

Health and care services in Herefordshire & Worcestershire are changing

An update on a five year plan to provide safe, effective and sustainable care in our area



Your Health & Wellbeing
#YourConversation



Why health and care services need to change

- Growing population with people living longer with long-term health conditions
- Leads to rising demands on health and social care services
- Although we're getting more money, it's not enough to keep up with that demand

We also have some practical local issues:

- Recruiting and retaining staff, especially in some specialist roles
- Disjointed services, duplication and inefficiency
- Spend time and resources treating illnesses which are preventable
- Poorer health outcomes in some areas for some conditions



What we've heard from you...

- You want to receive more care at home or as close to home as possible
- You want more provided through the local GP
- Improved communications between staff and teams
- Easier access to the right service, first time
- You and your family want to be part of developing a care plan and to be more active participants
- You want to be empowered to self-care aspects of your illness or condition
- You want improvements in mental health services & to access support early
- Transport – needs to be a key consideration in any proposals to change things



Safe, effective and sustainable

In reality this will mean:

- Providing more care at home or as close to home as possible
- Making our out of hospital system more efficient and effective
- Ensuring organisations involved in providing care work better in partnership
- Doing more to support health living, and to help people self-care
- People travelling further to access more specialist services
- Improving parity of esteem between physical and mental health





- We know there are lots of serious and long-term health conditions such as diabetes, stroke and heart disease which in lots of cases can be prevented.
- We need to encourage children and young people to get active and healthier now so avoidable health issues, for example those triggered by obesity, can be prevented.
- We need to work better with housing providers, schools, colleges and local businesses, and we also need to empower local communities, voluntary sector organisations and other community groups to help put physical and mental wellbeing at the heart of our communities.
- When someone does get ill we need to be better equipped to support them and their families with tools to stay independent and in control which lots of people tell us is important.



Carers

Carers

Carers are key to providing safe and effective out of hospital care however they don't always get the recognition and support they need to;

- a) help and support the person they care for to safely manage their condition at home,
- b) stay well themselves so they have the resilience to fulfil their caring role.

We need to work with carers to better understand the impact of any changes we make.



Getting an appointment at my local GP

- Demand on GPs is increasing too, making it almost impossible to get same day appointments in some of our surgeries.
- We think there are opportunities for local surgeries to pool their resources to more effectively share some of the demand.
- We also need to think, ‘if I need an appointment, does it really need to be with my preferred GP’?
- We also want to develop our local community teams with input from local GPs to help maintain someone’s health at home and reduce the risk of them being admitted to hospital unnecessarily.



Providing more care at home or out of hospital

- Wherever possible we should ensure that people do not get admitted to hospital unless they absolutely need to be there. Currently too many people are admitted to hospital for issues which could reasonably be treated at home or in the place where they live.
- We also know that once admitted to a hospital bed, sometimes people stay there longer than necessary.
- By working better in partnership we think there are real improvements to be made to the care we are able to give people at home.

We will do this by investing in and developing multi-skilled teams who will work around a person at home, helping reduce unnecessary admission to hospital. If someone does need to be taken to hospital, the team will know about it and will ensure they are able to leave and return home without delay

So by reducing the likelihood of admission in the first place, and then by making sure a stay in a hospital bed is as short as possible, it's likely that in time we won't require the number of beds we currently have.



Mental Health & Wellbeing

- We believe ‘there is no health without mental health’
- We want to be able to provide specialist care in our two counties so that people can stay connected to their families and friends whilst they recover.
- We are committed to ensuring that staff supporting women and their families through pregnancy childbirth have the skills to support women’s mental and physical health needs.
- Living with complex mental health problems can also affect some people’s physical health. We will prioritise how we use our resources so to reduce the impact this has on people’s quality and length of life.
- We want to support more people with mental health issues early to prevent issues escalating, and then at home or in the community when more care is needed.
- When admission to a mental health ward is required this should be more recovery focused and designed to help people get back home quicker so they can regain control and independence over their lives.



Community Hospitals

- These play a key role in alleviating pressure on the acute hospital sites
- Traditionally provide short-term in-patient support for someone who can't stay at home, but neither are they too poorly that they require the specialist expertise of an acute bed.
- Community hospitals will play a key role in our local system, and we believe there is potential for some of them to do even more than they currently do.
- Given how we expect demand for beds across the system to go down as we provide more responsive local support in people's homes, we do think the use of community hospitals might change.
- For example it is unlikely that we will need the number of beds we currently have, but some of the hospitals could do more outpatient or day case activities.



Urgent Care

- Sometimes we all need urgent care for an emergency or life threatening condition and we want to make sure that the right care is available across our two counties, 24 hours a day.
- We know that many people go to A&E when they could have been treated elsewhere. This overloads the services and leads to long waiting times and too many people waiting on trolleys in corridors.
- To help understand the pressures in A&E we have been looking at A&E attendance, performance and staffing levels to ensure that people who really need it are getting the best service possible in the right place, from the right professionals who have the skills to meet people's physical and mental health needs.
- We also need to strengthen the range of 7-day services and support for both physical and mental health issues, to prevent people getting in crisis and requiring urgent care services.



Acute Hospitals



- By preventing the risk of avoidable hospital admissions and by moving some activity into the community, this will help ensure that only those with an acute medical condition need to access an acute hospital, and when that is required they don't have to stay any longer than required.
- Given some of the challenges we have recruiting to certain specialist roles, for some specialist conditions it may make more sense to centralise these services so we aren't spreading our resources too thinly across multiple sites which is a risk.
- Some services are already delivered in a specialist 'centre' which is safer and more clinically appropriate, for example:
 - Major trauma
 - Stroke
 - Heart attacks



A sustainable system

- Using our lands and buildings better
- Using technology to modernise health

Our Finances

- We will receive more money over the next five years but on current projections it won't be enough to meet the continual rise in demand.
- Even with the increase in funding, if we do nothing the gap between what we receive and what we would need to meet that demand will be around £230million.
- We cannot continue overspending as it puts services at greater risk so while the quality of care will always be our priority, we will also have to make sure we are using our resources the best we can.



In summary

- Increased demand on health and care services mean we have to make changes
- We want to better organise ourselves, and use new technology, to develop more integrated community teams, supported by GPs, to provide more care at home
- If we get this right this will reduce the number of admissions to hospital
- We may not need the same number of beds we currently have, but our community hospitals could do more of the activities traditionally provided by the acute hospitals
- This will help ensure acute sites have the capacity to provide the specialist care the staff are trained to provide
- Given our recruitment challenges we may have to centralise more specialist services so they are safely staffed with the right professionals
- Any change to services in the future will only happen after local people have been engaged and consulted with.



#Your Conversation

- We want your views on the information in this update which provides some thoughts for how health and care services may change over the next five years.
- There will be more details to follow and we won't make any significant changes until we have carried out full engagement and consultation work with our patients, staff and the wider community.
- You can join in the conversation online at: www.yourconversationhw.nhs.uk
- We will be getting out and engaging our patients and local communities on this update over the next few months and we will be publicising events and engagement activity at www.yourconversationhw.nhs.uk

