

LEADING
INNOVATING
IMPROVING

NHS

South East Coast

Improving health and wellbeing by driving up quality and productivity

South East Coast Strategic Health Authority

Two Strategic Health Authorities

NHS South East Coast

- 70,000 NHS staff
- 25 NHS organisations
- 4.3 million people
- £7.0 billion
- Kent, Surrey and Sussex

NHS South Central

- 66,000 NHS staff
- 24 NHS organisations
- 4.1 million people
- £5.8 billion
- Berkshire, Oxfordshire
Buckinghamshire,
Hampshire, Isle of Wight

A picture of health in the South East

- High life expectancy
- Better than average health compared to rest of England
- But health needs are changing:
 - Pockets of deprivation and large variations in life expectancy across the region
 - Growing population, and ageing at an increasing rate
 - Public expectation – safety, quality, access
 - Technological advances
 - Evidence base and world class outcomes

Map 1

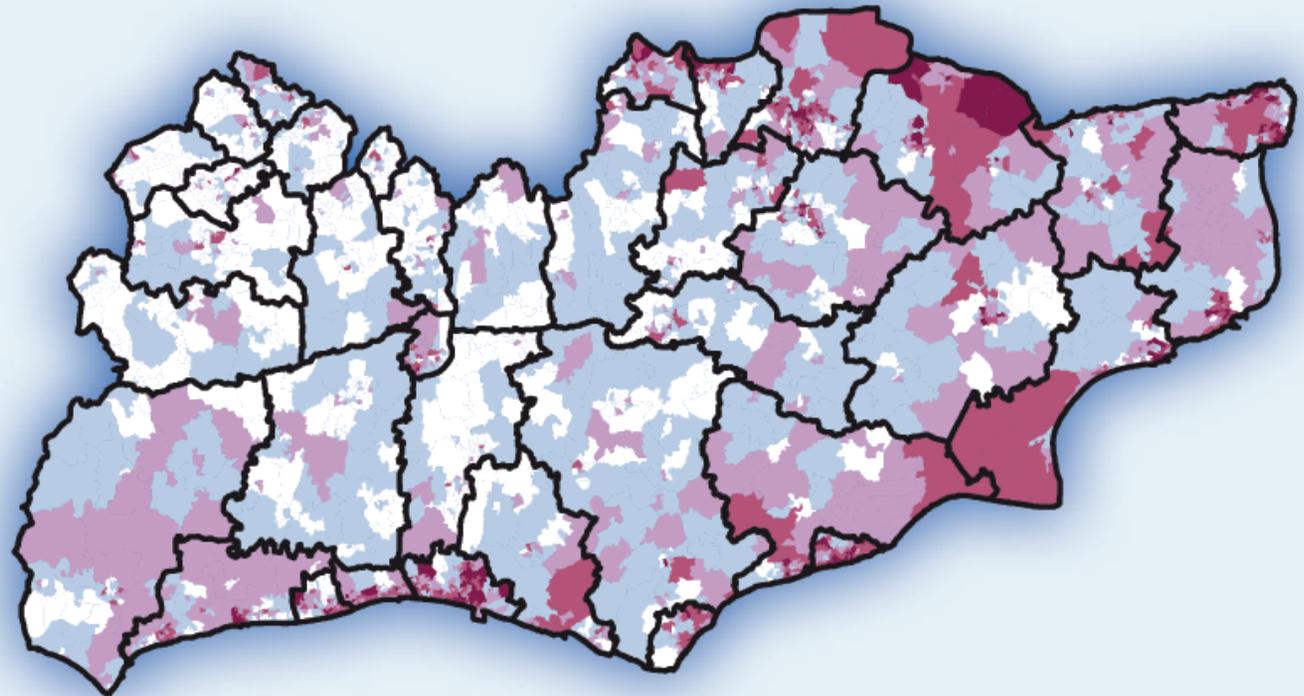
Index of Multiple Deprivation 2007 by Lower Super Output Area in South East Coast SHA

Legend

 Local authority area

National deprivation quintiles

-  Quintile 1 (least deprived)
-  Quintile 2
-  Quintile 3
-  Quintile 4
-  Quintile 5 (most deprived)

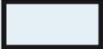


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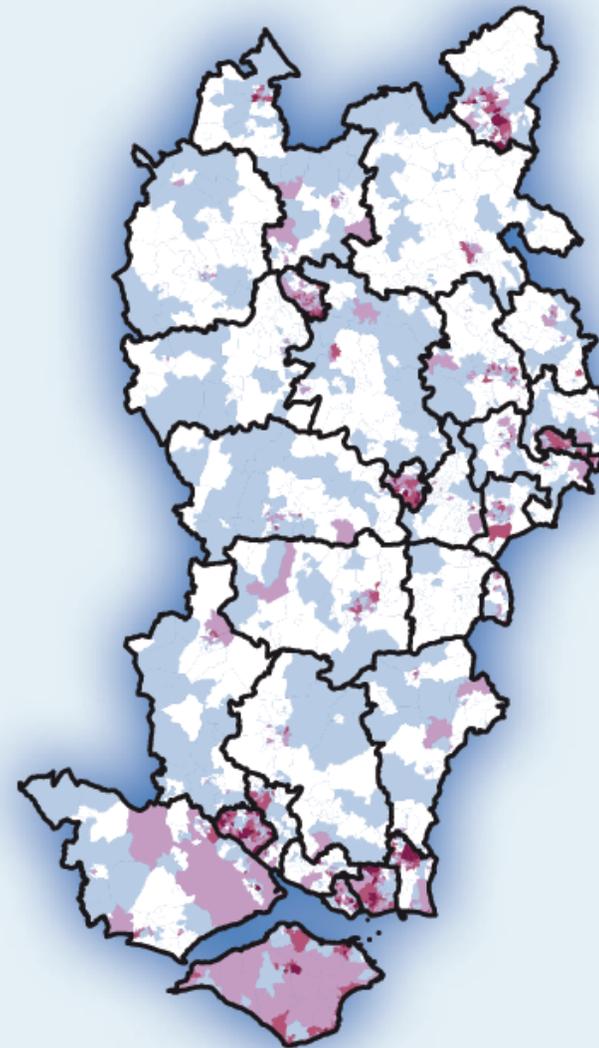
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The vision – NHS South East Coast

Healthier people, excellent care

- Shared, region-wide vision for improving health and care across Kent, Surrey and Sussex
- Two years of extensive consultation
- A series of pledges, reflecting the feedback received, already making good progress
- Bottom-up plans driven by local clinicians – champions of quality, innovation, productivity and prevention
- Clear vision, focused on delivering tangible, measurable benefits for local people

The vision – NHS South Central

Towards a healthier future

- Vision for how improved care will be delivered to patients in the South Central region for the next decade and beyond
- 12 ambitions
- Central aim: improving the quality of patient care in terms of outcome, patient experience and safety
- 18 months since the launch of the vision there are many areas, at a regional and local level, where work towards implementing it is underway

Eight pathways of care



Maternity and newborn care



Acute care



Children's health



Planned care



Staying healthy



Mental health



Long-term conditions

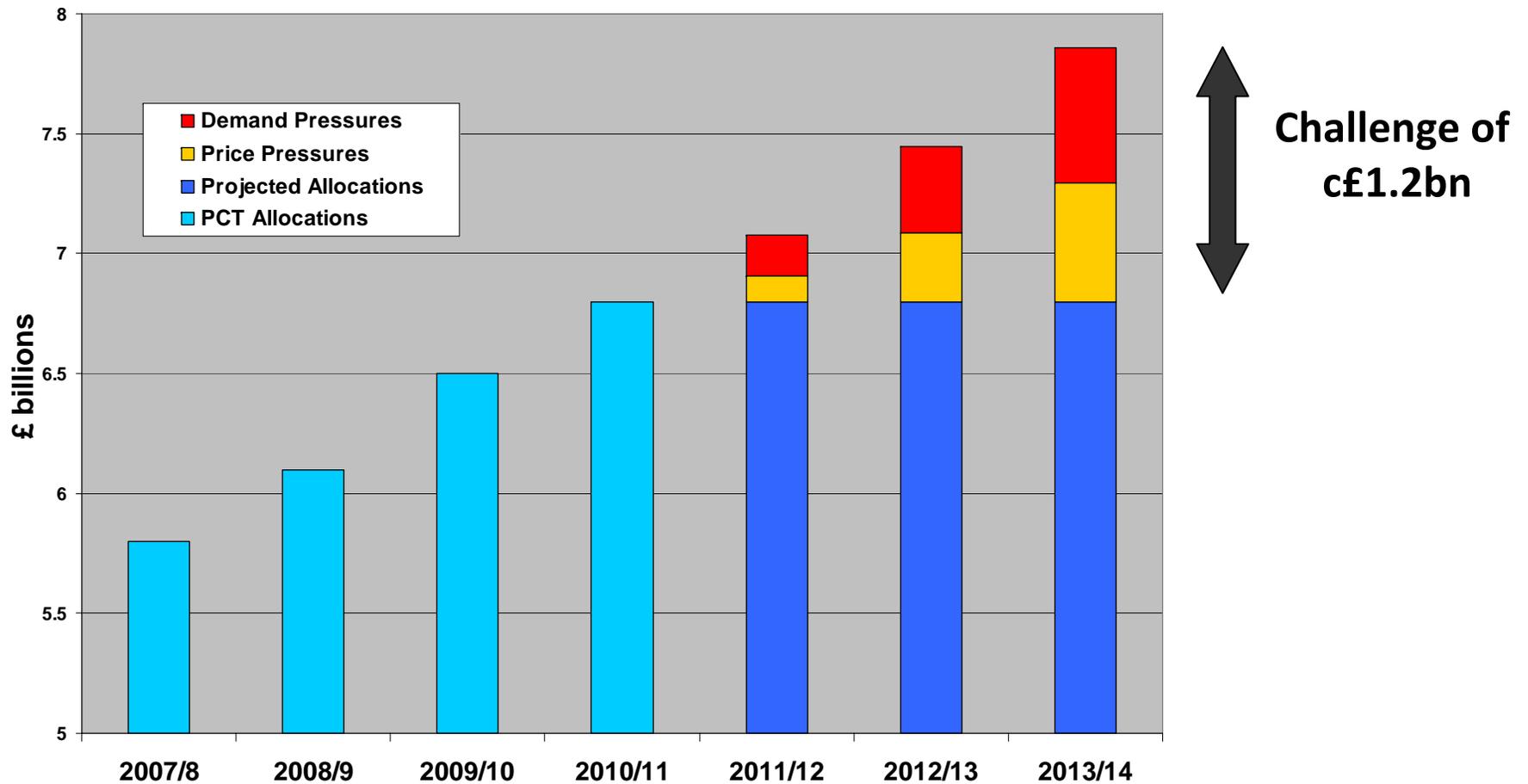


End of life

The financial challenge

- From 2011/12, little or no growth in NHS budget allocations
- £15-20bn of productivity improvements by 2013/14 to meet rising levels of demand while delivering high quality, safe care
- NHS South East Coast needs to release around £1.2 billion across the system by 2013/14
- NHS South Central has calculated that it needs to save around £1.3 billion in the same period
- We need to change the way we spend money to be able to deliver the services needed in the future

The financial challenge – South East Coast



How do we meet these challenges?

By improving **quality**

Quality care is care that is:

- As safe and effective as possible, with fewer hospital admissions, shorter stays and better long term health
- Based on the latest clinical evidence of what works best
- Tailored to the individual, with improved patient experience
- Delivered with dignity and respect

How do we meet these challenges?

Example: Long-term conditions pathway transformation

- More than 1 million LTC patients in South East Coast
- 182% more diabetes sufferers by 2040
- Similar rise in number of people with more than one LTC
- Currently most are treated in acute hospitals

Our aims:

- 25-50% more LTC patients to be treated closer to home
- Tailored personal care and self-management
- Reduced admissions and readmissions

Example: local enhanced service for long-term conditions patients in East Kent

- Fewer A&E visits, admissions and unscheduled GP visits
- Better patient experience, improved care planning

More freedom to innovate

Case study – tele technologies



Telehealth in Kent: monitoring vital clinical indicators of patients with long-term conditions at home using a device linked to a GP or community matron.

Benefits: real-time monitoring, less anxiety, quick response to change in condition, reduction in hospital admissions.

Telecare in West Sussex: pilots with local authorities to help certain long-term conditions patients receive more care in the community rather than in hospital.

Benefits: peace of mind, greater independence, avoid admission to nursing care, improved quality of life.

Telemedicine at Queen Victoria Hospital: using sat nav technology to create unique, specialist surgical equipment for complex maxillofacial surgery.

Benefits: better planning of operations, shorter surgical times, more accurate.

This is not about simply spending less

- It is about spending more wisely, creating opportunities with flat cash
- It is about culture change
- Reducing costs does not mean reducing quality
- There is widespread agreement across the NHS on the scale of the challenge and the broad solutions

Strong partnerships are essential

- This is a watershed for the local public sector
- Prevention
- Productivity and joint commissioning
- Personalisation
- Purposeful partnerships
- We must avoid cost shifting between sectors