Sussex Health and Care Partnership

Our health and Care OUR LOCAL LONG TERM PLAN

HOW WE WILL IMPROVE HEALTH AND CARE FOR OUR POPULATIONS

Responding to what our people want

Over the last few years we have spoken with thousands of people living across Sussex about health and care services. Every individual has a different view, experience and story to tell but there are some things that everyone wants:

- Our people want to be supported to live a healthier life.
- Our people want to be able to look after themselves better if they do become ill or, if they can't do that, they want to be able to see the most appropriate expert as soon as possible at a time that is convenient for them.
- Our people want to know what services are available to them and want to get the care and treatment they need as quickly and easily as possible.
- Our people want to have as few appointments as possible and ideally want to get the best care close to where they live, or at home if possible.
- Our people want and expect health and care organisations to work in a joined-up way so their care and treatment is seamless from start to finish.

To be able to give our people what they want, we need to change how health and care services work

Our health and care organisations across Sussex have been working hard over the years to try to give our people what they want and rightly expect from health and care services. However, we have not always been able to do this for a number of reasons.

People are now living longer thanks largely to advances and improvements in health and care and, although this is positive for us all, many people are not in good health as they get older and some spend years needing constant treatment and care. This means more people are using health and care services more often. The problem is we only have a limited number of beds, staff and resources available to meet this growing demand. Additionally, some services work differently to one another, do not always work in a joined up way, and use outdated technology and buildings that are not fit for modern day health and care.

As a result, we face challenges around the growing demand for health and care which means services are often under extreme pressure, causing some people having to wait longer than they would want to get the care they need. It also means that the cost of paying for services has been increasing and, although the amount of money we have to spend for them is also increasing, we still do not have enough money to pay for all the services that our people currently need to use.

To be able to give our people what they want, we need to change how health and care services work and we now have an opportunity to do so with the Sussex Health and Care Plan.

This plan sets out our vision for how we want health and care services to better support our populations over the next five years and ensure our people are getting more of what they want and need in future. It represents our system-wide response to the local health and care needs of our populations and the national ambitions and expectations set out in the NHS Long Term Plan.

Responding to what our people need

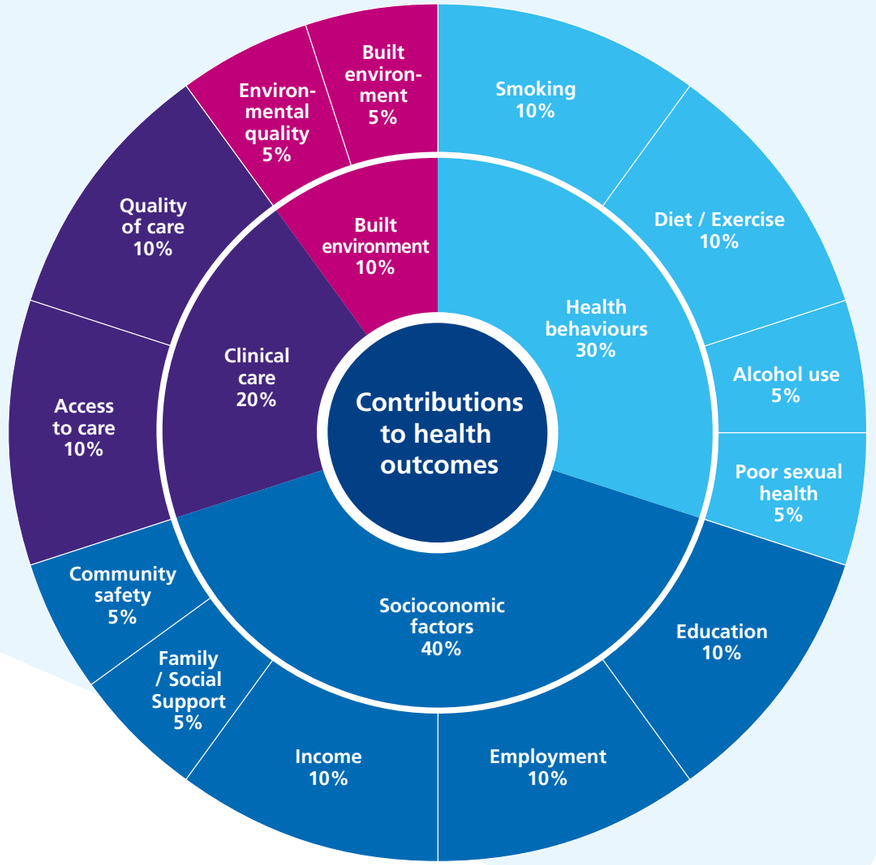
The health and care needs of our populations are constantly changing. The way we all live our lives in constantly changing. So it is essential that local health and care services also constantly change to give our people the care they need in a way that better suits their busy lives.

Research into what contributes to someone's health shows that only around 20% is influenced by clinical care, with the other 80% relating to other factors, such as education, health behaviours, employment and the environment. Many of these factors are not within the responsibility of the NHS and social care services and are influenced by other organisations, particularly local authorities. So it is clear that these organisations need to work together if we are to best support all the health needs of our populations.

Looking at the population of Sussex, we know that the poorest and most deprived people are more likely to be in poor health, have a lower life expectancy and have a long term condition or disability. Some groups, such as Black, Asian and minority ethnic (BAME), LGBT+, people with special educational needs and disabilities, people with long-term mental health problems and carers, may require more intensive support and additional help to access services.

We know that the resident population across Sussex is predicted to increase by the year 2030, with the largest growth coming in people over-85 group, which is expected to increase between 32.5% and 42.1%. This will put extra demand and pressure on health and care services in future.

To help us develop a plan to better meet the needs of our populations, we have used clinical evidence from our 'Population Health Check'. This was published in January 2019 by local doctors, specialists and professionals from across our region and represented a diagnosis of the current health of our people and the areas we need to improve.



They used data and information provided in the local Joint Strategic Needs Assessments of West Sussex, East Sussex and Brighton and Hove, and found that 75% of deaths and disabilities across our local area are caused by five conditions – cancer, circulation and respiratory disease, diabetes, bone and joint conditions, and mental health conditions – and these cause the biggest impact on services.

Additionally, it has been identified that the four unhealthy behaviours of smoking, alcohol misuse, poor diet and low physical activity, along with social isolation and poor emotional and mental wellbeing, are responsible for at least a third of ill health.

This clinical evidence has been used as the foundation for our plans and ensures the we design future services in a way that better meets the needs of our people.

The resident population across Sussex is predicted to increase by the year 2030 with the largest growth coming in people over-85 group

Our population in numbers

Children and young people

2x national average

We have more children and young people smoking at the age of 15 than the national average – Brighton & Hove is double the national average with 15%.

15% Year 6 pupils are obese

15% of our year six pupils are obese and there are higher rates in deprived areas.

We have higher rates of hospital admissions for self-harm of children and young people aged 10-24 compared with rest of England, particularly in Brighton and Hove and Hastings.

Adults

Smokers on GP registers

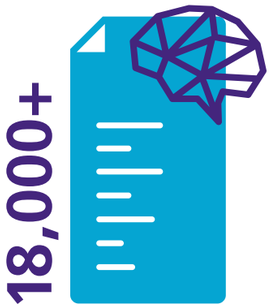
We have 250,000 smokers on GP registers, with high rates in Brighton & Hove and Hastings.

adults with depression

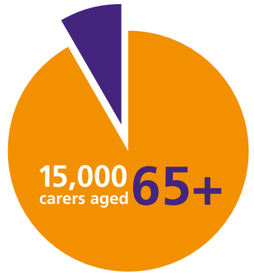
We have over 155,000 adults with depression on GP registers, which is 10% of patients.

Physical activity rates vary across the area, with 78% in Brighton & Hove and 27% in Eastbourne.

Older people



We have over 18,000 people on the dementia register and many more are not diagnosed.



of 183,000

We have over 183,000 carers, with 15,000 carers aged 65 and over.

110k

We have over 110,000 older people who live alone.

Dying well

50.7% of our population die in their usual residence but this is only 37.2% in Crawley.

Our ambition for the future

Our ambition is to create a health and care system that will improve more lives, extend more lives and save more lives of people living across Sussex.

We will do this by developing new ways of working that focus on helping people stay healthy for longer, giving them greater support to manage their own health when they do become ill and making sure that those who need help get the right care, in the right place at the right time more often.

We want to support all aspects of people's lives that contribute to their health and wellbeing and develop teams from across organisations that work together to give greater joined-up care that is right for the individual. We want to have a system that better involves and supports the 1.6m people who live across Sussex and the 30,000 staff who work within our health and care organisations.

Our specific aims are to:

- Strengthen the role of prevention from birth and the need to address all the factors that contribute to someone's health. Our approach reflects the responsibilities of the whole system in addressing health and wellbeing – NHS, councils, police, education, voluntary sector, communities and individuals.
- Recognise the importance of health literacy, supporting people to have the knowledge, skills and confidence to manage and protect their own health, and engage in treatment and care plans both independently and in partnership with professionals.
- Address the need for responsive and flexible services, supported by effective use of technology.
- Address the growing number of people with long-term conditions who want to have a key role in managing their own care.
- Improve access to urgent care for those who need a quick and effective response.
- Harness the potential of specialist services, as well as breakthroughs in medical science and use of data, to maximise the benefits to our whole population.

Our principles

We have a number of principles which underpin our plans for the future:

Delivery health and care differently

- **Less need to travel:** We know people prefer to have their care delivered close to home where possible. Information should flow between service providers so that people do not have to travel long distances for care.
- **Access to the right person or advice first time:** Seeing the correct professional the first time leads to quick, safe and efficient advice or treatment.
- **Timely provision:** Services should be delivered in a timely way that also manages demand and expectations.
- **Ensure appropriate movement of people across the system:** When people move across service providers, it should only happen where necessary and should be managed effectively.

To tackle inequalities, we must give more intensive support to those who are at greatest risk of poor health and may need additional help to access services.

Organise health and care differently

- **Reduce inequality:** People, wherever they live, must have the same opportunity to lead a healthy life. To tackle inequalities, we must give more intensive support to those who are at greatest risk of poor health and may need additional help to access services.
- **System integration:** As systems increasingly come together, we need to think beyond organisational and departmental boundaries and create greater end-to-end care.
- **Incentivise quality outcomes:** We should plan and buy services based on the outcomes we want for people and measure this against a diverse set of metrics agreed with our populations.
- **Maximise quality through reducing variation:** We should maximise quality by targeting the efficient delivery of high value, evidence-based care.
- **Digital compatibility:** Digital solutions should be developed in ways that make information sharing possible across organisations.
- **Partnership working:** Health and social care working in partnership across Sussex will deliver the best quality and safety of care in a joined-up way.

How we will achieve our ambition

Integration and collaboration

No one organisation currently supports, manages and influences all the factors that affects someone's health. Instead, a person usually requires help and care from a number of different organisations, departments and teams to meet their health and care needs. It is, therefore, essential that the NHS, local authorities and other partners responsible for providing care for our populations work closer together to give people the best possible experience when they need treatment, support and care.

This will be done by increasing the joined-up, or 'integrated', working and collaboration of health and care organisations in future.

What we mean by integration:

- We want the NHS and local authorities to work closer together to be able to plan and pay for ("commission") health and care services. This will reduce the fragmentation that people experience in our current healthcare system and allow services to work in a way that is more joined-up and better address health inequalities.
- We want organisations that provide services to work closely together to benefit local people. In particular, we want close and effective working between primary and urgent care, community and mental health services, social care and the voluntary sector, to ensure individuals receive the best possible care.
- We want to develop 'Integrated Care Teams' that are made up of professionals and experts from a number of organisations and areas working together for our populations.

A new 'model' of health and care

We have developed a clinically-led Health and Care Model, which sets out our new way of organising and delivering services. The model has three building blocks – prevention, services that address the factors that contribute to someone's health, and enabling people to manage their own health and care.

These building blocks will be at the centre of our approach to designing health and care services, and will include:

- Engaging the population to identify need, shape services and to be involved in implementation.
- Using data and technology to empower people to manage their own health and care, including online access to their records, online information and consultation, and direct appointment booking into different services.
- Providing access to advice and support for the whole population to keep themselves well.
- Increasing the use of social prescribing to enable individual solutions for people, and improved integration of clinical and non-clinical services.
- Giving the population direct access to a broader range of health and social care providers, for example clinical pharmacists and first contact physiotherapists.

We want the NHS and local authorities to work closer together to be able to plan and pay for ("commission") health and care services.

Responding to our people's priorities:

Greater focus on prevention

During 2019 we travelled across Sussex speaking to members of the public and asked them what areas they felt we should prioritise in the future. A top priority identified was prevention and this is an area that we have given particular focus on as part of our plans for the future.

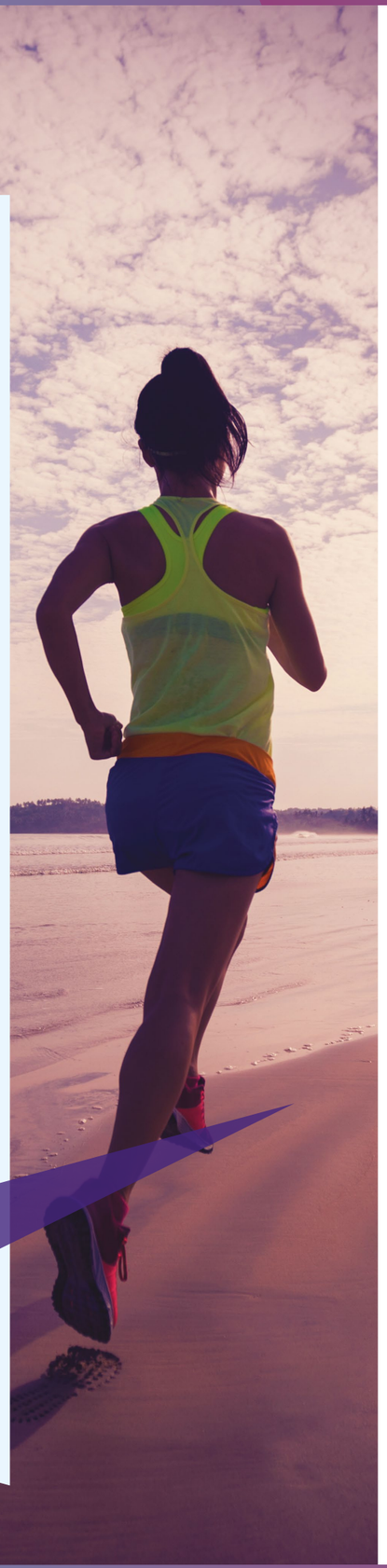
Prevention is one of the central building blocks of our strategic model and is, therefore, the responsibility of our whole system. We know that a number of different factors are important in preventing ill health, which is why we are considering housing, work environment, employment, and education alongside health and social care.

For 2019/20, our key priorities for Sussex are:

- To establish the role of the NHS and key partner organisations as anchor institutions to influence all the factors that influence someone's health.
- Promoting a culture shift that makes prevention everyone's responsibility.
- Developing a healthy workplace programme to improve the health and wellbeing of working people.

Over the next five years, we are committed to:

- Supporting a good start in life, including promoting a healthy weight, and good emotional wellbeing.
- Improving the health and wellbeing of working people, for example, through the development of workplace programmes across Sussex.
- Preventing the development of long-term conditions and improving health outcomes for those long-term conditions.
- Supporting our population to age well by promoting both physical and mental wellbeing.



The three levels of health and care

The new model is based on health and care being delivered at three levels – neighbourhood, local area and Sussex.

Your neighbourhood

We will plan and design local services that better meet your needs across your local neighbourhood, which will typically be around a population size of 50,000 people. This might be your town or your local community.

HOW IT WILL WORK

- Each neighbourhood will be supported by a Primary Care Network (PCN), which will involve GP practices working with local community services, mental health, social care, pharmacy and voluntary sector teams to provide integrated health and care for local people.
- Each neighbourhood will be supported by the equivalent of 10-18 additional staff by 2023/24 through the new GP contract.
- Expanded neighbourhood teams will comprise a broader range of staff including clinical pharmacists, physician associates, first contact physiotherapists, first contact community paramedics, community geriatricians, dementia workers, mental health practitioners and social prescribing link workers.
- We will support the physical and mental health of the local population by using data and involving local people and their feedback to appropriately target our services, build an in-depth understanding of health needs and inequalities, and develop teams to take responsibility for these needs.
- PCN teams will be supported by easy access to and partnership with local hospices and specific secondary care expertise.

BENEFITS TO LOCAL PEOPLE

By planning, designing and delivering services at a neighbourhood level, we will be able to give greater focus on:

- Identifying, preventing and treating health and care issues at an earlier stage.
- Meeting the health and care needs of the individual person.
- Supporting early cancer diagnosis.
- Enhancing health in care homes.
- Preventing and diagnosing cardiovascular disease.
- Tackling neighbourhood health inequalities.
- Reducing variation in how health and care is given.
- Providing more services outside of working hours.
- Home visiting.
- Social prescribing.
- Supporting and giving advice to people for common mental health conditions.
- Palliative and end of life care.

Your local area

Health and care organisations will be working together as partnerships in future to provide care for the different populations of West Sussex, East Sussex and Brighton & Hove. These will be referred to as 'Integrated Care Partnerships' (ICPs) and will enable primary, community and local hospital services to provide greater joined-up care.

HOW IT WILL WORK

- We will redesign services around a person's needs so they can move seamlessly between primary and community health and social care, and local hospital services in a timely and efficient manner.
- Where it is safest and most effective, we will design clinical services around targeted populations at a local area level, seeking to deliver more care at home or in the local community.
- Integrated Care Partnerships will be made up of existing providers, including Local Authorities, acute hospital trusts, community services and other providers within a Primary Care Network, that deliver end-to-end healthcare. This will involve providing all the care someone needs, allocating resources and addressing local health inequalities.
- Integrated Care Partnerships will take responsibility for actively planning services for the benefit of the population, segmented by health and care needs, whilst ensuring that there is not unjustified differences in outcomes for people. This will be undertaken in close collaboration with the public.
- The partnerships will lead to integrated care teams, whose composition will depend on the need of the specific local area and the outcomes that matter to that population.

BENEFITS TO LOCAL PEOPLE

By providing services at a local area level through Integrated Care Partnerships, we will be able to give greater focus on:

- Tailoring services better to meet local needs.
- Organising community health and care services locally, including rapid response teams, rehabilitation and other proactive approaches.
- Managing local provision of musculoskeletal, cardiovascular and falls/fragility services to reduce unjustified differences in care outcomes, specifically in those areas identified in the Population Health Check.
- Providing a range of functions across the local area, such as the management of medicines, clinical training and education, emergency planning, effective use of technology, and palliative care.
- Managing demand in urgent care.

Across Sussex

All health and care organisations across Sussex will work in closer partnership to deliver and plan specialist and complex services to improve the outcomes of our populations and reduce health inequalities.

HOW IT WILL WORK

- Complex services will be planned and managed collectively across Sussex for our population.
- Our health and care professionals will work together to deliver the best and safest care to enable our population to start well, live well, age well, and die well.
- There will be support for the PCNs to manage our population's needs on a larger scale through advice and guidance for inter-acting with more specialist services and county-wide approaches.
- The Sussex system will deliver better services for better value through collaborative financial management, effective financial frameworks and management of other supporting services.
- Health commissioners will work closely with Local Authority commissioners to develop a programme to improve health and wellbeing, and to reduce inequalities on a Sussex-wide scale.
- The Sussex system will use local data to build a single view of multiple records.
- Providing clinical leadership across the region through clinical networks.
- Working in a consistent and co-ordinated way across urgent care.
- Better managing lower volume specialist services, including major trauma, plastics and burns, hyper-acute stroke, neonatal and specialist paediatric care, neurosciences, cardiac surgery and specialist cardiology, renal services, and specialist rehabilitation.
- Co-ordinating and setting strategy across clinical services, such as mental health provision and the local maternity system, to ensure high quality services across Sussex and support research and education.
- Developing specialist centres for more complex services. This will promote collaboration between clinicians to improve the quality of care and will increase value for money through economies of scale gained from partnership working. This will accelerate the development and uptake of innovation to support our system's needs.
- System-wide management of essential supporting services, including digital, workforce and estates.
- Digital compatibility across the system to help deliver more efficient care through access to online appointments for primary care, transformation of outpatient services, and roll-out of integrated health and care records.

BENEFITS TO LOCAL PEOPLE

Working as a Sussex-wide system will help us give greater focus on:

How this will benefit our people

In parts of Sussex, health and care organisations and services are already working in a more joined-up way and this is bringing tangible benefits to local people. The examples below are three of many that illustrate the improvements we are making to people's lives and highlight how we increasingly want to be working in future.

GIVING BARBARA THE RIGHT CARE, IN THE RIGHT PLACE, AT THE RIGHT TIME

Barbara suffers from Parkinson's Disease, which has a serious impact on her mobility, meaning she suffers from regular falls. After a recent fall, paramedics attended her house and advised that Barbara should be taken into hospital. Neither Barbara nor her husband wanted this to happen, so the Crisis Response service was called. This service involves an integrated team of nurse practitioners, healthcare assistants, occupational therapists, physiotherapists and night sitters. It aims to help people who are unwell and who may previously been admitted to hospital to stay at home. This allows them to be cared for in a familiar environment without the added stress and anxiety of being admitted to hospital.

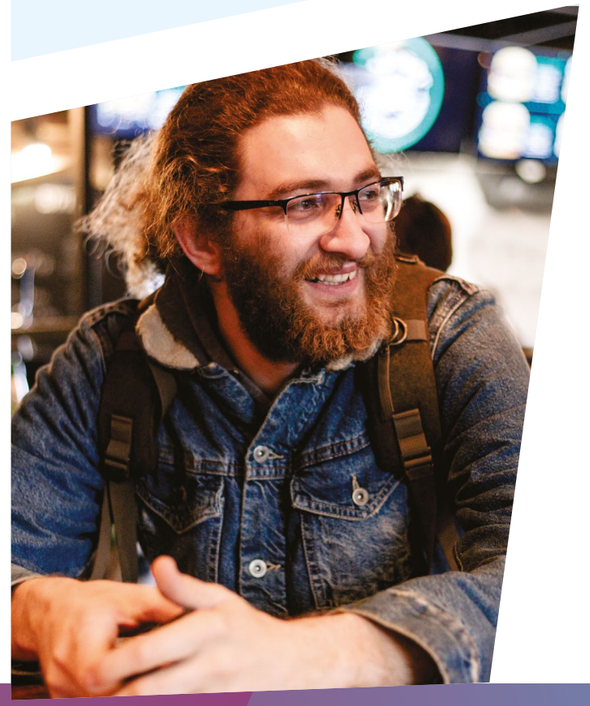
The team put together a care plan that gave immediate support to Barbara and her husband and then did a further assessment so that the right support was arranged to enable her to remain safely in her own home afterwards. We now want more people to receive the care they need closer to home.

USING RESOURCES EFFECTIVELY TO HELP MARTIN GET THE CARE HE NEEDS

Martin, 23, called his doctor's surgery to ask for an appointment because he had been suffering from anxiety. The receptionist he spoke to had been specially trained to signpost Martin to the most appropriate service for his need. She asked him if he had heard about an NHS service providing courses and other types of therapies that help with stress, anxiety and low mood. She explained that by completing an online form he could refer himself to the service, without the need for a GP appointment.

After submitted his form, Martin was contacted by a member of the service team for an initial appointment and then took part in a free course near to where he lives in Sussex, which has helped him cope with his anxiety. By using the service, Martin has got the care he needs and has saved the NHS money and the clinical time that would have been spent on his appointment had he seen a GP.

We now want to invest more of our time, expertise and money to help people like Martin get the right care, the first time. To do this we need to change how we use the limited resources available and make decisions that will help us get more out of the money we spend.



GIVING JOE EQUAL ACCESS TO THE SERVICES HE NEEDS

Joe has been homeless for three years. Life on the streets has taken its toll on his physical and mental health but accessing health and care services can be difficult for vulnerable and disadvantaged people like him. Luckily for Joe, a weekly multi-agency hub was launched in his part of Sussex to improve access to services and support for rough sleepers and the street community. Different agencies are available to give advice and sign-post him to services and information on issues including housing, mental health and drug and alcohol treatment. He is also able to take a shower and wash his clothes while he is there.

Through visiting the hub, Joe has been able to register with a local GP practice and has made links with adult social care and a local housing officer to look at his options for the future. We now want everyone to be able to access health and care services no matter what their background or circumstances.

Responding to our people's priorities:

Greater focus on mental health

During 2019 we travelled across Sussex speaking to members of the public and asked them what areas they felt we should prioritise in the future. A top priority identified was mental health and this is an area we have given particular focus on as part of our plans for the future.

Our aim is that, by 2025, all people with mental health problems in Sussex will have access to high quality, evidenced-based care and treatment delivered by accessible services that are well connected with the wider community, and that intervene as early as possible in someone's life to prevent mental ill health.

We are increasing our investment in mental health by £50.5m over the next five years as well as additional funding to deliver specific commitments. This has allowed us to develop clear and detailed plans for mental health services which are owned by the whole healthcare system to ensure specific local needs are addressed and Sussex-wide policies are tailored for maximum impact.

We are developing a prevention strategy that has strong links between mental and physical health and we aim to provide services that are fully inclusive of people who need additional support, including those with learning difficulty or autism.

How we developed the plan

Our Sussex Health and Care Plan sets out how we are responding to the local health and care needs of our populations and the ambitions of the NHS Long Term Plan.

The NHS Long Term Plan was published in January 2019 and set out the national expectations for the NHS over the next five to ten years. The Long Term Plan outlined a significant number of objectives and systems across the country were asked to develop by November 2019 how they were going to deliver it locally.

Our Sussex Health and Care Plan represents a collective effort across our partners and has been formally agreed through our statutory organisations.

In developing our plan, we have built on work that has already taken place over the last few years to improve and join-up health and care services. This has already involved partners from across NHS organisations, local authorities, the community and voluntary sector and patient groups working closer together to focus on giving our people improved care.

Our plan has been developed with the involvement and input of partners, clinicians, specialists, health and care professionals, staff, and our public. It has been led by our Clinical and Professional Cabinet, which is made up of local doctors, clinicians and professionals from across Sussex.

We carried out a significant amount of public engagement to inform the plan, with around 1,500 conversations taking place across Sussex. This was done through a combination of engagement events, focus groups and online surveys. This included members of the public, patients, carers, people experiencing mental health problems, physical and sensory disabilities, people from diverse ethnic backgrounds, former members of the UK Armed Forces.

As well as having a plan for Sussex, we have developed three supporting locally-focused plans across West Sussex, East Sussex and Brighton and Hove which describe how the system-wide plan will be delivered. These local plans build on the collaborative working and local transformation plans that were already in place and are linked to the local Joint Strategic Needs Assessment, Health and Wellbeing Strategies and the significant amount of public engagement that has taken place across our local areas over the last few years.

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