





Isle of Wight Health and Care Plan

People living healthy, independent lives

Welcome



Maggie MacIsaac

Chief Executive Hampshire and Isle of Wight Partnership of Clinical Commissioning Groups, Southampton City Clinical Commissioning Group and West Hampshire Clinical Commissioning Group



Maggie Oldham

Chief Executive Isle of Wight NHS Trust



John Metcalfe Chief Executive Isle of Wight Council

As the Chief Executives of the local NHS Trust, clinical commissioner and council, we share a vision for health and care on the Isle of Wight that will see people living healthy, independent lives.

To make that vision a reality our health and care services need to change to better meet the needs of our local community.

The challenges of caring for an ageing population and ensuring that we have the right people to work in the NHS and social care require us to think differently about our public services.

The Isle of Wight Health and Care Plan sets out how we will meet those challenges.

We have listened to local people, launched a significant investment in community services, set out a blueprint to transform mental health and made excellent progress in delivering social care as close to home as a person's ability will allow. We are working hard to make our services as efficient as they possibly can be, using technology to improve the care we provide and working with partners to make our services sustainable.

Success in the future will require public sector organisations to work much more closely together. This isn't just common sense it is better for the people that we support.

The Health and Care Plan sets out our priorities for the next three years and describes the changes that you can expect to see.

It will improve the services we provide and improve our finances, making sure that health and care services on the Island are there to support future generations.

Over the coming months we will share more information about our plan and we look forward to working with our community and community, independent voluntary sectors as we deliver improved health and care for the Island.

You can find more information about the Isle of Wight Health and Care Plan online at: www.iowhealthandcare.co.uk

Contents

- Introduction page 4
- What are the challenges? 5
- Our priorities 6
- What this means for you 7
- We have listened 16
- Summary 20

Introduction

The Isle of Wight NHS Clinical Commissioning Group (CCG), Isle of Wight NHS Trust, Isle of Wight Council, local GPs and many others are working together to improve health and care on the Island.

There is a lot of work already being done to make sure that people are able to rely on high quality, well-run services - now and in the future.

We have worked hard to improve how services are organised and commissioned, including setting up three 'locality' areas to better connect services to local communities.

Working with colleagues in primary care and the voluntary sector, through networks like the Local Care Board, our health and care system has agreed a way to continue this progress.

The Local Care Board is made up of leaders from the CCG, council, Trust and is supported by the elected member for Adult Social Care and Public Health. It is also made up of GPs and represenatives from the community and voluntary sector.

It takes decisions about health and care services and looks at how well they are performing - bringing together our resources and plans. As an Island resident, carer or patient, you will be aware of the challenges we face. You have told us of your frustrations and concerns before and now it is time for action.

We must change how we provide health and care services to better meet people's needs.

We will work more closely together to improve health and care and to make them sustainable.

Our plan is to invest in community services and to transform the way mental health services are provided.

Over the next three years we will find partners to work with us to support further improvements to services and to secure their long term future.

We will also make best use of public money, improving productivity and financial sustainability in the NHS and social care.

The recent announcement of £48 million of investment in NHS buildings and IT is a welcome boost.

We will work with our partners to decide where best this money can be spent to support our plan for improved and sustainable health and care services. Many of the challenges we face are also playing out across the country.

People are living longer and many more have complex health and care needs.

There are financial pressures in the NHS, social care and the community and voluntary sectors. It is difficult to recruit enough people with the right skills across health and social care (including the independent sector).

We need to find ways of improving the health and wellbeing of people living here while keeping our finances in balance.

It is also true that some of the challenges we face are unique to the Island.

Detailed analysis of our services and who uses them has helped us set our priorities over the coming three years.

Our current 'model of care' means that people go into hospital who could be better looked after at home or in the community.

Our plan is designed to deliver a new model of care that better meets the needs of local people.

It will create much closer links between primary, community, social and voluntary sector care. And it will engage with independent sector providers of social care. Our analysis has shown that:

- The age of people living on the Isle of Wight is similar to other places popular with retirees but more older people live alone
- Many people are being admitted to hospital who would be better looked after in the community
- Too many people in hospital are ready to leave but are waiting too long to be discharged (because of delays inside and outside of NHS control)
- There has been under-investment in community health services - we spend half the amount of similar areas of the country
- The way we provide mental health services has created a 'revolving door', with too many people in hospital who would be better supported at home or in the community
- A small number of people with complex needs require more than one third of the total health and care resource because we haven't had an integrated plan for their care.

Our priorities

Health and social care on the Island needs to change and improvements need to happen quickly.

We have undertaken detailed analysis of the current health and care service provision on the Island.

Based on that analysis, our priorities are:

- investing in community services
- improving mental health services
- improving acute (hospital) services, and
- making sure health and social care are as well-run, productive and financially sustainable as possible.

The first year of our plan is already set out in the operating plans of the CCG, council and Trust. We will keep you up to date with progress.

Supporting people to return to home will involve improving how we work together to discharge people from hospital as soon as they are ready to leave. This is better for patients and will significantly reduce the amount of money being spent on unnecessary hospital care. To support this ambition we have announced more than £800,000 of investment in community services.

To make sure that the health and care system works more effectively and efficiently for the benefit of local people, we will bring our organisations closer together and create an Integrated Care Partnership (ICP).

It will take decisions about how health and care services are commissioned and provided on the Island. We expect the ICP to be running in shadow form by April 2020.

The ICP will make the health and care system work more effectively through sharing resources and budgets, taking decisions together and working more closely to deliver improvement.

Partners are already working very closely on things like waste management, emergency planning and communications and engagement - with the benefits already beginning to show.

To support these improvements we will be working to work with partner organisations on the mainland, which will help us make our services sustainable. This builds on successful partnership working already underway at St Mary's Hospital and in the ambulance service.

Hospital services are a vital part of the NHS on the Isle of Wight and will continue to be. Working with other parts of the NHS will help us improve the services that local people rely on. We will be finding ways to provide services more effectively and efficiently because the quality of services and financial performance go hand in hand.

Improving our financial performance will make our services sustainable in the long-term and make sure that we can continue to invest in the improvements that our community rightly expects.

What this means for you

- Everyday care page 8
- Seeing a GP 9
- Community services 10
- Going into hospital 11
- Mental health 13
- Technology 14
- Organisations providing your care 15

What this means for you

Everyday care



Health and care services across the Island will be built around what people need.

Your GP may coordinate the care you need and all sorts of help will be on hand. This will include other health professionals, social care, voluntary sector organisations and people in your surgeries who can tell you about the range of support available.

This will help you manage your health effectively and access the support you need, when you need it.

That support will be available to carers too, and there will be information and advice readily available online or over the phone. We will make sure that all of those who are qualified to look after you will have access to your care record so you won't have to keep repeating your story.

The emphasis will be on prevention, ensuring that you are supported to stay as healthy as possible, out of hospital and in an environment that suits you best, ideally your own home.

Extended health and care teams, working with networks of GP surgeries, will be at the heart of making this happen.

Seeing a GP

We have been working hard to improve primary care services (the services provided by your GP, surgery or practice).

The NHS Long Term Plan, covering the NHS in England, describes how GPs can work together in primary care networks (PCNs) and support each other to offer improved services, including weekend and evening appointments.

Larger, multidisciplinary primary healthcare teams will mean that they are better able to respond to the needs of local people and that they are better placed to recruit and retain staff.

These teams will be coordinated by GPs but involve a range of different, skilled professionals, like pharmacists, physiotherapists, paramedics and physician assistants.

GP but adapting to that small change will help improve care overall. You may benefit from seeing someone better placed to provide you with the care that you need, such as a physiotherapist if you have a back or knee problem.

> There will be a wider range of appointment options available, as practices work more closely together, and different ways for you to book these, including online.

Bringing surgeries together will mean GPs are better able to manage rising demand for services, as well as providing more robust cover for staff holidays and sickness.

Some practices on the Island are already merging to provide a better, more resilient service to their patients.



Our plan is to go further by involving NHS and council community teams to work within these primary care networks. Bringing the support to local people.

We want to make it easier for you to make GP appointments when you need them.

appointments may not be with a specific

To help improve access, these

What this means for you

Going into hospital



We have already started to invest in community services to help people stay out of hospital.

But if you do need to go into hospital you need to know the services are safe, responsive and provide the best possible care.

For too long this hasn't been the case, despite the very best efforts of skilled and dedicated staff working in the NHS and in social care.

Changing our model of care will mean that services continue to improve.

We have seen the impact of underinvestment in NHS community services. The lack of available social care placements plays a part too.

Our analysis shows that there are too many people in hospital beds who do not need to be there.

On average, one person in five admitted for non-elective (unplanned) care was ready to go home but could not be discharged because of internal and external process issues. There is lots of evidence to show that being in hospital for too long is bad for people's health.

Reducing the length of time people spend in hospital is a vital part of our plan and will improve the quality of services that people receive.

We carried out an audit of all Trust beds, together with the rehabilitation beds the NHS pruchases in care homes.

We looked at who was in each bed, why they were there and how long they had been there for.

We learned that 43% of all patients spent more than a week in hospital when they could have gone home.

The review also noted that 93% of patients waiting on the medically fit for discharge ward were over the age of 65.

What this means for you

Going into hospital continued

We urgently need to invest in community health and social care services, not just to keep people out of hospital but to support them more effectively when they no longer need hospital care.

Having the right infrastructure in place to meet the needs of people as they leave hospital delivers all sorts of benefits – for the individual, for health and care workers and it creates a more efficient health and care system. It is also safe and supports better quality services.

As we continue to invest in community NHS and other services, we will not need as many hospital beds.

This will free staff up to work elsewhere in the hospital or in the community and reduce the amount we pay to agencies to temporary workers.

Smaller hospitals sometimes struggle to maintain the quality of the services they provide. This can be because they see too few patients, they also struggle to recruit and retain staff. This is also true for the Island. Making the services that our population rely on sustainable is absolutely vital.

An important part of our plan is to work with a mainland partner to support some of the hospital services on the Isle of Wight.

By working more closely with other parts of the NHS we will be able to increase the number of doctors, nurses and other health care professionals available to work in Island services. It will improve the quality of those services and ensure that they are sustainable.

Islanders rightly expect the best possible standards of care. Because of the challenges of providing specialist services in a small hospital like St Mary's there will always be a need for people to travel to the mainland for some appointments.

We will make sure that people only have to travel to the mainland where clinically necessary and with our partners we will continue to discuss ways to make travel easier.

Community Services

We want to enhance our community care for older people, reduce the length of time people stay in hospital if they need to be admitted and we will develop modern, fit-for-purpose mental health.

We have just announced more than £800,000 worth of investment in community services, including care at home, nursing and social care, as well as technology to improve our services.

By investing in community care we are building upon work we have started across the Island.

This work has been organised in three localities, to ensure that the services are matched to what the local populations need.

Care will be coordinated by teams of different health and care professionals to support people closer to home.

Before deciding where else to invest we will analyse the current demand and capacity in community services and work with social care, primary care and the voluntary sector to ensure that the investment meets the needs of local people. Improving community services, through investment and working more closely with primary care, will help keep people out of hospital and if they do need hospital treatment, it will help get them home sooner.

Social care has a vital role to play in delivering the priorities set out in this plan.

Whether that is colleagues in social work, private care providers, support services to children or adults in need or at risk.

We have made excellent progress improving children's and adult social care on the Island and we will continue to work together to make sure our services are built around what local people need.

Mental Health

We have started transforming the way mental health services are provided on the Island.

Support will be tailored to the needs of the individual, the new model will be more effective and more efficient.

The NHS, the council, voluntary sector and other organisations involved in the delivery of mental health services have agreed a way forward.

The Blueprint for Mental Health sets out our vision for change. We've already started making improvements, but we're committed to doing more.

It commits us to changing our approach:

- We will develop mental health services that support people of all ages, that start in the community and connect effectively with other specialist services
- We will break down the boundaries between GPs, community and hospital services and involve third sector partners
- Our focus will be on enabling people to live a full and meaningful life

- We will do more to support recovery, developing our workforce so that we have the right mix of trained, skilled, and experienced staff
- We will improve the range of community-based mental health services available to those who need them, including for those with the highest level of need
- We will move NHS community mental health services away from the hospital site so that they are at the heart of the communities they serve.

Enhancing our community mental health support means that we can refocus our specialist services towards those who are most unwell, working together, with partner agencies to deliver care that is safe, effective and aligns with current best practice.

A key part of our plan is to identify a mainland partner, with expertise and experience in providing NHS mental health services, to help support the redesign and delivery of NHS mental health services on the Island.

It is too early to know what this partnership might look like, but it will help to deliver the improvements that people rightly expect and ensure that the services they rely on are sustainable.

Technology

We are already exploring how technology can improve care for people.

Recent trials of technology in speech and language therapy and an app to scan people's skin for potential problems have proven successful.

A number of care homes across the Island use telehealth to monitor their residents' vital signs and respond to any changes.

This shows how technology can improve how health and care professionals communicate and enables people to access the care they need quickly and easily, when it suits them.

Better technology also means that more healthcare professionals can share your medical records – offering 'joined up' care from staff who know your history.

Instead of starting from scratch every time you see a new member of staff, you will talk to someone who can make faster and more informed decisions about your care, and you will only have had to tell your story once.

Increasingly, technology can help you book appointments, check test results, monitor your own health, and even talk with specialists in real-time, using internet services on phones, tablets, or home computers.

GP practices are involved in the national roll out of the NHS app that will be complete by July.

People using the app can access information about conditions and treatments, book and manage appointments, order a repeat prescription, check if they need urgent help and view their medical record.

You can get 24-hour access from anywhere, you don't have to spend long periods of time on the phone and you will have more control over making appointments.

It also means that staff in practices spend less time booking appointments and ordering repeat prescriptions.



The people providing your care

Working together more closely isn't just common sense, it is better for the people that we support and will bring muchneeded improvements in health and care services.

Most people see the NHS as a single organisation and don't recognise that different Trusts might be providing different parts of a service, or delivering parts of their care.

You should be able to expect the same high quality of care from the NHS, no matter which organisation employs the nurse, doctor or therapist in front of you.

Equally, most people do not distinguish between the support they receive from health and social care. So our plan will mean changes for the organisations that commission and provide your care.

The plan that we have developed will make sure that the health and care system on the Island works more efficiently and effectively. This will have an impact on the people working in the clinical commissioning group, council and the NHS Trust.

A large part of our plan will involve work going on behind the scenes, improving the way that we organise ourselves as organisations to deliver the best possible services. If we are to meet the significant financial challenge facing the health and care system on the Island then we must work differently.

Staffing is the single biggest cost in the NHS and a large part of our spending on social care. Our wage bill is being driven upwards by an over-reliance on expensive, temporary workers – often from agencies that charge the public sector a premium.

Organising our services better will reduce the number of shifts and posts that need to be covered by agency staff. Improving recruitment and retention will help too.

We want to encourage people to take up roles on the Island in the NHS or joining its Staff Bank, reducing the number of shifts that are filled by expensive agency doctors, nurses and other staff.

Agency spending is only part of the issue. We also need to think about how we can get nonclinical staff working more closely and more effectively across our organisations.



We have listened

A range of projects and programmes have already taken place across the Island.

This plan will not go over the same ground but we have listened to people, patients, service users, carers, advocates, partners in the voluntary and community sectors and our staff.

- Healthwatch 17
- My Life a Full Life 18
- Mental Health Blueprint 19

Healthwatch Isle of Wight

Through recent engagement and the valuable support offered by Healthwatch Isle of Wight, we have been able to put together a clear picture of what matters to local people.

We are grateful to everyone who has taken the time to share their views with us.

A common frustration reported by Island residents is that they find it difficult to get an appointment at their GP surgery, and that this can force them to look at other alternatives, such as heading to A&E.

A Healthwatch Isle of Wight survey in 2018 also reported that almost half of the 2000 respondents (44%) waited more than a week to be seen.

We know there are reasons for this – we have an aging population and more people live alone on the Island (15%) compared to the national average (12%). They may not have a network of friends and family to support them.. While local GP list sizes have grown 3.7% since 2013 we are not short of GPs on the Island when compared to similar areas across the country.

We know that more needs to be done to help people see other health professionals, who may be better skilled to meet their needs, and not just their GP.

We also need to do more to promote options for people to follow when booking appointments. Both in terms of publicising extended access schemes and online booking.

Healthwatch Isle of Wight has also undertaken a number of reviews into how services are provided and perceived and the experiences people have had using them.

Recent reports by Healthwatch that have been particularly useful, in terms of both feedback and recommendations, have been those relating to Accident and Emergency (2017), cancer (2017), primary care (in 2016 and 2018) and dementia (2018).

We have listened

My Life A Full Life

This work, which included an extensive public engagement exercise, was part of the 'vanguard' programme run through NHS England.

It looked at a range of issues including frailty, urgent care, women and children, primary care, mental health and long term conditions.

In the NHS, frailty is used to describe people who are at highest risk of adverse outcomes such as falls, disability, admission to hospital, or the need for long-term care.

This plan will not repeat the same listening exercise, because your feedback was clear.

Two key themes emerged from our conversations with the community during My Life A Full Life. They were ownership and prevention.

People told us that they wanted to take more responsibility for managing their own health care needs but in many cases needed the tools, knowledge and support to do so.

Prevention emerged as a key theme, both in terms of promoting good public health but also in helping people to manage their long term conditions – to prevent them from worsening and reducing the need for admission to hospital.



Through engagement with Patient Participation Groups and our local GP services, your views were made clear.

We recognise that more needs to be done to support people when they leave hospital and particularly when they do not have an existing network of friends or family around them.

Working more closely with the voluntary sector will be important as we look at extending our primary care teams to better support those who most need our help.

People felt very strongly about the need to provide more care in the community. There was concern expressed about the levels of isolation and loneliness across the Island, particularly among older people.

Mental Health Blueprint



The engagement undertaken for My Life A Full Life led directly to the development of our Island Mental Health Blueprint.

People described a picture of a services that contain many dedicated, caring staff but which were fragmented.

It is clear that there needs to be greater crisis support, and there is a need for services to be better organised.

A key theme was the need for better prevention and aftercare following a mental health crisis. Many noted that it was much easier to access services in a moment of crisis. People recognised the need for more joined-up support across the Island, as provision was considered patchy. In particular, a respondent noted the need to develop Community Health Hubs further.

"If the solution is to keep people out of hospital and de-medicalise conditions and self-care in the community then there needs to be expansion of community mental health facilities in key geographical areas..."

This plan will make overhauling mental health provision a priority, investing in better provision in the community to ensure that people get the support they need before they are in crisis and need to be admitted to hospital.

Find out more about the Mental Health Blueprint here: www.isleofwightccg.nhs.uk/get-involved/mental-health-blueprint Ensuring that our services are high quality and financially sustainable, safe and part of a local health and care system that works effectively, is critical for the Island.

We know things have to change, it is our responsibility to ensure that we develop better and more coordinated services in the community and in primary care.

Where hospital care is required we want this to be as effective as possible and provided on the Island unless absolutely necessary, acknowledging that to do that might require partnering with mainland providers.

We know that not all care can be provided on the Island but our commitment remains to keeping off-Island travel for services to a minimum, using developing technology and other opportunities, to support this.



Over the past few months we have been collectively reviewing all of our individual plans for tackling these issues and have undertaken a thorough and coordinated analysis of our existing health and care services.

Our approach is based on:

- supporting people to stay healthy and independent through the Living Well Service.
- providing care closer to home, enabling people to live more independently and keeping them out of hospital and avoiding permanent admissions into care homes wherever possible.
- quality and safety we have to thoroughly review the way we provide all our services. For too long we have had to invest in expensive temporary staff to ensure staffing quotas are safe. This is unsustainable.
- providing better support to people with the most complex conditions: more effective out of hospital care through primary care networks, extended multidisciplinary teams, greater investment in community services and work closely with the voluntary and community sector.
- moving people out of hospital quicker we are setting up various programmes that will help ensure that no one has to stay in hospital longer than they medically need to, which relies on having the right network of services available in the community.



We have a shared vision, a case for change that we all endorse, and a plan to deliver improvement. To achieve it will take time, and it is something we need to do together. That is why we have set out a joint, three-year plan for health and care.

The plan is based on making continuous improvement over a number of years to meet our shared vision – that 'people will live healthy and independent lives'.

Our plan is ambitious and will help the health and care system to improve the quality of services and its finances - making service sustainable for future generations.

We will make care out of hospital more effective, more joined up and more focused on what people actually need.

The investment in community services will be better for patients and be more cost effective – creating services that are sustainable. Investing in community NHS services also supports people to manage the conditions they have in a way that unnecessary hospital admissions, particularly in mental health.

We will increase the number of permanent clinical staff in the NHS and reduce reliance on temporary staff. This is better for the people we care for and will improve our finances. At the same time we will work together to find ways to make our nonclinical workforce more efficient.

This plan sets our priorities and as the detail of the work that we are undertaking becomes clear we will share more information with you.

We are committed to explaining our plans to local people and we will be transparent and open in sharing our plans for change.

By working together, as a health and care system and as an Island community, we will rise to the many challenges that we face.

You can find out more information about the Isle of Wight Health and Care Plan, including details of how to get involved at: www.iowhealthandcare.co.uk

To receive a copy of this document in any other format, including large font size, easy read or braille please contact:

The Communications and Engagement Team Isle of Wight NHS Trust St Mary's Hospital Parkhurst Road Newport PO30 5TG







