NHS
West London
Clinical Commissioning Group

Summary of progress under Shaping a healthier future

February 2015
www.westlondonccg.nhs.uk

NHS West London CCG covers the Royal Borough of Kensington and Chelsea and Queen's Park and Paddington in Westminster

Shaping a healthier future

SHAPING A HEALTHIER FUTURE

NHS

Shaping a Healthier Future (SaHF) will transform services for 2 million people across North West London

Why the system needs to change

- We have a growing and ageing population with more long-term conditions
- One in four patients find it difficult to see a GP when they need to and many end up in A&E
- We have more A&E departments per person than other parts of the country
- There are too few specialists in hospitals to provide high-quality round-the-clock care
- We are working from inadequate NHS facilities
- We are working within an increasingly tight budget.

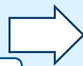
North West London's five year plan

- Design a system which better supports patients and gives them more control and input over their own care
- Prevent people from dying prematurely
- Enhance quality of life for people with long-term conditions
- Help people to recover from episodes of ill health or following injury
- Ensure that people have a positive experience of care
- Treat and care for people in a safe environment and protecting them from avoidable harm

Five year plan to date

2012-2014

- Consultation and decision making



2014 - 2019

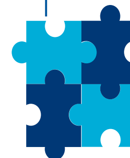
- Year 1 of implementation

Mental health and wellbeing

Improving mental and physical health through integrated services.

- Transformation of services to be responsive to patients needs and easy to access and navigate.
- Care provision as close to home as possible, with GPs at the heart of care, where and when it is needed.
- Improves the lives of users and cares, promoting recovery and delivering excellent health and social care outcomes, including employment, housing and education.

Whole systems integrated care



Coordinating care across commissioning bodies and providers

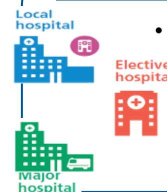
- People will be empowered to direct their care and support and to receive the care they need in their homes or local community.
- GPs will be at the centre of organising and coordinating people's care.
- Our systems and processes will enable and not hinder the provision of integrated care.

Primary and community care

Transforming out-of-hospital services and improving access to GPs

- Provides more local input into primary care commissioning; improves access to GPs whilst being able to move money around the health economy more quickly.
- Puts the right support in place to nurture and grow GP networks so they are able to deliver sustainability in the long term.
- Develops a primary care estates strategy that takes into account hub and GP estate requirements and support implementation of plans to deliver the required estates changes of need.

Hospital reconfiguration



- Delivers a major shift in care from within a hospital setting to an out-of-hospital setting so more people are treated closer to their homes. The concentration of acute hospital services will allow us to develop centres of excellence which are able to achieve higher clinical standards and provide a more economic approach to the delivery of care.

Shaping a healthier future

INTRODUCTION TO WEST LONDON CCG

West London CCG covers the Royal Borough of Kensington and Chelsea and also the Queen's Park and Paddington area of Westminster. We commission services for our registered population of 225,000. The population has a large proportion of older working age residents and very few children. Cancer is the highest cause of death followed by cardiovascular disease. Half the area's population were born abroad and nearly 1/3 are from BAME groups.

Population demographics

- The age profile of the area is common to other inner city areas in that it has a very large working age population and smaller proportions of children in particular, (the 2nd smallest in London).
- Those aged 65+ form a slightly larger proportion of the total population than London, but smaller than England.

- Half the area's population were born abroad.
- Four in 10 (38%) of the population in Westminster and nearly a third (29%) of the population in Kensington and Chelsea is from Black, Asian and minority ethnic (BAME) groups
- Over a quarter of people in K&C and just under a third of people in Westminster state that English is not their main language

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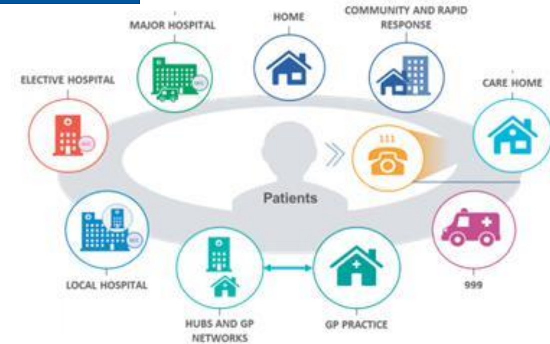
- Life expectancy for men and women living in the area covered by West London CCG is higher than London and England averages.
- However, the north of the area covered by West London CCG has correspondingly worse health outcomes. The wards falling into the worst 20% in London for self-reported bad/very bad health, self-reported limiting long-term illness (LLTI) and self-reported working age LLTI are Golborne, St Charles, Notting Barns and Cremorne.

Care provision



- **Chelsea & Westminster NHS FT** and **Imperial College Healthcare NHS Trust are** the main providers of acute and specialist care.
- **Central London Community Healthcare (CLCH)** provides community nursing and therapies.
- **Central and North West London NHS Foundation Trust** is the acute mental health NHS provider with most treatment taking place in General Practice and also a diverse range of voluntary sector services

- 52 **GP** practices
- 24 **dental** practices in K&C and 62 in Westminster (information is not available by CCG)
- 42 **pharmacies**
- 15 **care homes**

Overview

225,000
Local registered patient population

£335m
2014/15 health commissioning budget
£16m invested on community and integrated services

Health challenges

- The principle cause of premature (<75) death in our area is cancer, followed by cardiovascular disease (which includes heart disease and stroke). A significant number of people also die from COPD.
- There are very high rates of people with severe and enduring mental illness in the area. In 2013/14, 16,000 people received treatment for a mental health problem.
- Priority areas for the CCG include people with long term conditions, older people and homeless people.

Shaping a healthier future

CURRENT OUT OF HOSPITAL PLANS 1/2

NHS

West London CCG has invested £16m[1] in 13/14 and 14/15 on increasing the number of community services and joining up health and social care.

Whole systems integrated care

Community Independence Service (CIS): The service is made up of health and social care professionals with a joint aim of keeping people at home for longer. CIS achieves its aims through discharge support and rapid response support clinicians in the community. West London CCG have further enhanced the rapid response element by commissioning GP medical cover and more recently launching the Older Adults Support Team in December. The team provides elderly consultant support to home visits by the team as well as a rapid access clinic.

- **Primary Care Navigators (PCNs):** There are 13 PCNs working in GP practices to help patients who are 55+ with physical and/or mental health needs. They achieve this by providing one on one support to patients in the community or local practices, informing them of NHS, Voluntary and Local Authority services that are available to them.
- **Integrated Care Planning**: Giving our most unwell patients a care plan that considers all aspects of their health and social care needs (with a particular focus on our most elderly), helps to ensure we keep people healthier for longer, thus reducing their need for hospital care. We have so far supported over 50% of our patients over the age of 75 with a care plan.
- **Child Health GP Practice Hubs** – provide an environment in which health and social care professionals can work together in multi-disciplinary teams to provide integrated care for children most in need

1. Note: Additional expenditure on 'out of hospital' services and infrastructure, spent since the start of SaHF. This is expenditure on primary and community care services, provided outside of acute, intended to reduce demand on the acute sector, i.e. to reduce non-elective or elective admissions, in-hospital outpatient appointments, and A&E attendances. Also includes investment in supporting infrastructure. Project costs are excluded.

Mental health and wellbeing

- **Urgent Care:** The urgent care pathway has been redesigned to ensure that access to crisis and urgent mental health assessment and care is delivered at home, 24/7/365, and away from A&E departments and in-patient acute wards as far as possible.
- We are **improving dementia diagnosis and support in general practice**, and have initiated an integrated pathway review under the mental health programme board.
- We are continuing our work to **better integrate physical and mental health services**, for example by putting specialist mental health liaison services into A&E departments and supporting ward earlier discharge for dementia, by implementing a new out of hospital payment scheme to guarantee that mental health patients under GP-only care get increased appointment time and that GPs are remunerated for this.
- We are working hard to develop an **integrated primary mental health service**, including the third sector, so we can deliver nationally required access and recovery targets for Improving Access to Psychological Therapies (IAPT) and support increased, high quality out of hospital mental health care.
- Innovating with service users and clinicians to design a new approach to **supporting long-term recovery and wellbeing** for the 16,000+ people with mental ill health in our area.
- North West London was the 2nd area nationally to have its action plan approved for the ground-breaking **Mental Health Crisis Care Concordat**, ensuring better, joined up, care for people experiencing mental health crisis.

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CURRENT OUT OF HOSPITAL PLANS 2/2

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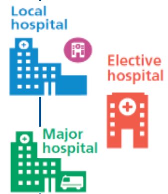
Community Out of Hospital services



- **Musculoskeletal, dermatology, diabetes and respiratory** services have been redesigned, bringing care out of hospital and closer to home.
  - **Community Diabetes Service:** increased provision
  - **Community Cardiology Service:** extension to K&C
- **Case management:** we have 15 band 7 Case Managers which we commission from CLCH (as part of the contract with CLCH) - these case managers support and case manage complex patients and coordinated their care.
- **Putting Patients First:** We have invested in building relationships between the different sectors such as the local authority, mental health, community nursing and pharmacists who provide care planning support at monthly practice meetings. This is achieved by incentivising integrated working and supporting with an organisational development programme.

Additional one off investments

SystmOne: All practices and all newly-commissioned community health services in West London are now using one IT system, SystmOne, leading to continuity of care for patients between services, ensuring clinical information is real time and delivering safer patient care.

St Charles – the development of 'community health and social care' hub at St Charles supports the promotion of integrated working across health and social care.

Primary care transformation (including OOH hubs)

- **Prime Ministers Challenge Fund (PMCF)**: all 52 GP practices in West London are taking part to help make it easier for patients to see a GP at a time convenient to them.
- **GP Federation:** as part of the Federation development process, all practices in WLCCG have agreed to work as a single federation, ensuring 100% population coverage across the CCG, and enabling further network development amongst GPs.
- **Extended access to GPs:** patients can access weekend GP services at 4 practices offering a walk-in and booked appointments and referrals from 111 open to all West London patients. Two walk-in services also available.
- **Enhanced access:** we have invested in 28 practices which offer telephone consultations as an alternative to face to face appointments, 5 offering email consultations, 22 practices offer online appointment booking.
- **Improved estates**: West London is investing in the buildings needed to deliver more services outside hospitals and closer to patients' homes. The St Charles Centre health hub is open to patients and another hub is planned to offer integrated care across the area.
- **Urgent phone advice to GPs from Chelsea and Westminster Hospital consultants**: A new dedicated phone line for GPs to deal with urgent patients enquiries for medicine, surgery, paediatrics, maternity and genecology. Sixty calls are made monthly providing urgent advice to GPs and improving patient care.

Shaping a healthier future

FUTURE OUT OF HOSPITAL PLANS

NHS

Whole systems integrated care

- **Invest in a single tri-borough Integrated Community Independence Service (CIS)** to provide rapid response, discharge support, rehabilitation and reablement services on an integrated basis (health and social care) and operate 7 days a week building and growing on what we delivered in 14/15. The improved service is planned to be in place by April 2015. Embedding CIS into our Whole Systems model will ensure the full impact of CIS is achieved in terms of ensuring patients are seen by the right clinician closer to home.
- **Integrated adult social care and GP IT systems** enabling seamless transfer of patient records between hospital, community services and GP practices improving the quality of patient care.
- We will launch in Quarter 1 of next year **our Whole System model for Older People -** this will launch initially in the North focusing on **creating a dynamic, multi professional hub at St Charles.**
- The model will include a **new model of primary care** where the GP is central to caring for older people and is able to offer extended care planning appointments with rapid access to a number of other providers including social care and the third sector. In quarter 2 we will launch our model in the South.

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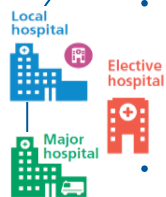
Primary care including hubs

- **Improving primary care and access:** we will continue to ensure access to good quality primary care through extended evening and weekend opening.
- **Development of a south hub** to deliver further services in the community
- **GP Federation:** as part of the Federation development process, all practices in WLCCG have agreed to work as a single federation, ensuring 100% population coverage across the CCG, and enabling further network development with the Federation.

Mental health and wellbeing

- Implement out of hospital mental health access standards, single point of access, and our integrated Crisis Mental Health Care Action Plan.
- Deliver our commitment to increase community **dementia diagnosis** services, and **increase access** to psychological therapies and specialist early intervention in psychosis services
- Implement new integrated community pathways for **urgent care, perinatal, dementia and learning disabilities.**
- Continue our pioneering work, under *Whole Systems* to develop a recovery-based, preventative **Community Living Well** service to help maintain health and well-being and prevent future crises occurring – which will be integrated into our 'Hubs'. The model will be implemented during 2015/16.
- Review Liaison Psychiatry Services at Chelsea and Westminster Hospital & St Mary's Hospital to ensure they are delivering efficient, high quality services.

Community Out of Hospital services



- **Increasing Outpatient and elective services in the community:** we will establish a new gynaecology and urology service and further develop our musculoskeletal service. We will also provide our new and enhanced cardiology and respiratory services.
- **Increased investment in neuro-rehabilitation and intermediate bed based capacity,** ensuring the appropriate provision is delivered as well as extending the community rehabilitation period up to 12 weeks in the community including support at home.
- **Develop self-management and peer support programmes/interventions,** with a focus on those with Chronic Obstructive Pulmonary Disease, cancer, diabetes and/or dementia.
- **Create a single care home placement contracting team across health and social care** in order to develop patient focused outcomes-based specifications and ensure appropriate and timely provision reducing pressure on hospitals.