



South West London  
Health & Care  
Partnership

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# Overview of South West London Health & Care Partnership

South West London Joint Health Overview Scrutiny  
Committee meeting

Wednesday 30 January 2019



Agenda Item 5

## We want to use our time with you today to:

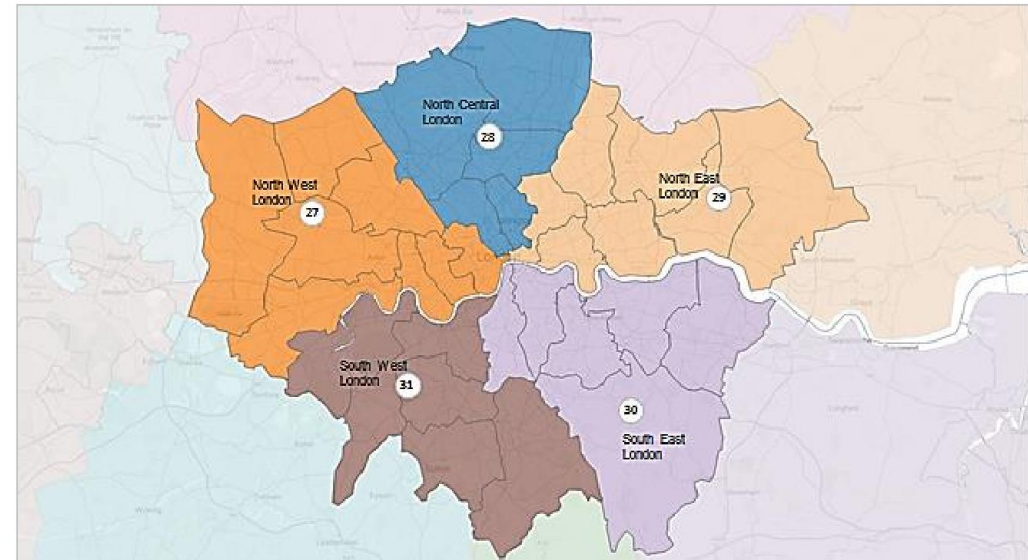
- Explain what an STP is
- Share how and why we refreshed the STP vision for South West London
- Share our emerging priorities for South West London including:
- Discuss developing Local Health and Care Plans for each borough
- Outline NHS Long Term Plan & what it means for South West London
- Update you on our work programmes and their achievements

# What is an STP

- It's a partnership: care is better when it is centred around a person, not an organisation.
- Bring together all NHS organisations with local authorities and other partners, to work together to provide joined-up care for local people
- Delivering the NHS Five Year Forward View- 44 STPs in England areas were originally identified as the geographical “footprints” on which the plans were based. They were plans not partnerships.

- Page 23 STPs were created in London

South West London  
South East London  
North Central London  
North East London  
North West London



# Who makes up the Health and Care Partnership

Local NHS clinical commissioning groups, provider trusts, local authorities and patient representatives across south west London came together to form the South West London Health and Care Partnership.

## South West London's Health and Care Partners are:

- Our six Clinical Commissioning Groups (CCG) of: Croydon, Kingston, Merton, Richmond, Sutton and Wandsworth
- Our six local authorities: Croydon, Kingston, Merton, Richmond, Sutton and Wandsworth
- Our acute and community providers: Central London Community Healthcare, Croydon Health Services NHS Trust, Epsom and St Helier University Hospitals NHS Trust, Hounslow and Richmond Community Healthcare, Kingston Hospital NHS Foundation Trust, The Royal Marsden Foundation Trust, St George's NHS Foundation Trust, and Your Healthcare
- Our two mental health providers: South West London and St George's Mental Health NHS Trust, South London and the Maudsley NHS Foundation Trust
- GP Federations in each of the six boroughs
- London Ambulance Service
- Healthwatch

We want local people to [start well, live well and age well](#).

# In November 2017 we refreshed the South West London STP because:



- The perception of the South West London STP has been:
  - Closure of hospitals
  - Hospital bed reduction
  - Stakeholders were not signed up to the financial analysis
  - Some local authorities did not feel fully involved and felt social care was not integral enough in the plan

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## Our refreshed approach is emphasising:

- Prevention and early intervention - tackling the social determinants of health
- Local partnerships strengthening focus on locality teams made up of community, primary and social care
- The actions that we will take to deliver improvements for local people
- The progress we have made at local level for patients in our first year

# We engaged around creating the STP refresh

We listened to feedback and developed a two-stage approach to the refresh to allow time for discussions with organisations and with relevant key stakeholders, and more time to develop fully worked up *Local Health and Care Plans*.

## Stage one : November 2017

Page 26 **South West London STP one year on:** a discussion document which outlines Health and Care commitments and priorities for the next two years, context including financial and clinical issues, and our delivery so far

## Stage Two : Spring 2019

**Publish “Local Health and Care Plans” for each borough** The borough’s vision; model for health and care; local context and challenges; actions to address financial and clinical sustainability issues and meet the health and care needs of the local population. We will co-produce these plans with local authorities and wider partners.

# Feedback from local communities informed the November 2017 Refresh

## Keeping in touch with local communities

- Local events for people to discuss the Partnership with clinicians, managers and local authorities in our six boroughs.

## Grassroots engagement

- Working with local Healthwatch organisations, we have run an extensive grassroots engagement programme, reaching 5,000 seldom heard people - shortlisted for a national award.

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## Patient and Public Engagement Steering Group

- Our Patient and Public Engagement Steering Group (PPESG) advises us on all communications and engagement with representatives from across each borough



# Our approach to patient engagement

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## Direct involvement



Julia – Cancer Clinical Design Group

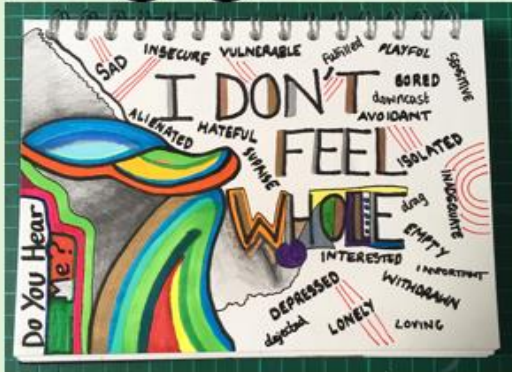
- Decision making level
- Independent challenge
- Reps (PPVs and HW) on clinical/strategic groups, patient stories
- PPESG

## Wider participation



- Ongoing conversations, builds relationships
- Insight informs strategy development + work streams
- Grassroots outreach

## Targeted engagement



- Influence and shape service/pathways in each work stream
- Focus groups, surveys, face to face e.g. perinatal mental health; CYP people self harm

## You Said: We Did



- 5,000 contacts last year
- Feedback to each work stream/and SRO
- This report details impact



# As our result our refreshed partnership approach is... ..



- A local approach works best for planning health and care.
- Strengthen the focus on prevention and keeping people well – the greatest influences on our health and wellbeing are factors such as education, employment, housing, healthy habits in our communities and social connections.
- The best bed is your own bed – lets keep people well and out of hospital.
- Care is better when it is centred around a person, not an organisation. Clinicians and care workers tell us this.
- The South West London Health and Care Partnership is coming together to champion children and young peoples' mental health as a shared health promotion and prevention priority.
- Involving people at local level will remain critical.

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# System-wide focus on one single health prevention priority



## Children and Young People's Mental Health

- This year the Health and Care Partnership agreed to work on one health promotion and prevention priority as a system. We have therefore worked with Directors of Public Health to identify what that priority should be for the next 1-2 years.
- Across south west London we have a high number of children who are self-harming, and through talking to children and young people themselves, partners across education, health and care, and parents, we now know that one of the key root causes of self-harm, is the lack of consistent wellbeing support and early intervention for our young people.
- As part of our refreshed strategy, the South West London Health and Care Partnership is coming together to champion children and young peoples' mental health as a shared health promotion and prevention priority.
- Our ambition is to reduce by 20%, the number of children and young people presenting at A&E as a result of self-harm, over the next three years.

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# System-wide focus: Children and Young People's Mental Health

- Health and Care Partnership agreed to this one health promotion and prevention priority as a system.
- Across south west London we have a high number of children who are self-harming.
- Since January 2018, we have come together as a children and young people's partnership group, made up of Head Teachers, GPs, mental health professionals, health and social care professionals and the voluntary sector from across south west London - people on the front-line who work with children every day.
- We also engaged with over 1,200 children, young people, parents and carers in our boroughs to prioritise these actions for us.

## Our picture of CYPMH transformation in SWL



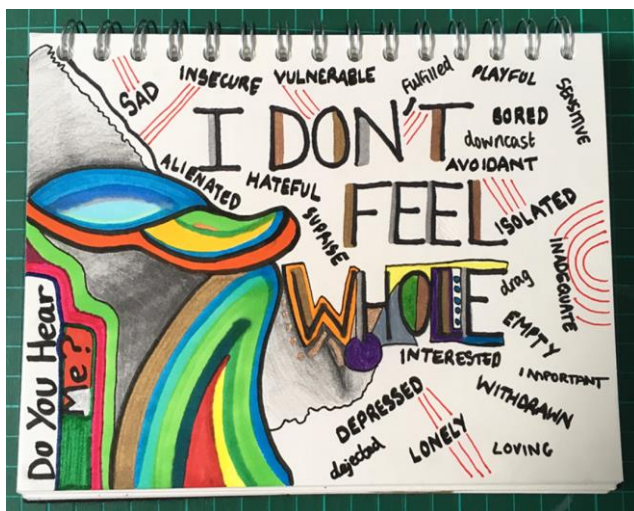
# The partnership has secured £1.85m funding for Children and Young People

- Secured £1.85m of national trailblazer funding to create mental health support teams in three of our SWL Boroughs, building on the work we are already doing.
- This will include new services such as online peer support for young people, mental health first aid for teachers and courses for parents to help them talk to their children about mental well-being, a single point of access for services, and a directory of services.
- While the trailblazer pilot covers the boroughs of Merton, Sutton and Wandsworth; Croydon, Kingston and Richmond will be “fast followers” to adopt the learnings from these initial pilots

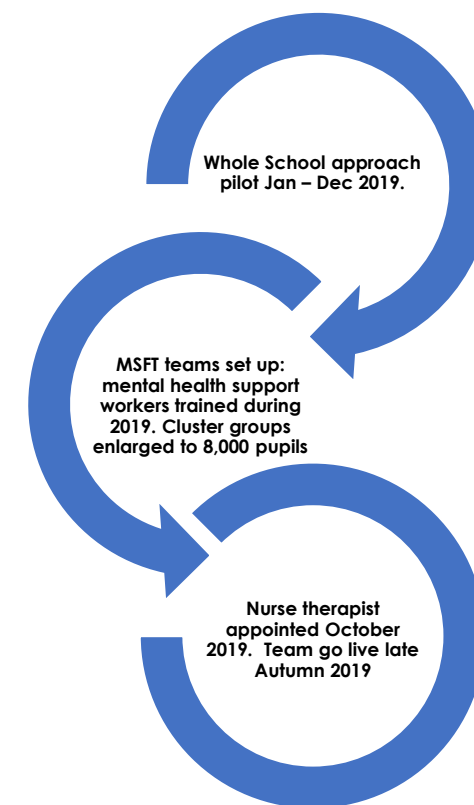
# Mental health support teams – summary

- It is intended that each mental health support team (MHST) will cover a cluster group of schools, each with a population of approximately 8,000 children and young people. We will deliver a phased roll out and expect the teams to be fully live from late Autumn 2019.
- The MHST includes Mental Health Support Workers who will be trained by Health Education England (“HEE”) during 2019. HEE are currently recruiting to these posts. Training is being delivered across a number of universities in England and the MHSW will be allocated to trailblazer sites during their training (expected from January 2019). We will be linked with students from Kings College London.
- The South West London bid set out how we will link the MHST to the work already being undertaken on the ‘whole school approach’ which itself is being piloted from January 2019. Given this, it is anticipated that we will work with the cluster groups that already exist in order to build upon this work. These cluster groups are currently c 4,000-5,000 pupils and as such we will need to expand the current cluster groups to ensure population coverage of 8,000

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- MHSTs are intended to deliver evidence based interventions in or close to schools for those with mild to moderate mental health issues (estimated at 500 interventions per 8,000 students per year).
- They will help children and young people with more severe needs access the right support.
- The service model will be determined locally and our proposals for this for each of our boroughs will be developed in early 2019.
- We will engage with children and young people in the development of the MHSTs. To ensure that we meet our commitments in this area we will ensure that all workstreams build in engagement as part of their plans.
- We have committed to supporting the national evaluation of this work. This will align with our own analysis that we are undertaking as part of the whole school approach.



## Developing Local Health and Care Plans

We believe in an inclusive and innovative approach to care.

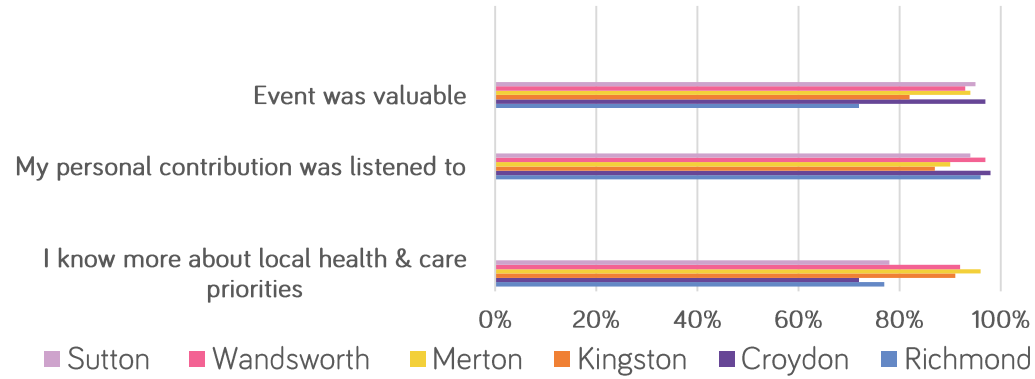
[www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

# Local Health and Care plans- Background

- In November 2017, we agreed that, to produce borough based local health and care plans.
- Since that time local systems have been working on defining their cases for improvement and using this information have held engagement events to define actions that will have the greatest impact on the issues identified.
- In November 2018 we held health and care plan events in each borough
- Aim was to help define actions for next two years that will have biggest impact on the population
- Design groups held in each borough with representatives from Health, Social Care and the voluntary sector partners
- On average 150 people attended each event – just under 1000 people in total

# High level feedback from participants at the events ...

% of people who felt the event was worthwhile



‘We are all saying and wanting the same thing for the borough; customer, colleagues, family and friends’



‘Eye-opening and reassuring’

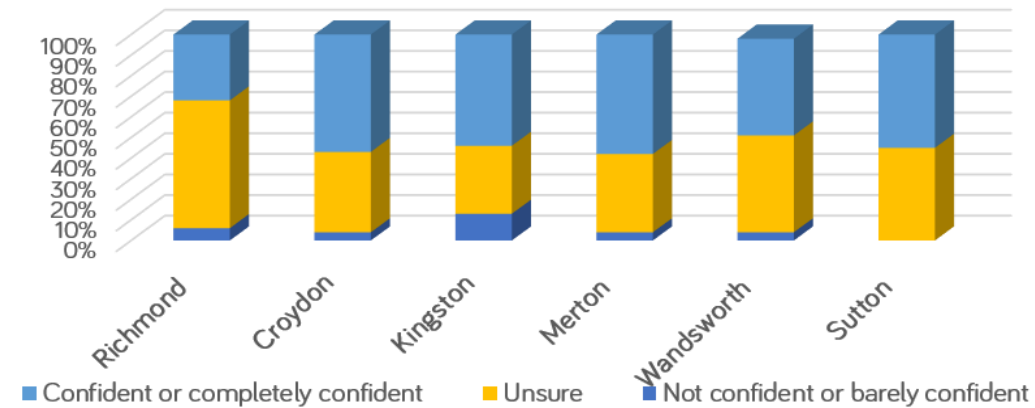
‘I got to mix and mingle with brilliant people from all walks of life’

‘Everyone listened with no interrupting and equal opportunities’

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Priorities outlined will make a positive difference to health and care services in this borough



‘The time spent and the efforts put in the event made me confident about the future results’





# Local plans to address local issues

- These plans will:
  - Identify what it means to *start, live and age well* in the borough and the actions that will be taken to ensure the vision for each is met
  - Be co-designed and owned by both health and local authority partners
  - Address the developing health and care needs of the local population
  - Outline the vision for health and care locally and the health and care model in the borough
  - Identify and address financial issues in the borough so that we can take a system-wide approach to our collective financial challenges
  - Identify and address workforce, clinical and other sustainability issues in the borough
  - Outline what the local system will do to support the SWL health prevention/promotion priority (Children and Young People's Mental Health)
  - Be designed to meet national performance targets or other requirements

# The draft structure of a health and care plan

- Our Health and Care Partnership and joint vision
- Understanding our borough: A case for improvement
  - Demographics
  - Challenges (including financial sustainability)
- Our picture of health and care: Our model for health and care
- What local people have told us
- Taking action
  - Start well
  - Live well
  - Age well
- Expected Benefits and investment required
- How will we measure the impact of this plan
- Implementation and delivery plan

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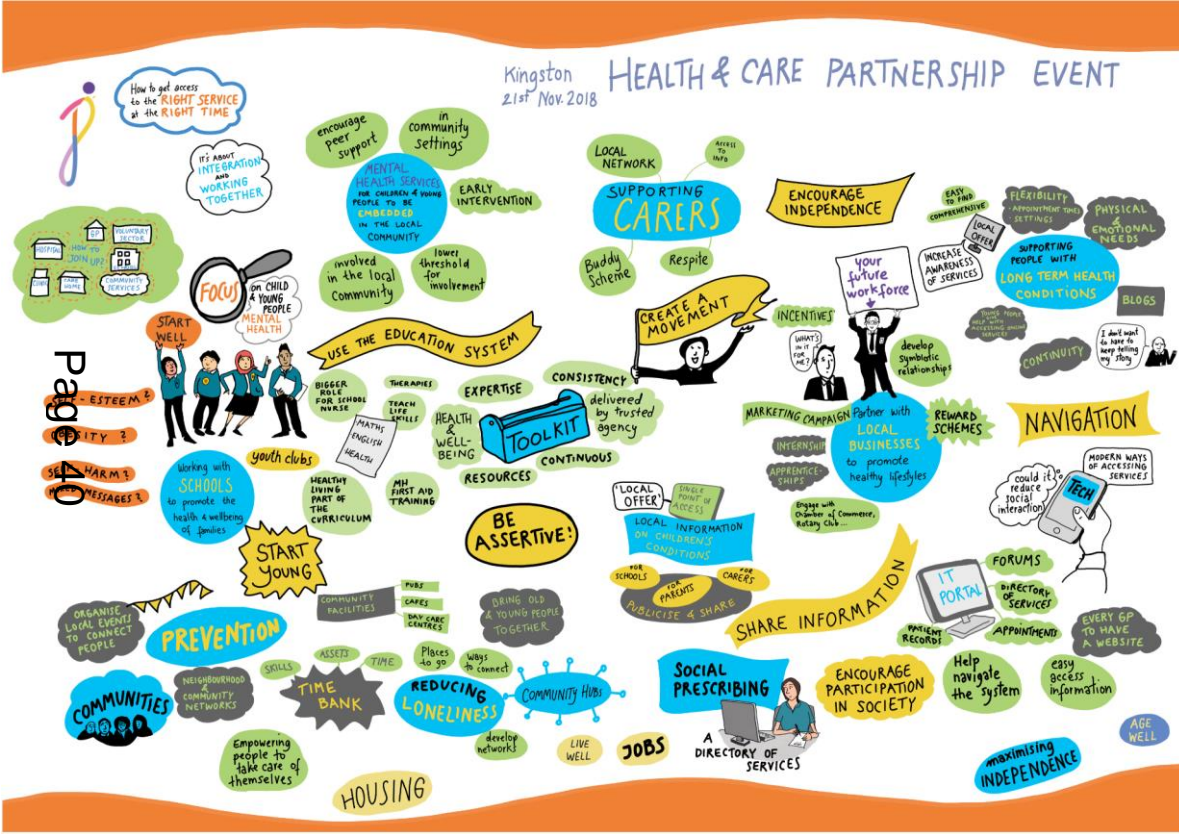
We have created a visual summary for each borough ...

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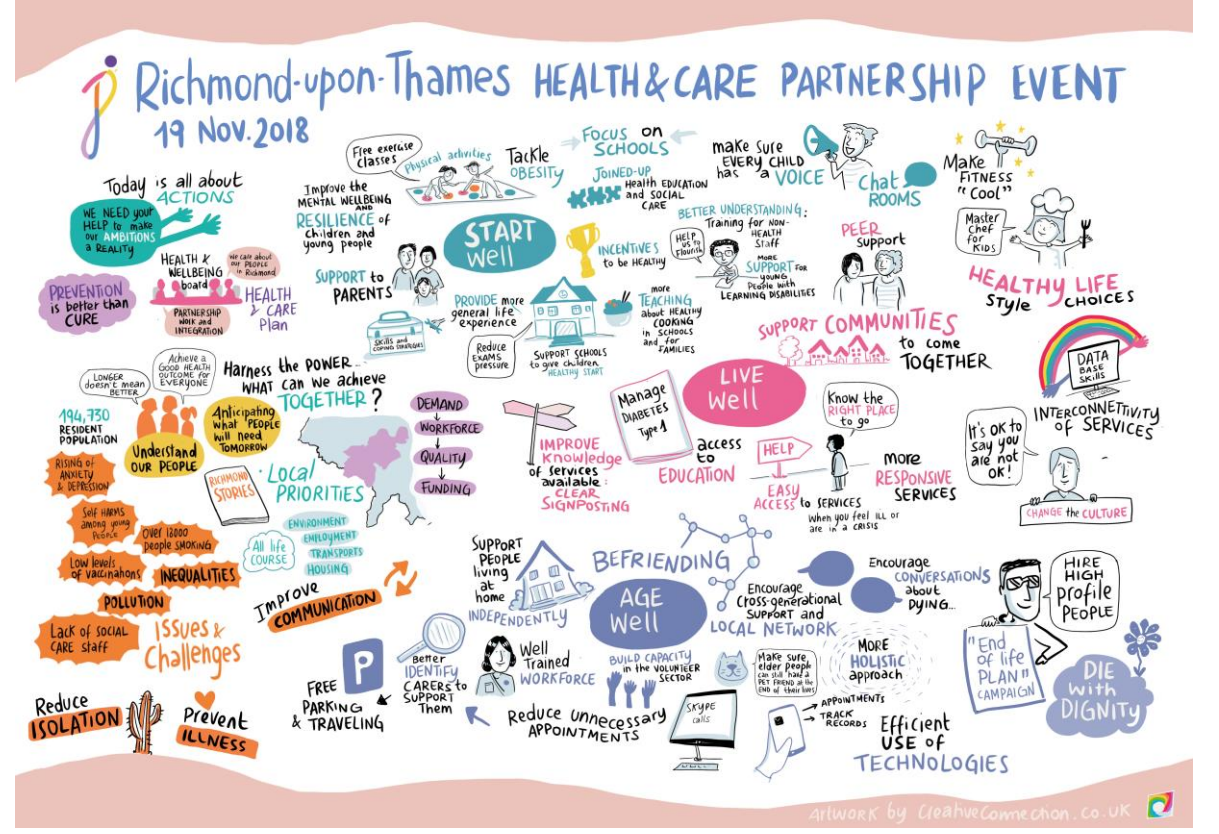
... *still to be approved by each design group*

DRAFT

# Kingston-Upon-Thames



# Richmond-Upon-Thames



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Sutton



Wandsworth



# NHS Long Term Plan



- In June 2018, the Prime Minister made a commitment that the Government would provide more funding for the NHS for each of the next five years, with an average increase of 3.4% a year.
- In return, the NHS was asked to come together to develop a long term plan for the future of the service, detailing our ambitions for improvement over the next decade, and our plans to meet them over the five years of the funding settlement.
- A number of working groups – comprising local and national health and care leaders, clinical experts and patient representatives – were established and engaged extensively with relevant stakeholders to develop specific proposals for inclusion.

# NHS Long Term Plan

The Long Term Plan sets out specific ideas and ambitions for how the NHS can improve over the next decade: covering all three life stages:

- Making sure everyone gets the best opportunity to **start well**;

through better maternity services, joining up services from birth through to age 25, improving care for children with long term conditions like asthma, epilepsy and diabetes; revolutionising how the NHS cares for children and young people with poor mental health with more services in schools and colleges.

- Delivering world-class care for major health problems to help people **live well**;

with faster and better diagnosis, treatment and care for the most common killers, including cancer, heart disease, stroke and lung disease, achieving survival rates that are among the best in the world. Supporting individuals with mental health problems, making it easier to access talking therapies and transforming how the NHS responds.

- Supporting people to **age well**;

with fast and appropriate care in the community, including in care homes, to prevent avoidable hospital admissions for frail and older people by increasing the numbers of people who can take control of their healthcare through personal budgets.



# NHS Long Term Plan: High level messages



- Focus on prevention and reducing health inequalities – specific new evidence-based NHS prevention programmes
- New clinical standards will be set to build on successes of stroke etc – Clinical standards review will be published in Spring 2019
- NHS priorities for care quality and outcomes improvement for the next 10 years, wider than FYFW – cancer, mental health, diabetes, multimorbidity, healthy aging including dementia, children’s health and wellbeing, maternity and neonatal, cardiovascular and respiratory conditions and learning disability and/or autism
- Reforms to hospital emergency care – every hospital with a type 1 A&E dept will move to a Same Day Emergency Care model; hospitals will establish acute frailty services
- Roll out of NHS Personalised Care model across the country
- The NHS and social care will continue to improve performance at getting people home without unnecessary delay
- Boost “out of hospital care” – Primary care and community care funding and requirements
  - Urgent community response and recovery support to deliver within two hours of referral
  - Reablement care within 2 days of referral
  - Primary care networks created with new “shared savings” scheme

# NHS Long Term Plan: High level messages



- Renewed commitment that mental health services will grow faster than the overall NHS budget – new ringfenced investment fund created (£2.3 bn by 2023/24)
- Guaranteed NHS support to people living in care homes – vanguard model rolled out
- Greater recognition and support for carers – Quality Markers in primary care that highlight best practices in carer support and identification
- Workforce is a significant focus - Expansion in nursing and other undergraduate places; new routes into nursing and other disciplines include apprenticeships; flexible rostering will become mandatory; doubling of volunteers
- Better use of data and digital technology
- Integrated Care Systems across the country by April 2021
- Funding
  - Major reforms to NHS financial architecture, payment systems and incentives
  - New financial recovery fund and “turnaround” process established
  - Expectation that over the next 5 years the NHS, trust sector, local systems and individual organisations will return to financial balance
- Legislative changes that would support more rapid progress outlined

# NHS Long Term Plan- what does it mean for SWL?

- Now the plan has been published, local SWL health and care organisations, working together as part of systems, are being asked to develop their own strategies for the next five years.
- These strategies will set out how they intend to take the ambitions that the NHS Long Term Plan details, and work together to turn them into local action to improve services and the health and wellbeing of the communities they serve – building on the work they have already been doing.
- Staff, patients, the public and stakeholders will have the opportunity to help determine what the plan means for their area, and how services need to adapt and improve.
- Local Healthwatch groups will receive national funding to support local health organisations in ensuring that the views of patients and the public are heard. Age UK will be leading work across a range of other charities to provide specific opportunities to hear from people with specific health needs.

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# Current thinking on SWL and the requirement to develop a 5 year strategy

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- Croydon Local Health & Care Plan
- Kingston Local Health and Care Plan
- Merton Local Health and Care Plan
- Richmond Local Health and Care Plan
- Sutton Local Health and Care Plan
- Wandsworth Local Health & Care Plan

**Local Borough plans**

**Enhancing Clinical Care and Standards**

- SWL Clinical Strategy (including: Cancer; Cardiovascular and respiratory; Learning Disability and Autism; Mental Health; *Maternal Health?*)

- Workforce, Training and Leadership

**Enhancing our Workforce**

**Using technology to improve care**

- Digital and Technology Strategy

- Integrated Care organisation

**Our System**

**Local Health and Care plans form an essential part of the SWL strategy – each plan is a stand alone documents for local systems but form chapters of the SWL five year strategy**

**Long term plan priorities covered here:**

- Prevention, Personal Responsibility and Health Inequalities
- Healthy Childhood and Maternal Health (*unless Maternal health agreed to continue at scale and therefore in the next chapter*)
- Integrated and Personalised Care for People with Long Term Conditions and Older People with Frailty, including Dementia

**Long term plan clinical priorities to be covered here:**

SWL Clinical Strategy to form this chapter to include Long term plan priorities of:

- Cancer
- mental health
- Diabetes
- Multimorbidity
- healthy aging including dementia
- children’s health
- cardiovascular and respiratory conditions
- learning disability and/or autism

**Critical enablers will be identified as separate chapters of the strategy**

**Long term plan critical enabler priorities to be covered here:**

- Workforce, Training and Leadership
- Digital and Technology
- Primary Care (*parts that are not covered in local health and care plans*)
- Research and Innovation
- Clinical Review of Standards
- System Architecture
- Engagement

**Long term plan priorities to create integrated care by April 2021**

**This section will outline how we plan to do this across network, place and system level**

## Our work programmes and their achievements...

We believe in an inclusive and innovative approach to care.

[www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

# We work in partnership with CCGs and Provider Trusts ...



For each programme there is a Senior Responsible Officer and in most cases a Clinical Lead.

All Senior Responsible Officers (SROs) are either Managing Directors or Alliance Directors:

Mental Health and learning disabilities – Tonia Michaelides, Managing Director Kingston and Richmond CCGs

Primary Care – Lucie Waters, Managing Director Sutton CCG

Cancer and Urgent and Emergency Care (UEC) – Jonathan Bates, Director of Commissioning Operations, SWL

Alliance

Planned Care – James Blythe, Managing Director Wandsworth and Merton CCGs

Digital and workforce – Karen Broughton, Director of Transformation and Strategy

Maternity and children and young people – Gwen Kennedy, Director of Quality

Estates – James Murray, Chief Finance Officer

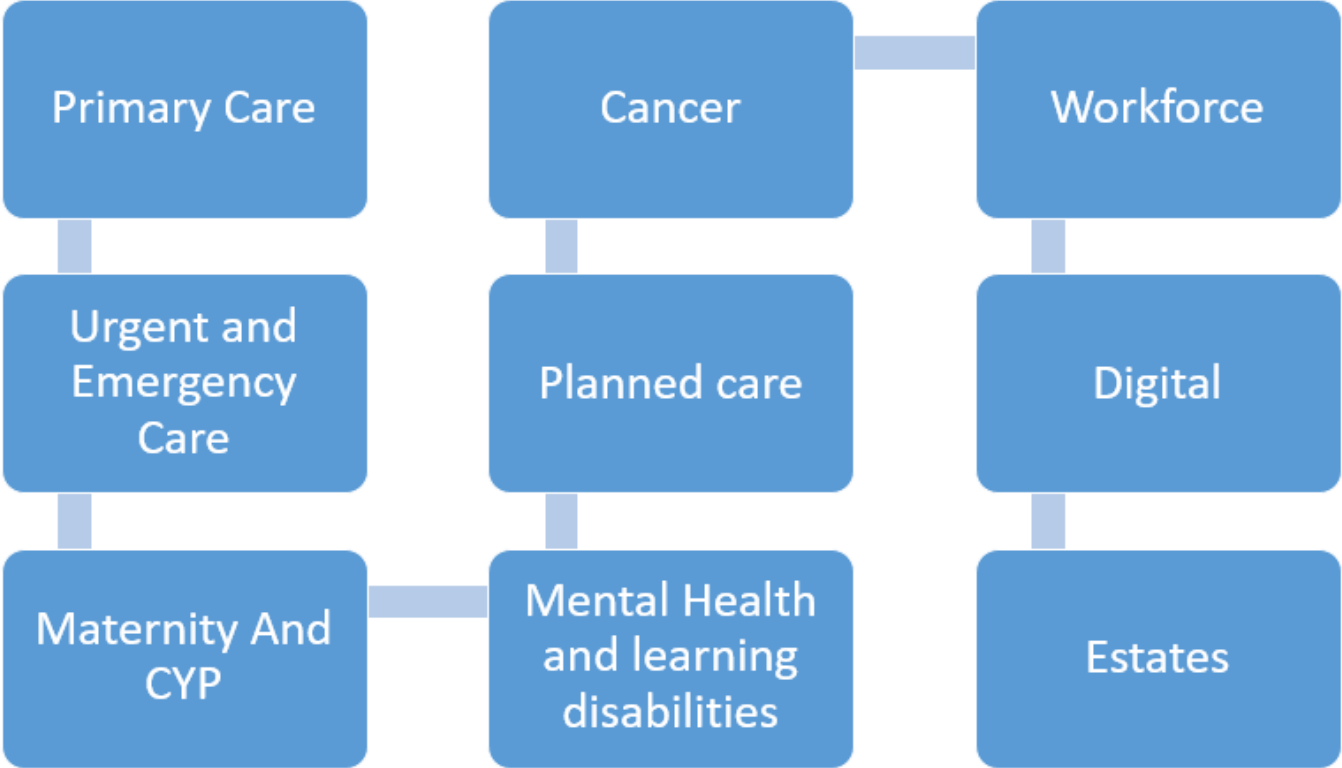
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This is how we ensure that the work of the health and care partnership joins the work being undertaken in the CCGs and Provider Trusts.

Programmes are typically delivered in partnership across the CCGs, NHS Providers and the Programme office teams

# The Health and Care Partnership programmes fall into a number of categories

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# Programme summaries and achievement to date



## Primary Care :

Transformation of SWL primary care services focuses on three main projects; Workforce, Access (including online consultations) and Provider Development, to ensure primary care is sustainable in the future.

## Programme achievements to date:

- Developed and completed International GP prospectus to attract International candidates to South West London
- Provided SWL wide nurse training for CCGs. The scheme provided over 400 places for updates on various areas (such as immunisations, Cervical Screening and Asthma).
- Implemented 111 Direct booking service which enables direct booking from A&E into access hubs
- Rolled out Access Hubs across SWL which now has additional 21,000 appointments per month
- Developed and implemented the resilience process for 2018/19
- Deployed DoctorLink online service to SWL practices that helps patient to locate the most appropriate service for their condition
- Developed Primary Care at Scale assurance pack to secure second tranche transformation funding
- Resilience programme delivery started across SWL; AT Medics and TLE (Transforming Learning Environments) Miac have been commissioned by Battersea Healthcare to provide Organisational Development support to practices in the resilience programme.

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## Mental Health (MH):

The national strategy implementation plans set out in the Mental Health Five Year Forward View articulates the national ambitions, objectives and targets for mental health. This comprises: ensuring crisis care is available 24/7 in all our hospitals (all ages), eliminating out of area placements, ensuring early access to services for people experiencing psychosis, implementing a perinatal mental health service, improving access to psychological therapies, increasing diagnosis rates of dementia, developing suicide prevention plans for each borough, secure care, ensuring we meet national MH workforce requirements, improving our MH services for children and young people.

## Programme achievements to date:

- Undertook audit of mental health crisis attendances in A&E to identify the scale and cause of increase
- Deployed the new SWLSTG Perinatal Mental Health service which went live on 1 November, accepting referrals for women delivering at St George's Hospital
- Designed a combined SMI and diabetes annual physical health check template for piloting in Kingston
- Implemented NICE guidance of dementia care
- Facilitated contract negotiation of new cognitive stimulation therapy for Dementia patients
- Drafted wave 2 Individual Placement Support Transformation Fund proposals for Croydon, Kingston and Richmond



## Urgent and Emergency Care (UEC):

The UEC Programme encompasses all parts of the UEC pathway from NHS 111 Online through to Hospital Discharge. The overall aim is to ensure patients get the right care in the right place at the right time, encouraging appropriate use of services and reducing inefficiency and inconsistency along every part of the pathway.

## Programme achievements to date :

- Facilitated and completed audit of all Urgent Treatment Centre facilities
- Enabled the upload of ACPs (Appropriate Care Pathways) into MiDos (Directory of Services) which will increase visibility of alternatives to conveyances, improve reporting of usage and will also enable crews to provide feedback when services are not working well.
- Facilitated the development of Winter Plans, reviewed and submitted to NHSE/I
- Conducted deep dive to develop recommendation for improving handover and realistic targets for 15 minute handover.
- Audited ambulance conveyances which identified that 12% of services should not have been conveyed to hospitals
- Worked with Trusts towards an overall reduction of super stranded patients by 25%.
- Facilitating the IUC re - procurement activities
- Carried out MH compact self assessment & plan for implementation
- Initiated SWL UEC Forum joint meetings with H2H teams to align plans and progress reports between UEC and BCF



# Programme summaries

## Maternity:

The maternity programme sets out the local plans to meet the ambitions set out in Better Births to improve outcomes for women, babies and their families and to improve women's experience of maternity services. For South West London there are 4 key programmes to support these ambitions:



1. increasing choice for women (where SWL is one of 7 pioneers),
2. developing continuity of carer so that women receive continuity of the person caring for them during pregnancy, birth and postnatally,
3. improving the safety of care so we halve the number of still birth, neonatal deaths, maternity deaths and brain injuries by 2025,
4. strengthening our perinatal mental health provision.

## Programme achievements to date:

- Development and roll out of My Maternity Journey, a booklet to help support women through their maternity journey and to help assist them understanding what choices are available to them. This is received by all women who book into South West London Hospitals and we are currently evaluating its impact.
- Continuity of carer models are currently being rolled out in all trusts so that by March 2019 20% of all women booked on a maternity pathway will be receiving Continuity of Carer
- Implementation of programmes to improve safety within our maternity services such inter-utero guidelines, and ensuring that women who deliver prematurely given birth in specialist hospitals.
- Deployed the new SWLSTG Perinatal Mental Health service which went live on 1 November, accepting referrals for women delivering at St George's Hospital

## End of Life Care (EOLC)

The aim of the SW London work programme is to ensure all CCGs are implementing all elements of best practice to achieve better outcomes for patients and the optimal QIPP opportunity. By Increased identification, increased awareness, increased numbers of people on an Advanced Care Plan, increased numbers of people with an Advanced Care Plan on 'Coordinate My Care', better use of statutory community and voluntary sector agencies to reduce unnecessary hospital admissions, to reduce the number of admissions in the last 90 days of life and to increase achievement of the preferred place of death



## Programme achievements to date:

- Engagement, writing and submission of full Partnership Application to Macmillan for EOLC Nurses in Care Homes across SWL project – as part of SWL exemplar submission.
- Implementing the Digital Proof of Concept pilot in Sutton
- Scoping work ongoing for Palliative Care Review
- Developed scope document to test Coordinate My Care usage in care homes with an EOLC nurse
- Drafted bid to support Care Homes to digitally participate in Multi Disciplinary Teams
- Supported graduation of 16 Care Home Managers on the Leadership programme through South London Health Innovation Network.
- Provided support to Croydon CCG to launch the Red Bag in Croydon – Red Bag is now live across whole of South West London.



### Cancer:

The Cancer Programme is committed to improving cancer survival rates in south west London, by ensuring that more people are diagnosed and treated earlier and that we provide the highest quality of care and support for people living with and beyond cancer, all whilst improving the patient experience and reducing cancer wait times.

### Programme achievements to date:

- Programme achievements to date:
- 5 Year Cancer Strategy
- Continued development the 5 year Cancer strategy for SWL, which will set a SWL wide vision and implementation plan to ensure SWL CCGs and providers deliver on the identified needs of patients and others.
- Macmillan Primary Care Nursing Project
- Developed general practice nursing competency document and the Training Needs Assessment document for the Macmillan primary care nursing project. The output from this informs our Education & Influence Strategy and our education delivery plan for 2019.
- The education plan includes a series of taster sessions for GPNs on cancer as a long term condition, a learning toolkit which includes video content and testing of a Cancer Community Nursing Module for Community Nurses
- Patient focus group conducted exploring the experience of Cancer Care Reviews and Prostate Cancer follow-up reviews. Insight will feed into the design and delivery of education offer and other project outputs.



### Diabetes:

The Diabetes programme is focused on improving the uptake of structured education, setting up new Multi - disciplinary footcare teams across SWL to reducing amputations by improving the timeliness of referrals from primary care and expanding the diabetes inpatient specialist nursing services. Our national Test Bed project's aim is to change the dynamics of health management by empowering patients to take control of managing their condition through the use of a combination of technology and we have received very positive feedback from NHSE and Innovate UK about the work done to date. We have also started work on a joint project working with the SWL Mental Health programme due to the large crossover in prevalence between diabetes and mental health.

### Programme achievements to date:

- Set up of diabetes dashboard and data collection from providers
- Successful procurement and launch of South London education booking service
- Successful bid and launch of NHS Test Bed Initiative Project
- Led and completed the roll out of digital education pilot
- New referral system agreed
- Referral app developed and accepted by EMIS
- First practice visits undertaken for embedding of training as part of the Test Bed project
- Set up and held the 1st training session for GP practices
- Developed and shared the report on the 7 day working pilot for the Diabetes Inpatient Specialist Nurse
- Developed communications approach and designed the patient pathway for the test bed programme



## Learning Disabilities:

The vision of the programme is to; reduce reliance on inpatient services for people with learning disabilities and/or autism, with behaviours that challenge. South West London TCP's Plan set out to achieve this vision through supporting people with learning disabilities and/or autism to live better quality lives in the community, with increased use of personal health budgets, focusing on prevention of unnecessary admissions and re-admissions to mental health or learning disabilities institutions and avoidance of lengthy stays in hospital, increasing crisis prevention support services across SWL.

### Programme achievements to date:

- Facilitated scheduling and planning of roll out of Positive Behavioural (PBS) support system of care with chosen provider
- Defined and designed the Referral process and criteria for Positive Behavioural Support. Facilitated a panel to identify clinical cases which would benefit from Intensive PBS input
- Developed Crisis House specification to provide residential support to South West London Learning Disability residents in crisis.
- Continued work on reduction of inpatient numbers through surgeries and production of forecast position for March 2019



## Workforce

The workforce programme aims to increase retention, improve engagement and increase recruitment opportunities across health and care organisations in the South West London area using co-created system wide tools, methodology and resources.

### Programme achievements to date:

- Working in collaboration with Health Education England's analysts, NHSi and SWL HCP using the Urgent and Emergency Care planned care work stream to develop a workforce planning methodology
- Epsom and St Helier self rostering established in 16 wards, also extending into AHP staff groups
- Developing talent management methodology, identifying roles to start the process and testing
- CLCH Nursing Academy commissioned to develop nursing programme for care home, primary care, social care and trust nurses which will support nurse/AHP progression.
- Creation and production of a "jobs that care" board game to help school and college children and young people to better understand that jobs that exist in health and care – 30 games delivered
- Developed a proposal for a centralised procurement system.
- Radiographer Career Framework developed



## Digital

The Digital Portfolio is delivering eight capabilities to improve care for the population through sharing information and technology. These capabilities provide different aspects by enabling sharing of information to improve health and care decision making, supporting Clinical Portfolio initiatives and targets for improved services and thus improving the experience of the population in the South West London. Using assessment of Digital Maturity to benchmark current maturity levels to then compare and evaluate improvement as a result of completion of key programmes.

### Programme achievements to date:

- Developed digital strategy for SWL HCP
- Drafted Information Sharing Agreement and Private Notice
- Developed business case for Interoperability as part of the Connecting My Care Programme
- Developed business case for the HSLIP (Healthcare System Led Investment and Prioritisation) £10.6m funding
- Supporting technology enabled bids across the SWL HCP such as Skype for business MDT, NHS Apps inclusion
- Engaged with the One London LHCRE to collaborate on the accelerator projects
- Producing initial draft of portfolio dashboard information to mitigate risk further around dependencies as all portfolio projects increase in complexity

# Queen Mary's Hospital Roehampton



- We want to develop Queen Mary's Hospital in Roehampton as a vibrant site offering a range of high quality community services for local people which support the clinical and financial sustainability of health and care across south west London. Whilst the four acute hospitals in south west London are at full working capacity, Queen Mary's with its modern buildings and diagnostic facilities, has space for more services.
- Queen Mary's currently offers more than 60 services, which are provided by Kingston Hospital, Chelsea & Westminster Hospital and South West London & St George's Mental Health Trust. Services include outpatient rapid diagnostic facilities, mental health community services, sexual health, neurorehabilitation, amputee rehabilitation, limb fitting, cancer screening and treatment, burns dressing, dermatology, families and children's services and a day case unit which offers diagnostic service for endoscopy and urology. As well as offering outpatient services, Queen Mary's has 20 beds in the rehabilitation centre, 69 mental healthcare beds and 50 elderly and intermediate care beds.
- There is also a minor injuries unit on the site. Queen Mary's has been recommended as a designated urgent treatment centre which if approved would expand services currently provided at the existing minor injuries unit.
- Recently there have been some changes to the services at St Mary's, with some moving to other locations leaving parts of the site empty. Further changes on the site are planned including the move of three mental health wards managed by South West London & St George's Mental Health NHS off the site to new premises at Springfield in 2021.
- To plan Queen Mary's future, clinicians, health and care professionals and patients from across south west London are working together. Over the next few months we will be analysing the future health and care needs of local people, and working with health and care partners in south west London to identify services that we can offer at Queen Mary's.

# Any Questions ?

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