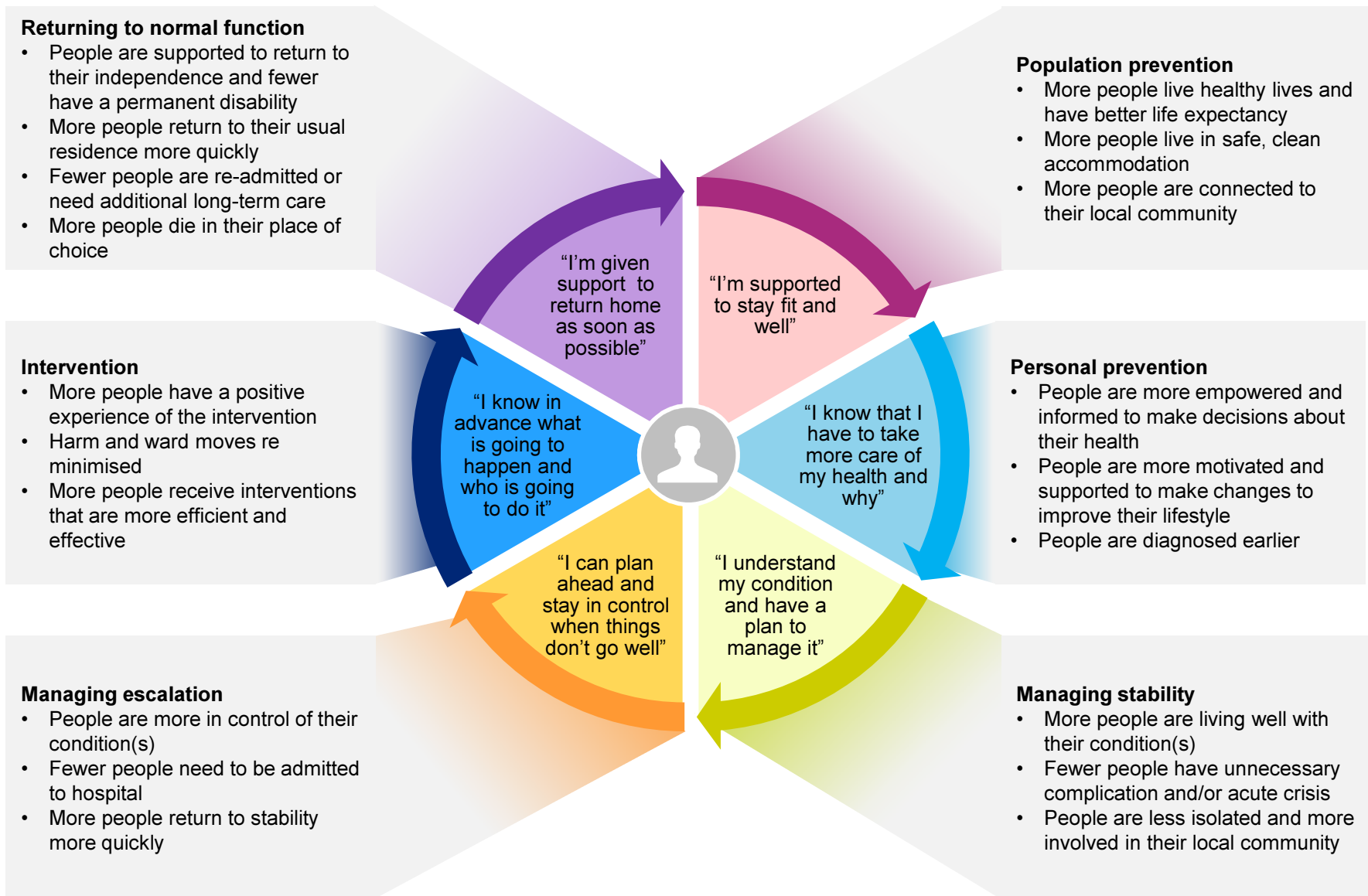
Geoff Brown, Chief Executive of Healthwatch Hertfordshire

“Expanding care closer to where people live will mean high quality and safer services for local people. People will experience more joined up care as local providers will work together in a network of health, social care, wellbeing and community services, reducing the need for people to travel to hospital.”

Dr Michael Van der Watt, Consultant Cardiologist, West Hertfordshire Hospitals NHS Trust

Outcomes

This will ensure improvements in patient's experience, quality and safety of care



- Returning to normal function**
- People are supported to return to their independence and fewer have a permanent disability
 - More people return to their usual residence more quickly
 - Fewer people are re-admitted or need additional long-term care
 - More people die in their place of choice

- Population prevention**
- More people live healthy lives and have better life expectancy
 - More people live in safe, clean accommodation
 - More people are connected to their local community

- Intervention**
- More people have a positive experience of the intervention
 - Harm and ward moves re minimised
 - More people receive interventions that are more efficient and effective

- Personal prevention**
- People are more empowered and informed to make decisions about their health
 - People are more motivated and supported to make changes to improve their lifestyle
 - People are diagnosed earlier

- Managing escalation**
- People are more in control of their condition(s)
 - Fewer people need to be admitted to hospital
 - More people return to stability more quickly

- Managing stability**
- More people are living well with their condition(s)
 - Fewer people have unnecessary complication and/or acute crisis
 - People are less isolated and more involved in their local community

Strategic Outline Case

- Future models of care co-designed with hundreds of local clinicians, patients and community representatives
- Strategic Outline Case built on what we've heard from a wide range of stakeholders
- All boards met on 23 October to consider the Strategic Outline Case as the framework for service transformation over coming years.
- The website has been updated to promote the vision for the future
- Individual boards have met to adopt the Strategic Outline Case



Implementing the proposals in Dacorum



- Agreed to take forward the development of a network of care and 'hub (s)' that delivers better outcomes and more support closer to home across Dacorum
- Kick off a stakeholder design and delivery forum – January, learning from Borehamwood
- It will define the route map for what we can do in the short term, using opportunities such as the marlowes development during 2016 and roll out of rapid response as well as planning for the longer term e.g commercial feasibility and design of the hemel hub





Next Steps

- Refreshing programme governance to best enable implementation and factor into 2016+ commissioning plans
- On-going engagement with local community, stakeholders, patients and carers on implementing joined-up services closer to people's homes
- Building on best existing services to make improvements quickly
- Developing networks of integrated care, close to home: develop multi-disciplinary implementation teams to design and develop local services relevant to local populations
- Acute care options: work up detailed business case and identify preferred option
- Set up the Dacorum stakeholder design and delivery group
- Build the Dacorum specific road map which will set out improvements in 2016 and subsequent years



Thank you

