

Joint Health Overview and Scrutiny Committee (JHOSC): NHS Long-Term Plan and creating an integrated care system in North West London

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Summary	This documents gives a strategic overview of the alignment between the NHS Long-Term Plan and the North West London Health and Care Partnership
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The NHS Long-Term Plan: overview and context

The Long-Term Plan has big ambitions; NHS England says it aims to save almost half a million lives, stop 85,000 premature deaths each year, prevent 150,000 heart attacks, strokes and dementia cases, give mental health care to 345,000 more young people, and create a “digital front door” into NHS services through cutting edge technology.

It also seeks to answer major questions facing the NHS, such as: how do we make the most out of exciting new healthcare technologies, what can we do to prevent illness instead of just treating it, how do we plan well for the future with a growing, ageing population, and how can we continue to attract and keep the best staff in the world? Underneath all of this, of course, sits the biggest question of all: how can we do all of this with a finite amount of money?

To deliver the plan, the NHS has secured a funding boost of 3.4% a year over the next five years. This will be the first time in NHS history that the primary, community and mental health care spend is guaranteed to grow faster than the overall NHS budget. The Department for Health and Social Care is committed to recruiting and retaining the best talent from all over the world, and expects to see “unprecedented excitement” about working in primary care in particular. There are also plans to recruit 1,000 social prescribing ‘link workers’ which would free up GPs so that people can get an appointment much more quickly when they need one. Social prescribing will give people time to talk about what matters to them and in some cases support them to find suitable activities that are a better alternative to medication.

NHS England says that by 2023-24, social prescribers will be handling around 900,000 patient appointments a year. Over the next five years, every patient will have the right to digital GP consultations.

Integrated Care Systems and the role of primary care

The key delivery mechanism is through **Integrated Care Systems**, which are stipulated to cover the whole country by 2021, typically involving a single CCG, and with populations over one million. We are developing our Sustainability and Transformation Partnership into an Integrated Care System called the North West London Health and Care Partnership, covering the health and care of our 2.2 million residents.

The plan encourages full engagement with primary care, including through a named accountable Clinical Director of each primary care network, and a primary care strategy to accompany each Integrated Care System's five year plan. This is in line with our ambitions for our local primary care plans and achievements to date.

Priorities in the Long-Term Plan

In order to make the NHS more joined-up and coordinated in its care, more proactive in the services it provides and more differentiated in its support offer to individuals, five major changes to the NHS service model are stipulated in the long term plan over the next five years:

1. Boost Local Services (and other care provided in the community), and dissolve the primary and community health services divide.
2. Redesign and reduce pressure on emergency hospital services.
3. People will get more control over their own health, and more personalised care.
4. Digitally-enabled primary and outpatient care will go mainstream across the NHS.
5. Local NHS organisations will increasingly focus on population health and local partnerships with local authority-funded services, through new Integrated Care Systems (ICSs) everywhere.

NHS England London priorities: Start well, live well, age well

Prevention and health inequalities

We will... reduce preventable issues related to or caused by smoking, obesity - and in doing so, achieve specific reductions in inequalities across England.

Healthy childhood and maternal health

We will... deliver a 50% reduction in stillbirths, neo-natal mortality and maternal deaths by 2025, further improvements to infant mortality, reductions in childhood obesity and improved care for children with long-term conditions.

Integrated and personalised care for people with long-term conditions and older people with frailty, including dementia

We will... design better support for people to live well with long-term conditions and frailty and reductions in demand for bed based care through proactive support.

NHS England clinical priorities

Cancer

We will... deliver specific improvements in cancer survival rates including faster and earlier diagnosis.

Cardiovascular and respiratory

We will... improve outcomes for respiratory disease, reduce deaths from heart disease and stroke, reduce variation, and improve hyper acute care and rehabilitation.

Learning disabilities and/or autism

We will... improve diagnosis, early intervention and personalised support for children and young people with learning disabilities and/or autism.

Mental health

We will... improve access to appropriate mental health care for children and young people, crisis care for all ages, and perinatal mental health care. We also looking at how we might improve community mental health care for adults with a severe mental illness and complex needs.

Primary care

We will... establish a more networked model of care to increase resilience and expands the range of services for patients closer to home. The networked model will support increased Multi-Disciplinary Teams (MDTs) working in primary care.

Primary and community care

We will... ensure that over the next five years, every patient will have the right to digital GP consultations. Redesigned hospital support will be able to avoid up to a third of outpatient appointments.

GP practices

We will... fund the creation of practices typically covering 30-50,000 people with integrated teams of GPs, community health and social care staff. GPs will sign new “network contracts” as part of NHS England’s plans to extend the scope of primary and community services to deliver fully integrated community-based health care and risk stratification to reduce unwarranted variation from 202/21. Investment in primary medical and community services will also grow faster than the overall NHS budget, which means there will be a ring-fenced local fund worth at least an extra £4.5 billion a year at the national level in real terms by 2023/24.

Implications for NW London and our Health and Care Partnership refresh

We have been working with our providers across NW London for some time to deliver benefits to our population through our STP, including maternity, paediatric transition, home first, and access to primary care.

We are now refreshing our areas of focus to ensure it reflects what matters to our patients, and to ensure we are reducing any unnecessary variation in our care across our patch, whilst delivering the priorities set out in the long term plan. Our proposed areas of focus are:

- Healthy communities and prevention

- Maternity, children and young people
- Primary, social and community care
- Urgent and emergency care
- Mental health
- Cancer care
- Hospital and specialist care

Alignment with national NHS Long-Term Plan

We are required to publish a response to the Long-Term Plan, showing how it will be implemented in North West London. Our existing local plans align well with the national direction of travel and we are currently looking at where the gaps and synergies are, with a view to developing our local plan.

Patient and public involvement

The national plan is already based on a period of NHS engagement with over 3.5million people from all around the country. But the engagement with the public isn't over yet. NHS North West London CCGs will now be having a series of conversations with people who live in North West London about the local detail of our plans, and about how what we're doing will benefit residents and their families.

One of the ways people will be able to get involved will be through our soon-to-be-launched Citizen's Panel, a new democratic platform through which any member of the public can meaningfully influence NHS decision-making at a local level, in an easy, flexible way. We will also be working closely with Healthwatch and other community and voluntary sector partners – as well as, of course, engaging with patients regularly through all our usual channels.

Once we've heard from residents about how they'd like us to make these plans a reality in North West London we will be publishing our local plan for 2019-20 this year, followed by our full plan covering the next five years. We look forward to hearing not only from our residents, but also from you, as NHS colleagues, so that we can all improve our health and social care system together.

Local conversations with the public and stakeholders

We want to talk to local people and organisations about the Long-Term Plan. It is important to recognise that in doing this, we are by no means starting from scratch. We have been talking to local people and stakeholders about changes to local health services for many years, and we have recently been working across North West London on a process of 'resetting' our long term strategy. We have set a clear direction of travel, which is strongly aligned to the national plan.

It is our intention to co-produce our engagement plan with Healthwatch, our integrated lay partner group and partners in the NHS and local authorities. We have been working with the five Healthwatch organisations and lay partners to develop an outline approach, which we will work through with these and other partners in immediate future.

The focus is likely to be on involving the public and stakeholders in considering and influencing the tangible impacts on local services and care. It also presents the opportunity

to bring about a step change in public engagement across North West London, with the development of a dedicated Citizens' Panel, a co-produced, aligned approach to outreach and stakeholder engagement across the patch and much closer partnership work with Healthwatch, the voluntary sector and local authorities to broaden our reach and interaction with our local communities.

The following draft objectives have been agreed with Healthwatch, lay partners and provider colleagues and by the Health and Care Partnership Programme Board.

A step change in public engagement

We will...

- Establish a Communications and Engagement Advisory Group, working with the Integrated Lay Partner Forum and local authorities, to plan and develop future engagement activity as a single NHS, working in partnership with our local authorities, Healthwatch, the voluntary sector and the public.

Develop a 4,000-strong Citizens' Panel for North West London to support, comment on and develop our thinking on a range of healthcare issues (we have secured funding for this from NHSE and would look at align with any existing panels).

Work with Healthwatch to develop face to face conversations with people and groups across North West London, to develop and adapt our thinking.

- Supplement our events by holding webinars/tweet chats as appropriate, focused on key elements of our plans: possible themes to be discussed with partners and Healthwatch.
- Outreach engagement to take place in each North West London borough, ensuring that key audiences in each borough are reached, including those that are seldom heard (specific objectives to be agreed) – a lot of this will involve going to where people are by attending regular meetings.
- Develop our Community Voices programme as a key way of reaching into communities, having unprompted conversations and gathering real time feedback and experiences.
- Develop a schools resource pack to enable messages about healthy living to be disseminated to children and young people (already underway, in partnership with Imperial College Partners).
- Ensure NHS and local authority staff are engaged, informed and involved in the development of the plan.
- Ensure due regard is paid to equalities impacts of any proposed changes (a dedicated NW London Equalities Steering Group is being set up).

- Recruit volunteers to support community engagement once the Citizens' Panel is up and running.

Workforce, Training and Leadership

Workforce is one of the key enablers that will be essential to the success of these plans, both at a national and local level.

This means we need to set out the future size and shape of the workforce, and then set out what can be done in the short, medium and long-term to deliver this.

Wider reforms will be finalised in 2019 when the workforce education and training budget for HEE is set by government, and will be included in the comprehensive NHS workforce implementation plan published later this year, overseen by the new cross-sector national workforce group. Our initial commitments on workforce are as follows:

- Funding is being guaranteed for an expansion of clinical placements of up to 25% from 2019/20 and up to 50% from 2020/21.
- New routes into nursing and other disciplines, including apprenticeships, nursing associates, online qualification, and 'earn and learn' support, are all being backed, together with a new post-qualification employment guarantee.
- International recruitment will be expanded over the next three years, and the workforce plan will set out new incentives for shortage specialties and hard-to-recruit to geographies.
- More flexible rostering will become mandatory across all trusts, funding for continuing professional development will increase each year, and action will be taken to support diversity and a culture of respect and fair treatment.
- Formal regulation of senior NHS managers could be introduced to improve their standing and help fill the most difficult jobs, with the NHS to consider "the potential benefits and operation" of a professional registration scheme.
- More doctors will be encouraged to train as generalists rather than specialising in a specific area of medicine in an effort to shift away from the dominance of "highly specialised" medicine and to ensure medics are better able to provide care to patients who have more than one long-term condition.