

Commissioning Intentions

2018/2019

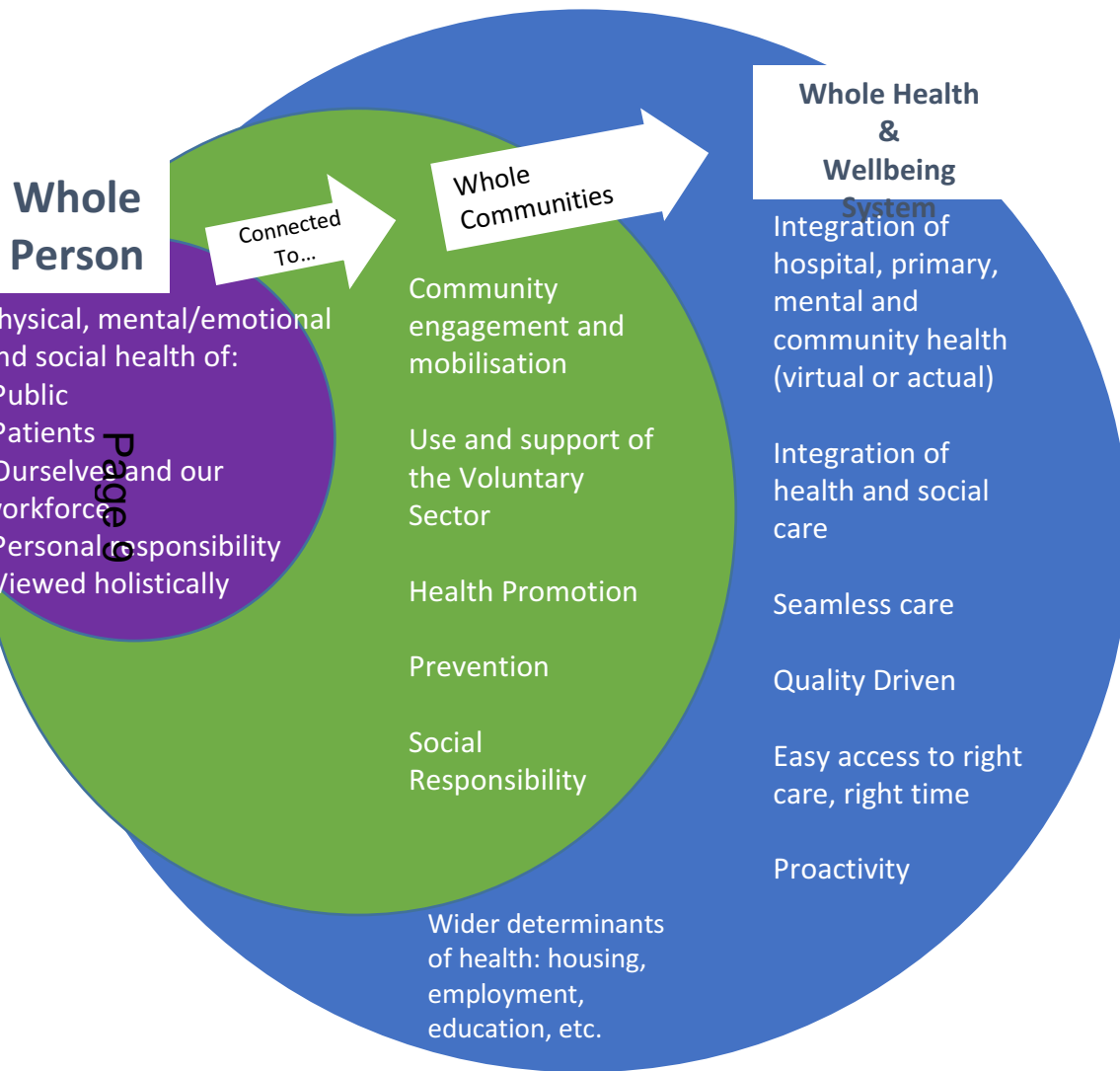
Merton and Wandsworth
Local Transformation Board

What will this mean ... for Patients/Communities/Population ... you ?

Delivering Patient Centred Care.

- We will engage and listen to patient representatives through our Commissioning process.
- All Merton patients should have consistent access to high quality care regardless of where in the borough they live.
- Services should be safe, evidence-based and focused on improving outcomes for patients.
- Services should target health inequalities.
- Proactive and preventative care will support people earlier in the pathway.
- Integrated, holistic and personalised care; (e.g. risk stratification, case management and MDT will deliver improved patient outcomes and significantly reduce avoidable/unnecessary secondary care attendance).
- The promotion of patient self-care and activation will improve patient health and well-being and encourage better self-management of conditions.
- Where services can be effectively provided out of hospital and closer to patients' homes, they should be.

Merton 'Whole Person' Vision



For example; Neurology

Patient 'Activation'

- Group education for acute headache/migraine sufferers.

Primary Care Alignment

- Headache referral pathway to avoid unnecessary visits.

Community Integration

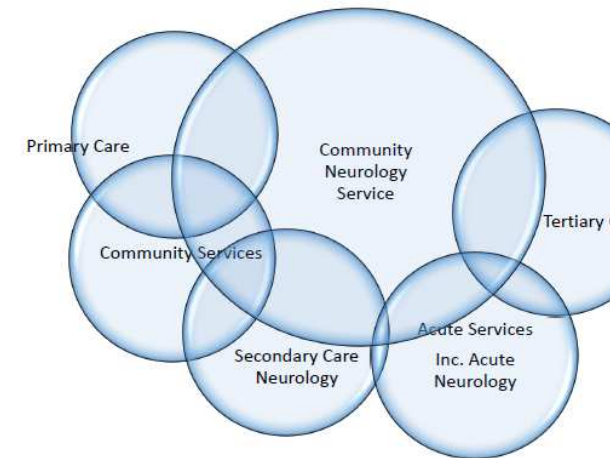
- Integrated Consultant-led, specialist nurse delivered service; with proactive case finding (through risk stratification) and MDTs.
- Aligns with Merton's HARI and MERIT, and Wandsworth's ECP500 service models.
- Mental Health teams also integrated with this model.

Acute Integration

- Clinical thresholds agreed, so patients with multiple long term conditions over 65 years are managed by Consultant Geriatrician, and not many individual acute departments, (e.g. neurology, cardiology etc).

Emergency Integration

- Direct 'emergency' GP referral to Consultant, avoiding A&E.



Commissioning Intentions Merton & Wandsworth Local Transformation Board

Background to development of Commissioning Intentions

- Five Year Forward View
- Right Care Opportunities
- Financial position and NHSE directions
- Priorities for Merton & Wandsworth
- SWL STP & Commissioning Intentions

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Local Transformation Boards – set up to oversee the delivery of initiatives across the Local Delivery Unit

- Partnership developing an agreed set of priorities
- Aligned to the South West London commissioning intentions
- Deliver improved outcomes for local residents.

The first time LTBs will be overseeing the development and delivery of sub regional commissioning intentions, which are aligned to year two of the SWL 17/19 commissioning intentions . This means we are working closely with patients and stakeholders to develop our priorities for 17/19

LTB Commissioning Intentions & System Impact

Whole Merton Vision

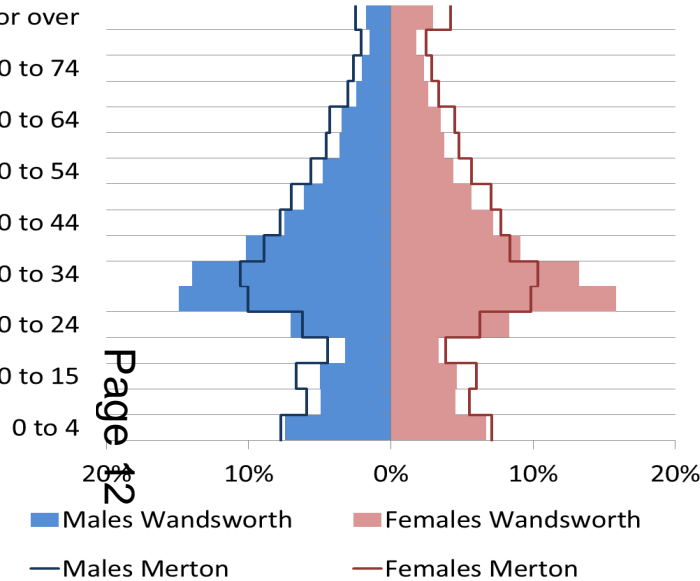
Commissioning Programme:

- Urgent Care
- Primary Care
- Planned Care
- Integrated Care
- Children
- Mental Health

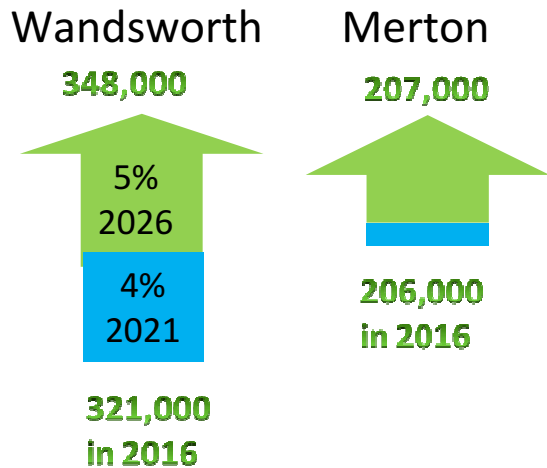
Outcomes to deliver

- Appropriate use of ambulance call outs
- Using alternatives to A&E to reduce inappropriate A&E attendances and emergency admissions
- Ensuring good use of hospital beds – ensuring patients are only in hospital for as long as necessary and are supported on discharge
- Providing community based diagnostics
- Providing community based outpatient clinics
- Ensuring delays in discharge from hospital are reduced

demographic context



East Merton has the highest levels of health inequality within Merton



By 2026 the Merton population is not expected to grow significantly. With Nine Elms the Wandsworth population will grow by 27,000

Morbidity in adults (%)

50%



20%



Rethink Mental Illness.

10%



5%



Educational Health and Care Plans for children have risen across both areas

An additional 1000 people in each borough will have restricted mobility by 2025, an increase of 23%

In the population aged over 65 there will be an increase in diagnosed dementia by 600 in Wandsworth and 500 in Merton by 2025. The combined total will be 5,000 across both areas

STP Deliverables – *Proactive, accessible & appropriate*

- Care closer to home
- Improve care for residents of care homes
- Improve identification and support for people at end of life, increasing Quality of Life and patient preferences
- One stop shop models of care where clinical and diagnostic treatment plans are delivered in one visit
- Embed triage and navigation, to improve access to appropriate urgent and emergency care support
- Increase access to primary and community based urgent and emergency care
- Improving access to primary care and increase access to community based crisis care and home based integrated care packages
- Supporting enhanced primary/community services to be delivered on a locality basis to align with the primary care model of care
- Making best use of acute resources to deliver timely and effective urgent and emergency care
- Right Time Right Care Right Setting

Opportunities and challenges

- **We want to make the patient journey better but we also need to make efficiency savings**

- Clearer pathways
- Reducing inappropriate use of acute services
- Improving access to community services and care closer to home
- Improving discharges from hospital
- Making the system work better together e.g. looking at integrated approach across programme

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- **New approaches**

- First time provider Cost Improvement Plans are considered and built into Commissioning Intentions - recognition we are one health economy across the STP.
- Agreement transformation can bring longer term benefit to patient care and affordability but needs careful management
- Need to explore ways to develop fair and transparent ways of working across the local health and care economy.

Questions

- **Have we got the approach right?**
- **Are we missing something?**

Please send feedback to Debbie.Baronti@swlondon.nhs.uk

Thank you