East Kent Strategy Board – briefing paper for HOSC

Meeting:	Kent County Council Health Overview and Scrutiny
Date of Meeting:	29 January 2016
Subject:	East Kent transformation – an update on the work of the East Kent Strategy Board
Action Required:	This paper is for information.
Purpose:	To update Health Overview and Scrutiny Committee representatives on developments following the establishment of the East Kent Strategy Board.

1. Introduction

This paper notes the meeting between HOSC Group representatives on 25 November 2015 and CCG Accountable Officers Hazel Carpenter and Simon Perks.

2. The East Kent Strategy Board

The East Kent Strategy Board was established in September 2015 by local health and care commissioners to spearhead a new drive to determine how best to provide health and care services to the population of east Kent. By the time of this meeting, the Board had met three times.

Comprising all organisations involved in the planning, provision and delivery of health and care services in this area, the Board is an advisory board with a clinical chair. Its membership includes the chief executives and most senior clinicians and leaders of east Kent's NHS and care services. The Board will oversee a work programme and advise local health and care commissioners whose role it is to plan the future pattern of services across east Kent.

A communication to stakeholders announcing the establishment of the Strategy Board and its remit was circulated in November 2015 (see Appendix A - stakeholder communications) and recipients included HOSC members. This paper includes the key points from that communication.

3. Relationship with HOSC

The HOSC was formally briefed about the establishment of the Board, its purpose, method of working and aims on 9 October 2015. This informal meeting was an opportunity for the Group Representatives to have a more in-depth briefing directly from the relevant CCG Accountable Officers with some context about the ambitions and work of the Board, and the subsequent programme of activity that it will oversee. It was acknowledged that while its work was in its early stages meaning that there were many unanswered question around changes to models of care and service patterns, there was a strong commitment to keeping

the HOSC updated and informed at every step of the way, a fact reflected in high-level programme planning.

4. Making the case for change – the context for transformation in east Kent The Accountable Officers set out the context for the work of the Board.

- While staff and organisations work hard to provide local people with the best care, the quality and range of services which patients currently receive vary significantly according to the area of the county where they live. There are variations in the quality of some services, in health outcomes, in access to services and in key aspects of diagnosis and treatment. For example, some areas record much lower numbers of patients with long-term health conditions, such as heart disease or diabetes, than national trends suggest: indicating that people's illnesses may not have been diagnosed. For those who have a diagnosis, the quality of care doesn't always meet national quality standards. These variations are unacceptable and we believe that everyone in east Kent deserves to receive the very best care, wherever they live.
- The NHS is under increasing strain and must look at ways to transform the way care
 is delivered if we are to give the best care within available funding and resources.
 The reasons for this are plain: the NHS is operating with an unprecedented and
 changing demand for services, with fewer available specialists, in an acutely
 challenging financial environment.
- We have an ageing population with high levels of multiple long term conditions needing complex care and treatment from different organisations. This can be difficult for patients and their families and carers to navigate. It is time that care became more personalised, coordinated and community based, with sufficient focus on prevention as well as treatment.
- In addition, we are seeing a rise in long-term health problems such as diabetes as a result of lifestyle choices. It takes time, effort and new approaches to keep people with these conditions well and out of hospital.
- We in east Kent are not alone in needing to change. At a national level, the *NHS Five Year Forward View* (published in October 2014) made a compelling case for the need to transform if the NHS is to meet the needs of the population. This includes new ways of working and providing more services out of hospitals and in local communities.

New approaches to delivering care are already underway (examples below) and it is the responsibility of the Board to make sure these approaches are joined up, coherent and working to support each other, as part of an overall strategy for delivering care in the future for the people of east Kent.

- Hubs in Folkestone and Dover provide GP appointments 8am-8pm seven days a week, thanks to funding from the Prime Minister's GP Access Fund. Patients are referred by their practice or NHS 111.
- Primary care mental health specialists in a number of GP practices across east Kent support people who are acutely mentally unwell so they are less likely to need care

from secondary mental health services (provided by Kent and Medway NHS and Social Care Partnership Trust).

 A new 'multi-speciality community provider' model is being tested in the Canterbury, Faversham and Whitstable areas, with £1.6million from the NHS England Transformation Fund. It plans extended practice opening hours, paramedic practitioners who will visit housebound patients, an integrated nursing service involving both community and practice nurses and an increase in the number of outpatient services provided through specialist GPs – indeed, much of this is already taking place.

5. Next steps

There is a pressing need to tackle service pressures at the same time as developing a future model of care for the people of east Kent that meets changing needs. The Board will oversee the development of a model of care that works in a joined up way across primary, community, mental health and acute services, and with social care partners for the longer term. In the shorter term, individual organisations will continue, as now, to ensure they are delivering safe services day to day and will make any necessary immediate changes to fulfil this duty as required and in accordance with due process.

The Board will oversee a programme of design work over the coming months that will set out proposals for a new pattern of services across east Kent. The work will be clinically led, working closely with staff, patients, carers and the local community to co-design solutions to meet the challenges we face.

The Board has not yet considered or tested any options for change and no decisions about how services might be organised in the future have been made. Any decision-making on the future pattern of services remains with the commissioning bodies (the four clinical commissioning groups, NHS England and Kent County Council) who have the statutory responsibility to take decisions about what health and care services should be provided for their local populations.

6. Working with HOSC

The Group Representatives were asked to advise how they could work with the East Kent Strategy Board as its work develops and Representatives expressed an interest in the need for appropriate communications and engagement support for the Board's work. The Accountable Officers acknowledged that the programme is wide-ranging, involving as it does, all health and care organisations within east Kent and will take a 'whole system' approach to transforming the local health economy – a landscape which has a diverse and widespread mix of stakeholders and audiences all of whom will want or need to be engaged as the programme develops. With this in mind, it was agreed that input from Representatives as the programme develops over 2015/16 and 2016/17 would be invaluable. Specifically it was agreed that reviewing plans for any formal consultation in due course and the consultation document would be welcome and helpful. It was acknowledged that regular updates to HOSC would both ensure Representatives were kept briefed and up-to-date as the programme progresses, and in itself would help to support the wider communications and engagement around the programme's work. The Accountable Officers also committed to updating the HOSC before the formal consultation, once the independent analysis has been published and after the formal decision by all Boards.

It is understood that a verbal update to the HOSC at the 4 March 2016 meeting has been requested by the Chairman.

Authors: Hazel Carpenter, Accountable Officer, NHS Thanet and NHS South Kent Coast CCGs and Simon Perks, Accountable Officer, NHS Ashford and NHS Canterbury and Coastal CCGs.

Ends

NB: The East Kent Strategy Board member organisations include:

NHS South Kent Coast CCG; NHS Canterbury and Coastal CCG (encompassing the Whitstable multi-specialty community provider vanguard); NHS Ashford CCG; NHS Thanet CCG; East Kent Hospitals University NHS Foundation Trust; Kent Community Health NHS Foundation Trust; Kent & Medway NHS and Social Care Partnership Trust; South East Coast Ambulance NHS Foundation Trust; and Kent County Council.

Appendix A – stakeholder communications

A letter to stakeholders announcing the establishment of the East Kent Strategy Board was circulated on 30 November. A supporting statement from the Board was also developed to sit alongside this letter and for partner organisations to use in their own communications about specific organisational transformation objectives. The letter and the statement are set out below for HOSC members' information.

East Kent health and care transformation programme – letter to stakeholders

30 November 2015

Dear colleague,

As the Accountable Officers for the four clinical commissioning groups covering east Kent and the Clinical Chair for the East Kent Strategy Board, we are writing to tell you about the latest developments regarding the future of local health and care services as we know you have an interest in this area.

We have recently established the East Kent Strategy Board to spearhead a new drive to determine how best to provide health and care services to the population of east Kent in the future.

Comprising all organisations involved in the planning, provision and delivery of health and care services in this area, the Board is an advisory board with a clinical chair. Its membership includes the chief executives and most senior clinicians and leaders of east Kent's NHS and care services. The Board will oversee a work programme and advise local health and care commissioners whose role it is to plan the future pattern of services across east Kent.

This letter aims to provide you with some context about the ambitions and work of the Board, and the subsequent programme of activity that it will oversee. We don't yet have answers to all the questions, but will seek to keep you regularly involved and updated as we progress with our work.

Why do we need to make changes?

While staff and organisations work hard to provide local people with the best care, the quality and range of services which patients currently receive vary significantly according to the area of the county where they live. There are variations in the quality of some services, in health outcomes, in access to services and in key aspects of diagnosis and treatment. For example, some areas record much lower numbers of patients with long-term health conditions, such as heart disease or diabetes, than national trends suggest: indicating that people's illnesses may not have been diagnosed. For those who have a diagnosis, the quality of care doesn't always meet national quality standards. These variations are unacceptable

and we believe that everyone in east Kent deserves to receive the very best care, wherever they live.

The NHS is under increasing strain and must look at ways to transform the way care is delivered if we are to give the best care within available funding and resources. The reasons for this are plain: the NHS is operating with an unprecedented – and changing - demand for services, with fewer available specialists, in an acutely challenging financial environment.

We have an ageing population with high levels of multiple long term conditions needing complex care and treatment from different organisations. This can be difficult for patients and their families and carers to navigate. It is time that care became more personalised, coordinated and community based.

In addition, we are seeing a rise in long-term health problems such as diabetes as a result of lifestyle choices. It takes time, effort and new approaches to keep people with these conditions well and out of hospital.

We in east Kent are not alone in needing to change. At a national level, the *NHS Five Year Forward View* (published in October 2014) made a compelling case for the need to transform if the NHS is to meet the needs of the population. This includes new ways of working and providing more services out of hospitals and in our local communities.

New approaches to delivering care are already underway

The East Kent Strategy Board recognises that some of this work has already begun. For example:

- Hubs in Folkestone and Dover provide GP appointments 8am-8pm seven days a week, thanks to funding from the Prime Minister's GP Access Fund. Patients are referred by their practice or NHS 111.
- Primary care mental health specialists in a number of GP practices across east Kent support people who are acutely mentally unwell so they are less likely to need care from secondary mental health services (provided by Kent and Medway NHS and Social Care Partnership Trust).
- A new 'multi-speciality community provider' model is being tested in the Canterbury, Faversham and Whitstable areas, with £1.6million from the NHS England Transformation Fund. It plans extended practice opening hours, paramedic practitioners who will visit housebound patients, an integrated nursing service involving both community and practice nurses and an increase in the number of outpatient services provided through specialist GPs.
- In addition, East Kent Hospitals University NHS Foundation Trust is developing a new clinical strategy, working closely with Healthwatch and clinicians to shape services to

meet the needs of patients and talking directly to patients and the public about their views and experiences.

But we now need to make sure that these new approaches are joined up, coherent and working to support each other, as part of an overall strategy for delivering care in the future for the people of east Kent.

Where will the Board focus its work?

It is clear that we need to tackle service pressures at the same time as developing a future model of care for the people of east Kent that meets changing needs. We need to develop a model of care that works in a joined up way across primary, community, mental health and acute services, and with social care partners.

The Board is committed to developing and delivering a comprehensive and cohesive transformation programme that improves health and wellbeing, delivers high quality and safe care both in and out of hospital settings and puts the services that so many people value on the path to a bright and sustainable future. The Board will oversee a programme of design work over the coming months that will set out proposals for a new pattern of services across east Kent. The work will be clinically led, working closely with staff, patients, carers and the local community to co-design solutions to meet the challenges we face.

The Board has not yet considered or tested any options for change and no decisions about how services might be organised in the future have been made. Any decision-making on the future pattern of services remains with the commissioning bodies (the four clinical commissioning groups, NHS England and Kent County Council) who have the statutory responsibility to take decisions about what health and care services should be provided for their local populations.

Transforming services around the interests of patients is at the heart of our ambition and we are committed to engaging with and consulting all those who provide, deliver – and most importantly of all – use health and care services. We have shared this letter with a range of local stakeholders but please feel free to update your own colleagues about our ambition for the future health and care system in east Kent, as described in this letter.

We look forward to working with you to turn our ambitions into a reality.

Yours faithfully

Dr Sarah Phillips	Hazel Carpenter	Simon Perks
Clinical Chair	Accountable Officer	Accountable Officer
East Kent Strategy Board	NHS Thanet CCG	NHS Ashford CCG

NHS Canterbury and Coastal

Statement from East Kent Strategy Board regarding the future of health and care services

November 2015

The East Kent Strategy Board has been established by local health and care commissioners to spearhead a new drive to determine how best to provide health and care services to the population of east Kent in the future.

Comprising all organisations involved in the planning, provision and delivery of health and care services in this area, the Board is an advisory board with a clinical chair. Its membership includes the chief executives and most senior clinicians and leaders of east Kent's NHS and care services. The Board will oversee a work programme and advise local health and care commissioners whose role it is to plan the future pattern of services across east Kent.

While staff and organisations work hard to provide local people with the best care, the quality and range of services which patients receive vary significantly according to the area of the county where they live. These variations include key aspects of diagnosis and treatment. For example, some areas record much lower numbers of patients with long-term health conditions, such as heart disease or diabetes, than national trends suggest: indicating that people's illnesses may not have been diagnosed. For those who have a diagnosis, the quality of care doesn't always meet national quality standards. These variations are unacceptable and we believe that everyone deserves to receive the very best care, wherever they live.

The NHS is under increasing strain and must look at ways to transform the way care is delivered if it is to give the best care within available funding and resources. The reasons for this are plain: the NHS is operating with fewer available specialists in an acutely challenging financial environment with an unprecedented demand for services.

While it is great news that people are living longer, our ageing population often has multiple long term conditions needing complex care and treatment from different organisations. This can be difficult for patients and their families and carers to navigate. It is time that care became more personalised, coordinated and community based.

In addition, many of us are developing long-term health problems such as diabetes as a result of our lifestyle choices. It takes time, effort and new approaches to keep people with these conditions well and out of hospital.

We in east Kent are not alone in needing to change. At a national level, the *NHS Five Year Forward View* (published in October 2014) made a compelling case for the need to transform if the NHS is to meet the needs of the population. This includes new ways of working and providing more services out of hospitals and in our local communities.

The Board recognises that some of this work has already begun in east Kent. Examples include:

- Hubs in Folkestone and Dover providing GP appointments 8am-8pm seven days a week, thanks to funding from the Prime Minister's GP Access Fund. Patients are referred by their practice or NHS 111
- Primary care mental health specialists in a number of GP practices across east Kent, supporting people who are acutely mentally unwell so they are less likely to need care from secondary mental health services (provided by Kent and Medway NHS and Social Care Partnership Trust)
- New multi-speciality community provider model being tested in the Canterbury, Faversham and Whitstable areas, with £1.6million from the NHS England Transformation Fund. It plans extended practice opening hours, paramedic practitioners who will visit patients at home, an integrated nursing service involving both community and practice nurses and an increase in the number of outpatient services through specialist GPs.

In addition, East Kent Hospitals University NHS Foundation Trust has started a programme of developing a new clinical strategy, working closely with Healthwatch and clinicians to shape services to meet the needs of patients and talking directly to patients and the public about their views and experiences.

We should be proud of much of what we have already achieved but we need to tackle undeniable service pressures at the same time as developing a future model of care for the people of east Kent that meets changing needs. The time is right for us to do this together and the Board is committed to developing a comprehensive and cohesive transformation programme that improves health and wellbeing, delivers high quality and safe care both in and out of hospital settings and puts the services that so many people value on the path to a bright and sustainable future.

The Board has not yet considered or tested any options for change and no decisions about how services might be organised in the future have been made. Transforming services around the interests of patients is at the heart of our ambition and we are committed to consulting and engaging with all those who provide, deliver – and most importantly of all – use health and care services.

Ends Notes for editors

- The membership of East Kent Strategy Board is: NHS South Kent Coast Clinical Commissioning Group; NHS Canterbury and Coastal Clinical Commissioning Group; NHS Ashford Clinical Commissioning Group; NHS Thanet Clinical Commissioning Group; East Kent Hospitals University NHS Foundation Trust; Kent Community Health NHS Foundation Trust; Kent and Medway NHS and Social Care Partnership Trust; South East Coast Ambulance Service NHS Foundation Trust; the Kent Health & Wellbeing Board; and Kent County Council.
- The East Kent Strategy Board is an advisory board chaired by GP clinical Chair Dr Sarah Phillips and comprising the chief executives and most senior clinicians of East Kent's NHS and care services. Any decision-making on the future pattern of services within east Kent remains with the commissioning bodies (the four clinical commissioning groups, NHS England and Kent County Council) who have the statutory responsibility to take decisions about what health and care services should be provided for their local populations.