

# The Future of Healthcare in Suffolk

A Five -Year Plan



June 2014

The Suffolk health economy is a system comprised of partners from the Ipswich and East Suffolk and West Suffolk CCGs, Suffolk County Council and Suffolk providers who have come together to agree, refine and implement a vision for people in Suffolk to live healthier, happier lives with reduced inequality of life expectancy

Four Strategic Outcomes	Principles	Interventions	Target improvements in health and care outcomes
<p>Every child in Suffolk has the best start in life</p>	<p><b>Health and Independence</b></p> <ul style="list-style-type: none"> <li>Person centred approach with a holistic response grounded in what's "right" and evidence based</li> <li>Transformational not structural, working across organisational boundaries</li> <li>Reduce demand and rebalance activity and spend towards prevention, early intervention and enabling independence</li> <li>Co-production of design, schemes and actions</li> <li>The system is simple, easily accessible and clear</li> <li>Timely response to identified need 7 days a week</li> <li>No health without mental health</li> </ul>	<ul style="list-style-type: none"> <li>Integrated and co-located Neighbourhood teams</li> <li>Strong Neighbourhood Network</li> <li>Specialist CYP teams</li> <li>Risk stratification</li> <li>Local Area Coordinators</li> <li>Personal budgets</li> <li>Shared data / linked IT</li> <li>Review of rehab / reablement / recovery</li> <li>Making every contact count for primary prevention</li> <li>Differentiated approach to care lead / coordination</li> </ul>	<ol style="list-style-type: none"> <li>Securing additional years of life – Potential years of life lost from causes amenable to healthcare (rate) reduced by 7.6% by 2019</li> <li>Improving health-related quality of life for people with LTC by 8.3% by 2019</li> <li>Reducing amount of time spent in hospital – Emergency admissions reduced by 16.8% by 2019 - Delayed transfers of care reduced by 5% by 2015</li> <li>Increasing proportion of older people living independently following hospital discharge - Admissions to care homes reduced by 5.9% by 2015 - Increasing proportion of older people who were still at home 91 days after discharge from hospital</li> <li>Increasing positive experience of hospital care by 6.8% by 2019</li> <li>Increasing positive experience of care outside hospital by 14.9% by 2019</li> <li>Dementia diagnosis rate increased to 67% by 2016</li> <li>Progress towards eliminating avoidable deaths in hospital - Reporting of medication errors increased by 2% by 2015 - MRSA zero tolerance - Cdiff reduction</li> </ol>
<p>Suffolk residents have access to a healthy environment and take responsibility for their own health and wellbeing</p>	<p><b>Urgent Care</b></p> <ul style="list-style-type: none"> <li>Integrated model with overall responsibility for urgent care across the population</li> <li>Delivered where most appropriate with the minimum intervention necessary</li> <li>Available 24/7 with consistently high quality patient experience and outcomes</li> <li>Accessed and coordinated via a single system</li> <li>Shared access to information systems, ideally with a single care record</li> <li>Facilitating training and development</li> </ul>	<ul style="list-style-type: none"> <li>Integrated Urgent Care model</li> <li>NHS 111 and Care Coordination Centre with Directory of Services</li> <li>Urgent Care Services at West Suffolk and Ipswich Hospitals co-located with Emergency Departments</li> <li>Urgent Care services in fixed community settings</li> <li>Urgent Care services that travel to patients</li> </ul>	<p><b>We will reduce health inequalities by:</b></p> <ul style="list-style-type: none"> <li>Promoting increased breast feeding</li> <li>Increasing smoking cessation services</li> <li>Increasing prescribing: <ul style="list-style-type: none"> <li>to control blood pressure</li> <li>to reduce cholesterol</li> </ul> </li> <li>Improved approach to equality and diversity</li> <li>Implementing EDS2</li> </ul>
<p>Older people in Suffolk have a good quality of life</p>	<p><b>Efficient Elective Care</b></p> <ul style="list-style-type: none"> <li>Driven by improved outcomes, service productivity and patient experience</li> <li>Networked to deliver improved service integration</li> <li>Contributes to reduced inequalities</li> <li>Ensures long term financial and operational sustainability</li> </ul>	<ul style="list-style-type: none"> <li>Integrated high quality services</li> <li>Development of viable specialty based clinical networks</li> <li>Programme of joint working across providers in agreed specialties eg Urology</li> <li>Potential repatriation</li> <li>Use of technology</li> <li>Pathway development</li> </ul>	
<p>People in Suffolk have the opportunity to improve their mental health and wellbeing</p>	<p>3 system - wide workstreams Overseen by the System Leaders Partnership Board</p>		
<p><b>Success criteria</b></p> <ul style="list-style-type: none"> <li>Delivery of target health and care outcomes</li> <li>Reduced health inequalities</li> <li>All organisations within the health economy have financial balance in 2018/19</li> <li>No provider under enhanced regulatory scrutiny due to performance concerns</li> </ul>			

# Enablers to Delivery of Integrated Services

- Workforce development/cultural change – ‘one team’
- Recommissioning of services – large contracts expiring 2015
  - Some joint SCC/NHS services
  - Other integration ‘built in’
- Pooled £ - Better Care Fund