Planning for better health and care in North London

A public summary of the NCL STP
Planning for better health and care in North London

North London NHS organisations are working together with the five councils of Barnet, Camden, Enfield, Haringey and Islington to form a health and social care partnership. We have developed a plan to improve the health and wellbeing of local people by making our local health and social care services more sustainable for the future. We have called this joint initiative ‘North London partners in health and care’.

Our Health and care cabinet leads the clinical review and scrutiny of the proposals. On the cabinet are the medical leaders of North London, senior council officers, Health and social care professionals from nursing, other health professionals, medical directors, and GP’s. It is these health and care professionals who interact and care for our residents and communities. Their guidance and leadership make sure people are truly at the centre of our plan.

Why do we need a plan?
There are significant challenges for the NHS and social care to address if we are to have the services we need to meet the changing needs of our growing population. Our community is getting older. More people are living with complex physical and/or mental health issues who might benefit from new and improved treatments and services.

We know our health and care staff do an amazing job, however we often find it difficult to recruit staff and we rely too much on agency staff to fill the gaps. Despite the challenges ahead, our priority is to maintain the quality and safety of our services for the people of North London.
There are some excellent health services in North London, but not all of these meet the standard we want for our patients. The service you receive sometimes depends on where and when you seek help from the NHS or your local authority. People have told us they end up giving the same information to lots of different health and care professionals – this is what we mean when we say services are not as ‘joined up’ as we need them to be. Working alongside local people we can solve some of these challenges and drive change and deliver sustainable improvements to the health and care system.

Many of our buildings are old and not designed or equipped to deliver a modern, 21st century health and care service. We want to provide the best possible place for patients to be cared for in modern, well-equipped and safe surroundings. We need to upgrade facilities in primary care, mental health and in some of our hospitals.

Reductions in local council budgets, especially for social care have added to the pressure on the whole system. A longer-than-necessary hospital stay is more expensive and can delay a person’s recovery. The impact of these pressures is that the cost of providing our services continues to rise more quickly than the money we receive from the government each year. This means that there is a growing ‘financial gap’.

North London Partners in health and care has a plan to:
• use our money and staff differently to build services around the needs of local residents
• invest in more and better services in local communities
• invest in our estates to bring them up to 21st century standard
• provide effective services to everyone
Our plan will address the major challenges: quality of care, money, workforce, and estates.
We are experiencing an increasing demand for services and an escalation in the cost of health and social care. This means that the cost of providing services keeps rising and is more than the money we receive from central government each year. This means that there is a growing ‘financial gap’. If we continue to deliver services as we do now, we will not be able to afford the services we currently provide in five years’ time. We can provide better care by spending our money in a different way. While the financial and staffing challenges are significant, there is compelling evidence that if we spend our money differently, we can get better services that are more affordable.

To close the financial gap also means we need to find some savings now. Therefore part of our plan includes ways to reduce spending and be more efficient and less wasteful. Every organisation in the partnership will need to do more while spending less. Everyone can help us to make the system work better. We’ll tell you how you can play your part later in this document.

**What does this mean for your local health services?**
If we help people stay well or treat them sooner; and if we invest more in GP services, community care and support for people at home; we can improve the quality of care and provide services closer to where people live. This will also be a better use of the money we have available. It will mean improving the way services support you and how you access services. We want to help you to stay healthy and independent. We believe our plan will improve and protect your local health and social care services for future generations.

**What improvements can you expect?**
We are proposing a number of changes to services and the way they work. These changes will lead to a significant improvements for people.
It will be easier to see a GP. We are investing in primary care services. Already there are more appointments available between 8am and 8pm and we will free up GP time by making better use of other clinicians such as nurses and pharmacists. Our GPs are working together, and with other professionals, in new ways. These professionals will play a bigger role in coordinating patient care in the future.

More care closer to where you live. We are setting up ‘neighbourhood networks’ in each area to better support patients. These networks will include local GPs, nurses, pharmacists, social care staff, mental health and other professionals, who will work closely with local hospitals and local councils. They will support people to look after themselves and stay well. It will be easier to get treatment in a local health centre, at a local clinic or at home. We will be putting more resources into local communities services where they are needed and where these will have the biggest impact on people’s lives.

You will get better advice and support to look after yourself and your loved ones. NHS and social care staff will work together to support you. We can use technology such as Skype calls for people who need health advice but may not need or want to visit their GP.

Our partnership with local authorities means we can provide more support to patients who have long-term conditions like diabetes, dementia, asthma or a heart condition. By helping them, and their carers to understand and monitor the condition better, people will know when and where to seek help. Being cared for at home is something people have told us they prefer. We will work together with patients, carers and residents to find the best way to do this, keeping the needs of people at the centre of health and care services.

We want to help people to live healthier lives. This includes supporting people to become more resilient and stay well, helping those at risk of developing long-term conditions and supporting people who have long-term conditions to prevent them from getting worse.
**Treating mental and physical health together.** Our mental and physical health are closely linked but are often treated separately. A key part of our plan is to join up mental and physical health services. We will help people facing mental health issues sooner and treat them before their condition gets worse. We want to help people avoid crisis and unnecessary admittance to A&E or to a mental health hospital.

**All our acute hospitals will continue to deliver round-the-clock services, when people need them.** Sometimes people end up in hospital when they don’t need to be. This isn’t the best use of hospital resources and it adds even more pressure on our hospitals and hospital staff. We can often treat people closer to where they live and this can help them recover sooner. By reducing the need for so many people to go to hospital and developing better local links between hospitals and other services, we will be able to improve ‘in hospital’ care for those who need it most. People will be seen faster and get more consistent, high quality care when they need to be in hospital.

**Buildings to deliver 21st century healthcare.** We will bring all our buildings up to the required standard, making them a more attractive and physically safe environment for patients and staff.

**We will diagnose and treat cancer more quickly.** It is important that people have access to early diagnosis and treatment for cancer. We will encourage people to attend screening appointments and to raise any concerns with their GP. We already use technology including text messaging to remind people when to see their GP or to attend a screening test. We will also continue to improve our public health messages and campaigns to help people to become more informed about their potential risks of developing cancers and what symptoms to look for.
Frail, older people will get better support. Some frail, elderly people need more on-going support to keep them well, prevent them falling and to help them recover more quickly when they have been unwell. Acute hospitals, GPs, social services and other parts of the health and social care system will work together to support the frail elderly, including those with dementia, helping them to stay and be cared for in their own community.

Pregnant women will get a more personalised service and more choice. There will be more options including home births and midwife-led care for those women who choose this. Women who need or prefer to give birth in a consultant-led maternity unit will continue to have that choice. We will work with women to co-design the maternity services they want and need to have a safe and fulfilling childbirth experience. Care will be more personalised, with women seeing the same midwife throughout their pregnancy and following the birth. Mental health support will be on hand for women who may experience mental ill health issues during pregnancy and/or suffer post-natal depression.
We will harness the power of technology to support people to be healthy and well. Smartphone apps will be available for those who want to access information in that way. We will make it easier for GPs and other health professionals to work together using integrated digital records and give patients more control over who can see their information. We will work with residents to design and produce the best technology to make it easier for people to access the services they need. By using resources wisely, we can make sure the needs of our community is at the centre of our plan to improve the use of technology. We believe this will result in fewer admissions and outpatient appointments being needed overall.

There will be changes to some NHS staff roles. Our plan is to create a 21st century health and care system and this means changing how some of our people work. We will have more care and services based in the community, meaning fewer staff will be located in hospitals. People have told us they want more care available close to where they live. By moving more resources into the community we can care for people in the setting of their choice.

Where possible, we will merge non-clinical administrative roles across organisations. Some healthcare staff will work together with social care colleagues in integrated, multidisciplinary teams to provide a more comprehensive service to residents - keeping the needs of patients and service users at the centre of treatment and services. Some of the big challenges around workforce will require a national approach and we are working with other organisations and parts of the country to find long term solutions and to support those already working in health and social care to stay.

What can you do?
As we face the challenges of the 21st century, we are making positive changes to how we design and deliver health and care services. Everyone who works in the NHS and social care is adapting the way they work and how they use the available resources and technology.
Our health and care system is important to everyone. It touches the lives of every person at some of the most important times in our lives. If we work together we can make our health and care system better and more sustainable so we can continue to provide high quality services for the people of North London.

**Living a healthier life and following health advice will reduce pressure on the NHS and social care.** We want the people of North London to be as healthy and well as they can be. There are lots of resources available to support people to live well and stay healthy and independent into old age; all the time safe in the knowledge that good health and social care is available when people need help.

We all know that smoking, poor diet, lack of activity, too much alcohol and stress can have a negative impact on our health. GP’s and other health professionals can give advice on how to reduce the risk of becoming ill and provide early treatment when people become unwell. We will support people to stay well by providing high quality and practical resources to help people better understand long-term health conditions and the right support to manage them more effectively. By building more resilient communities we can take some pressure off some services and focus resources where they are most needed. When people need help it will be available and delivered in the most appropriate place.

![Image](https://www.england.nhs.uk/2014/03/missed-appts/)

**When you have an appointment, it is important that you attend - or cancel in good time** Not showing up for booked appointment cost the NHS almost a £1b\(^1\) every year. If you no longer need an appointment, you can save the NHS money by calling to cancel in plenty of time. We will support this through increased use of reminders, especially by text to your mobile phone.

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\(^1\) https://www.england.nhs.uk/2014/03/missed-appts/

North London PARTNERS in health and care
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**How you use health services will change.** We have many good health professionals who can help you. Pharmacists, nurses and other health professionals can sometimes provide treatment and advice, in your own home, over the telephone or, through smartphone apps and other technology.

**The 111 helpline** is a localised service and should be your first option if your situation isn’t an emergency. Local health and social care teams will work together to support you at home and in your community. We will support patients and carers to more effectively manage long-term physical and mental health conditions. Care navigators - specially trained staff who understand how the health and care system works - will be able to guide you through our services and help you to access the right people, in the right place, at the right time.

**Hospital is the right place for the very sick and for emergencies.**

The pressure on our hospitals sometimes arises because many people are unsure of where to get the best treatment when they become unwell. It is important to have good hospitals in times of emergencies and for those patients who are very sick. However, good treatment and services don’t always have to be delivered in a hospital. People often prefer to be cared for at home or in their community. The changes we are proposing will reduce the need for ‘acute’ hospital care. ‘Acute’ means in-hospital services such as Accident and Emergency, intensive care, acute medicine, emergency surgery, and specialist maternity care and specialist children’s care. These services will still be there when people need them and in modern, safe and attractive hospitals.

If and when big changes are being proposed, we will consult with the people of North London, our staff and clinicians about what these changes might look like and how best to deliver them. This may include treatments and services which are not clinically effective. Through research and advances in good clinical practice we sometimes establish that some treatments and services have limited clinical effectiveness in other words patients health does not benefit as much as we thought it would or in some cases not at all. We are looking
closely at how we spend public money so that we can target our limited resources to give you the best support and care. As part of this, we continue to review guidelines for treatments and services to establish what services deliver good results for patients, to make sure we are getting the best value for money in the treatments and services we provide.

What will happen now?
The health and wellbeing needs of people are at the centre of all health and care services. A lot of information that has been collected over the past few years. This information has come from by local authorities and CCG’s, clinicians, social care leaders, nurses and other health professionals as well as patients and residents. Together they have come up with some ideas on how to improve services based on what people have said they need. We now want to test these ideas further with local people and those who regularly use services.

We also know we must find savings and make the system more efficient. This will not be done by reducing quality or the access to services. Our financial challenge is significant. We will continue to be open and transparent about how we are working towards reducing the gap between demand for services and the funding available. Other challenges, such as making sure we have enough people working in health and care will require a collaborative and long term approach which will require a national strategy.

We want to make sure North London is well placed to attract people to live and work in health and care. Some changes may require formal consultation. Patients, carers, service users and residents will be able to help us make sure any change is an improvement to service or access. By involving local people we can find the best solutions to some of the problems we face. We will only make change when we are sure it will improve services or access, and it will be co-designed and coproduced with local people. With our partner organisations, we regularly work with our residents and workforce. We will continue to make sure we respond to your questions and feedback and consider people’s ideas and opinions before we make decisions.
We’ve already made a few changes including increased access to GPs, and local teams of health and care professionals who provide support to patients in their communities. We are also increasing access to a range of services we know can help keep people healthy, well and independent through services to support people to stop smoking and to reduce their alcohol consumption.

We want to listen to and work with the people of North London about the ideas set out in our plan. Our website is the place to get more information and see the finer details of the proposals. Via the website is the best way for you to share your ideas, ask questions and to provide us with feedback. We are still exploring the best way to meet with local people to discuss the proposals. Your ideas on how we could best do this are welcome. We are excited about the future and we look forward to working together with the people of North London to build a 21st century health and care system.

If you have any thoughts or questions please contact us by email: nclstppmo@nhs.net or go to our website www.northlondonpartners.org.uk and you can follow us on twitter @nclstp