

Community services - update (communications and engagement)

June 2024

Reimagining community health services

There is huge potential for the development of Kent and Medway's community health services. Often unrecognised, misunderstood or not acknowledged in the way other NHS services might be, community services are a fundamental cornerstone of patient care.

Community health services help adults and children get well and stay well through personalised NHS care by bringing care to patients and service users either in their own home or other out-of-hospital settings close to home. They work closely with general practice, alongside hospitals and in specialist education settings. We know people recover faster at home and those that need longer-term care need support to live their lives the best way they can.

Thousands of specialist healthcare professionals are helping the people of Kent and Medway every day. They are part of our neighbourhoods, come into our homes and are with us 'from cradle to the grave'. They partner with other colleagues in the NHS, social care, education, the voluntary sector and local government to support people to maintain their independence for as long as possible.

To support this approach, NHS Kent and Medway continually seeks to improve community health services, making sure people can access the same quality and type of services no matter where they live, reducing waiting times, improving care and people's experience.

Our vision for community health services

Kent and Medway's Integrated Care Strategy, which we engaged on with the public and stakeholders throughout 2023, [gives six key outcomes](#). Our community health services are integral to most of these and will guide the development of future services.



We recognise one of the most distinct features is their connection to individual patients, often in their homes. We also recognise that, in parts of our community, there is variation and inequality in terms of access to services and delivery, as well as the potential for duplication, fragmentation and a lack of consistency and efficiency.

Our aim is to eliminate the variation by providing equitable services across all [four health and care partnerships](#).

As healthcare modernises, with technology bringing new ways to deliver healthcare alongside our growing and ageing population, it is widely recognised care outside of hospitals will be the focus for delivering the right care in the right place.

Prevention, in the true sense of the word, is at the core of community services. This does not simply mean reducing emergency admissions, but rather preventing ill health and tackling health inequalities across geographies, communities and socio-economic groups. Strengthening our community services is aligned to the prevention agenda.

We want to recognise and develop the scope, breadth and impact of community health services, while acknowledging there are no quick fixes in a challenging and financially constrained local health and care economy, where workforce is limited. We need to make sure resources are focused in the best way to support as many people as possible.

NHS Kent and Medway wants to do better and make sure people are cared for in the right place, at the right time and by the right person. Community health services are central to our future plans for a high performing health and care system.

How are we planning for the future

To deliver this, we are embarking on a programme of continuous improvement.

The ICB is being supported in this work by patient representatives, NHS providers, place-based [health and care partnerships](#) and councils, and engagement with our local communities to define the models of care needed to create community health services of which we can all be proud.

Running concurrently, NHS Kent and Medway needs to reprocure services due to contracts ending. Contracts for community health services have grown organically over time while managed historically by the previous eight different clinical commissioning groups, which resulted in different levels of services in different areas, with sometimes different payment models. The re-procurement aims to:

- bring consistency to the contracts and procure based on local needs rather than historical services
- increase the stability of services from a financial and workforce perspective.
- create contracts that bring together services and are geographically based:
 - Adults: Four contracts to be let, one contract per health and care partnership area

- Children's: Two contracts to be let, one for Medway and Swale and the other for the rest of Kent.

See our website for a full list of [children's community health services](#) and [adult community health services](#) can be found here.

How will we deliver the change

The procurement will not immediately deliver our ambitions for community health services.

NHS Kent and Medway will procure predominantly on a like-for-like basis, so patients will see little immediate change, although the structure of the contracts will change as above.

Written into these contracts, however, will be the need for the new provider(s) to develop services to deliver improvements contained within our ambitions for these services.

We will engage stakeholders, patients and service users throughout this process and will be speaking to partners and providing many opportunities to get involved through as many channels as possible, surveys and events.

We are working to a timetable of invitation to tenders out in September 2024 with a contract award in January 2025 for full mobilisation by September 2025.

In advance of this, we are engaging with patients, staff working in the services and wider stakeholders to understand what they need from community health services in the future.

Communications and engagement approach

NHS Kent and Medway's Community Services Steering Group approved the approach to communicating and engaging on the project. This involves three phases:

Stage one: Design, March – July 2024

- Analyse current and existing patient experience information.
- Run two surveys, one for the public and one for patients on their current experiences and principles for improvement.
- Run five listening events across Kent and Medway (one in each HCP area and one online) focused on adult community services.
- Run two listening events (one for Medway and Swale and one for Kent) focused on children's services
- Commission community organisations to speak with specific communities.

Stage two: Building models of care, TBC

- Invite people who use services and those who work in them to workshops modelling a number of pathways.

Stage three: Testing the transformation, TBC

- Whole-system design workshops to test the models of transformation.

Reshaping our areas of transformation

When we first started to scope community health services, we were looking at 11 areas of improvement within adult community health services.

The work we have subsequently done has enabled us to cluster these areas; allowing people to more easily understand them and provide valuable feedback.

We will be looking at:

1 Better Use of Beds and Short-Term Services

- Intermediate Care
- Rehabilitation
- Single Point of Access – Out of Hospital Urgent Care

2.2.2 Thriving Community Hubs

- Community Out-Patients Appointments
- Diagnostics
- Elective Community Hubs
- Integrated Specialist Services

2.2.3 Ageing Well, End of Life and Frailty

- Ageing Well
- End of Life Care
- Frailty

Children's services, which will be covered by this review, include:

- children's therapies
- palliative or end of life care
- community nursing
- health services for special schools
- health services for looked after children.

Next steps

Providers, colleagues in health and care partnership teams, councils and quality have been contacted to collate all information they hold on people's experiences of community services and information gained from local engagement already carried out.

We are now promoting our surveys, commissioning community groups to speak to those less likely to be heard and arranging our stakeholder meetings to take place in July.