



# Transforming Services *Changing Lives*

We would like to hear your views on how we can improve people's health and healthcare in East London – Newham, Tower Hamlets and Waltham Forest

The interim case for change

**July 2014**

## Introduction

### Transforming Services, Changing Lives aims to:

- describe the current state of NHS services in East London
- identify if change is needed to improve services for patients
- begin to develop a shared vision of how we could improve services



All key health and social care organisations across east London have been working together to develop this interim Case for Change. We believe significant change is required. Now we would like your views.

### If you would like to know more:

- You can see the full document at [www.transformingservices.org.uk](http://www.transformingservices.org.uk) or for a paper copy you can email [tscl@nelcsu.nhs.uk](mailto:tscl@nelcsu.nhs.uk) or phone us on 0203 688 1678.
- We will be making presentations at councils, clinical commissioning group meetings and community meetings throughout the summer. Take a look at [www.transformingservices.org.uk](http://www.transformingservices.org.uk). Please contact us if you would like to attend a meeting, or if you are part of a community group and wish to request a speaker at one of your events.

### To let us have your views by 21 September 2014:

- Fill in the survey at the back of this booklet
- Or visit [www.transformingservices.org.uk](http://www.transformingservices.org.uk) and fill in the same 5-10 minute survey
- Or email us or phone us (the same contact details as above)

## Who we are

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### Integrated acute and community trusts

- Barts Health NHS Trust (including hospitals at The Royal London, Whipps Cross, Newham, Mile End and The London Chest)
- Homerton University Hospital NHS Foundation Trust

### Waltham Forest and East London Clinical Commissioning Groups (CCGs)

- NHS Newham CCG
- NHS Tower Hamlets CCG
- NHS Waltham Forest CCG

### Patients and public

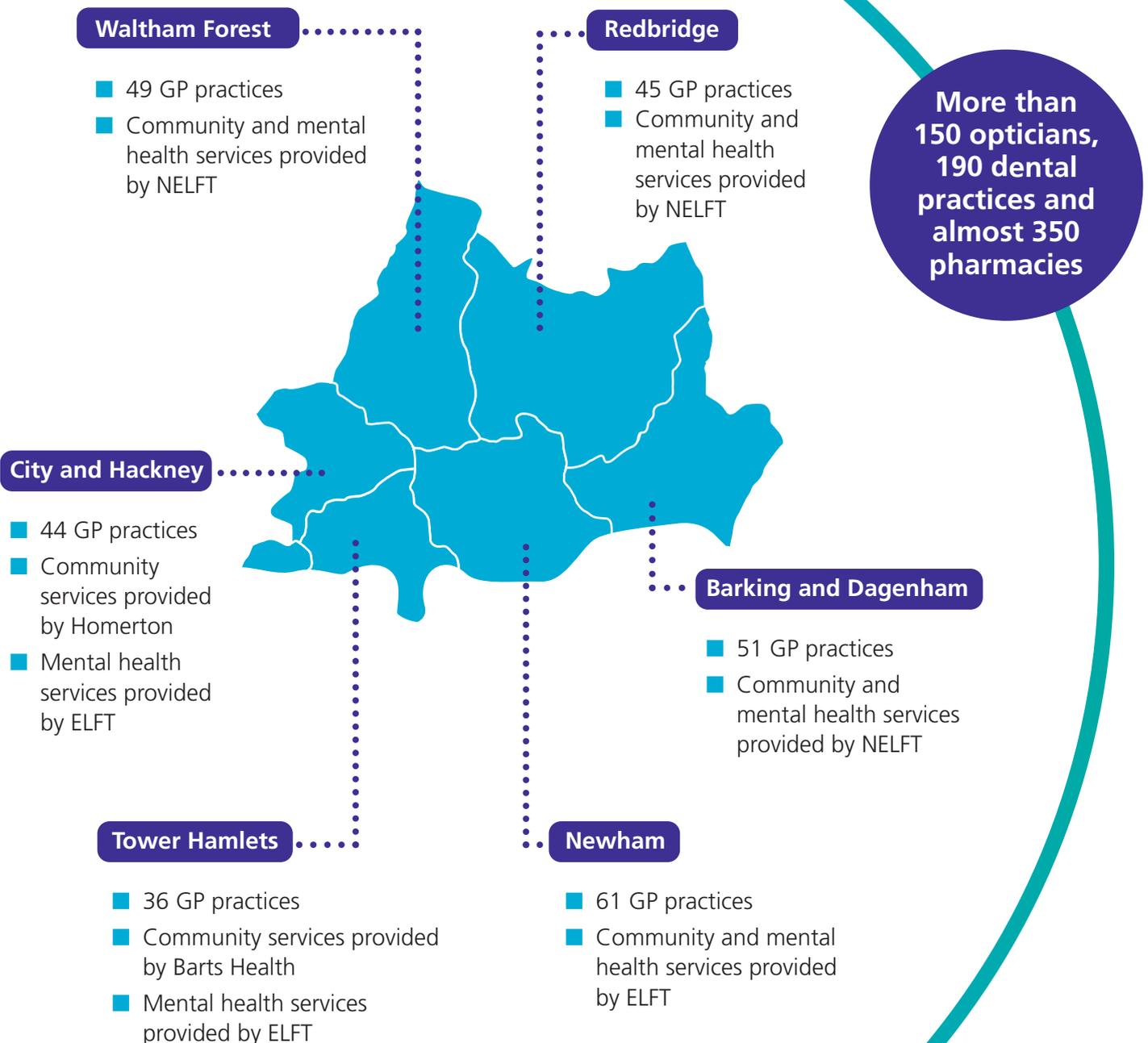
### Community and mental health trusts

- East London NHS Foundation Trust (ELFT)
- North East London NHS Foundation Trust (NELFT)

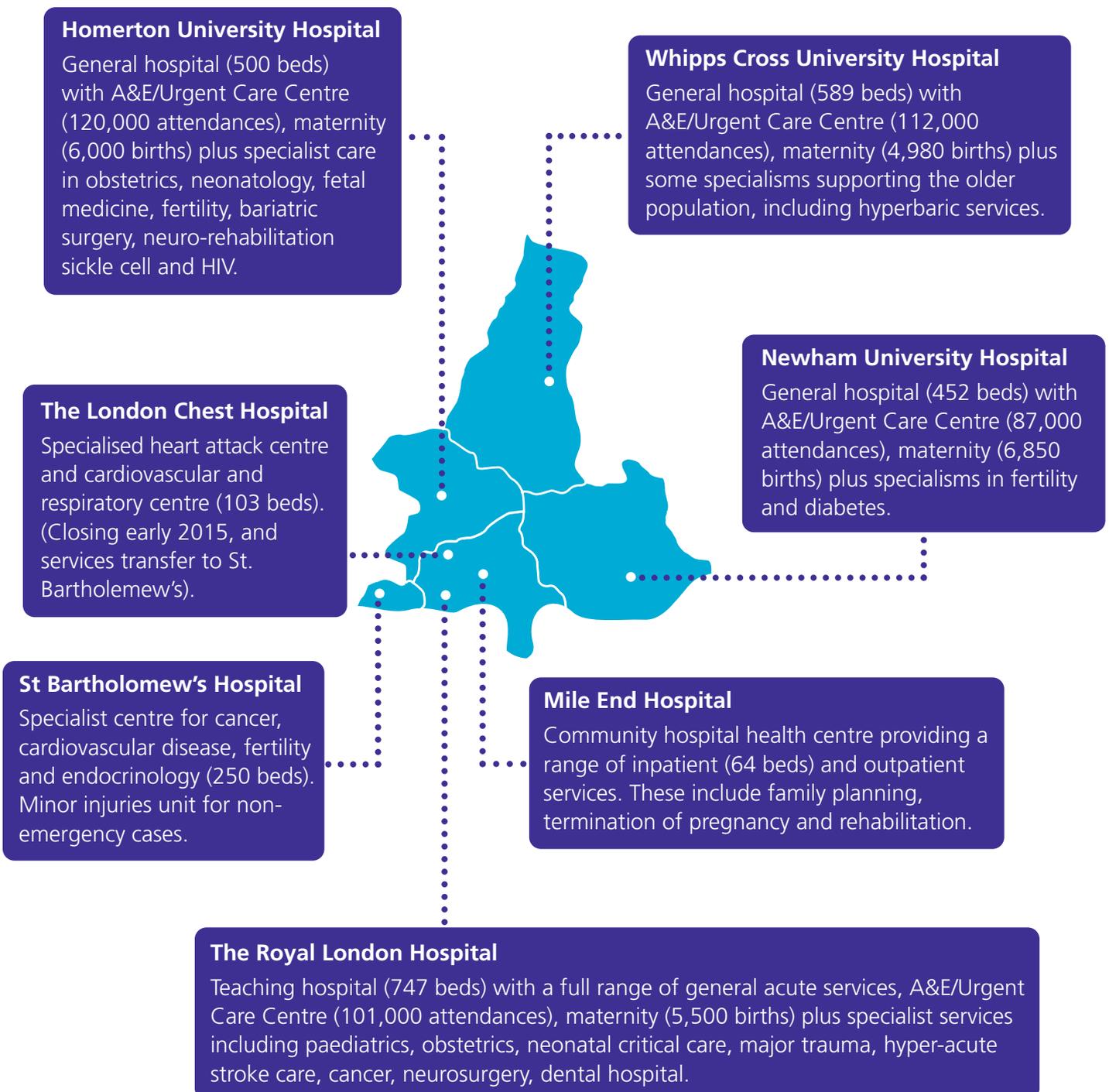
### Other commissioners

- NHS England
- NHS Barking and Dagenham CCG
- NHS Havering CCG
- NHS Redbridge CCG
- Local authorities

## Existing services in the community



## Existing hospital services



## Our vision for the NHS in East London

1  
↓

**Work in partnership with other organisations and with patients to improve health and prevent the need for health services**

The NHS working with an active local authority and voluntary sector to improve health, reduce health inequalities and prevent the need for health services



People take personal responsibility for their own health, are supported to manage their own health, to self-care and to use NHS services appropriately – back up by high quality and responsive primary care services

2  
↓

**When need arises, ensures right care, right time, right place**

Rare / dangerous / complex needs best treated by a specialist



Specialised services



Acute episodes of care treated efficiently according to severity / urgency



Local hospital services

Long term conditions which are actively managed with patients to reduce the need for unplanned care



Enhanced primary and community care services

## We looked at what influences people's health and the quality of services

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**Health  
and  
wellbeing**

**We work with patients to help prevent illness, but more needs to be done if we are to keep people healthy and manage their conditions:**

- **The health of our population is not good.** In Tower Hamlets and Newham in particular, life expectancy is lower than the national average and more people die early from heart disease, strokes, cancer and other big killers than in other parts of the country. Whilst we need to improve NHS services, there are other factors that contribute to this problem. Deprived communities (of which there are many in East London) tend to have poor health. The transient population means it is difficult for patients and the NHS to establish a good relationship; and the rich ethnic mix brings additional challenges to delivering a high quality service.
- These challenges will not go away as the **population is growing** at a higher rate than anywhere else in the country – particularly in regeneration areas. The highest proportionate change is amongst the over 65s.
- **Everyone has a responsibility for good health**, the NHS, local councils, businesses, schools, and patients and the public – who need to be empowered to take responsibility for their own health and to use NHS services responsibly.

**World  
class  
services**

**We have some world-class services, for instance treatment of heart attacks, major trauma and stroke, but not every services is always excellent:**

- Patient experience is often poor. **GP patient satisfaction** scores are low. Barts Health has lower than national average scores on inpatient, A&E and friends and family scores. Out of 22 London hospital **maternity services**, Barts Health is ranked 19th and the Homerton 21st (Care Quality Commission, 2013), although a recent CQC inspection of maternity services at the Homerton rated the services as good.
- Services are of differing quality depending on whether the patient is the focus of integrated, acute, social and mental health care and where they live; what service they need; and what time of the day or week they need care.
- **At the start of life**, there is not enough antenatal care in the community; too few women have their first antenatal assessment by 13 weeks; and we need more midwives and more consultant presence on the labour ward.

- **Children and young people** are too often treated in adult settings; those with complex needs are passed from pillar to post; and mental health conditions are identified and treated too slowly.
- We have a population with **very high levels of mental illness**; physical health outcomes of people with mental illness are poor; readmission rates for people who have been discharged are too high and we need to improve access to psychological therapies.
- People living with **long term conditions** often don't get the individual service they need, taking into account their personal situation; too few cancers are being diagnosed in the community; too many people have to be readmitted to hospital, perhaps because the services are not good or accessible enough in the community; and an average 91% of patients in East London responded "no" when asked whether they had a written care plan (GP Survey, 2014) – something that clinicians feel is essential if the NHS and patients are to work together managing a condition.
- We use **urgent services** (particularly A&E) more than most other parts of the country. Newham's Urgent Care Centre found 30-40% of people could have been cared for closer to home; ambulance handovers, particularly at Whipps Cross are often too long; and patients often stay too long in hospital waiting for care to be arranged in their home or to have a discharge assessment.
- Some **non-urgent surgery** is best done in large centres of excellence which leads to improved efficiencies and outcomes. In other cases it may be better and possible to deliver services more locally. At times and in some specialities we are too slow to treat people (often called the 18 week standard). Too many patients are having their operations cancelled.
- To deliver improvements we will need high quality **support services**. But as the population increases we need at least two million extra tests by 2020/21. We need to improve turnaround times for test results and ensure specialised diagnostics such as interventional radiology are available to everyone.
- We need to recognise the essential nature of **research** which drives many of the most important improvements in care.

Finally, we need to provide more services 24/7. NHS England estimates over 500 lives could be saved a year in London if patients admitted in an emergency at weekends had the same standard of care as patients admitted on weekdays.

**Workforce**

**We have developed some innovative schemes to build a sustainable, flexible, professional workforce, such as Barts Health's apprenticeships for local people. But there are big challenges in recruiting for specific posts.**

Some of these recruitment challenges (e.g. for A&E consultants, paediatric nurses, neonatal nurses and midwives) are national. But some challenges are more local, for instance the high cost of living; the shortage of GPs – particularly when many existing GPs are close to retirement; and often poor staff motivation – which tends to suggest a poorly performing service. We need to develop the clinical leadership and work closely with local authorities to recruit a local workforce that has the skills to deliver high quality services now and in the future.

**Resources**

**The NHS and local government are facing significant real terms reductions in funding. We need to work together to make better use of our resources. The NHS has invested £50 million in Whipps Cross and Newham hospitals in the past few years, and we have already saved millions by making efficiencies, but we need to:**

- make more than **£400m** of savings over the next five years and get better at preventing ill health.
- **improve communication and information sharing** so patients can better care for themselves and do not have unnecessary appointments and tests.
- make **more effective use of technology** – last year the first person in the UK was fitted with a wireless pacemaker at Barts.
- make **better use of estates**.
- **make choices** about the best way to spend resources.

# Based on our findings, we believe the key areas for change in local NHS services are...



**We think these changes would mean that, together, we could achieve great health and health outcomes for people in East London, such as:**

.....

**1** People supported to manage their long term condition in the community

**2** More people surviving life-threatening events such as stroke, heart attack or major trauma

**3** Patients reporting improvements in their quality of life as a result of health care interventions

**4** Patients reporting an excellent experience when accessing healthcare

**5** People supported to die at home where it is their choice to do so

## Now tell us what you think

To see the full reports and fill in this survey online please go to [www.transformingservices.org.uk](http://www.transformingservices.org.uk)

### Q1 How satisfied are you with the NHS?

- Very satisfied       Quite satisfied       Not satisfied or dissatisfied  
 Quite dissatisfied       Very dissatisfied       Don't know

### Q2 How much do you think the NHS needs to change?

- A lot       A little       Not at all       Don't know

If you think the NHS needs to change, let us know why – our ideas are on page 11.

### Q3 Do you agree with our vision of care on page 6 and 12?

- Yes, completely       Mostly       Partly       Not at all       Don't know

Let us know any thoughts you have on what a good NHS looks like.

### Q4 Do you think we have described the challenges facing the NHS?

- Yes, completely       Mostly       Partly       Not at all       Don't know

Let us know if you can think of other challenges or if you don't think some of the challenges described are very important.

### Q5 How do you think we could work better with our partners – for example local authorities?

.....

**Q6 How can we help patients and the public to take more responsibility for their care and encourage them to self-care?**

**Q7 Do you think we have described well the key areas we need to change - our ideas are on page 11?**

- Yes, completely   
  Mostly   
  Partly   
  Not at all   
  Don't know

Let us know if you think there are other key areas we need to focus on, or if you don't think we should focus on our proposed key areas for change.

**Q8 We would like to illustrate points made in the final case for change with quotes from members of the public. Do you have any experiences of the NHS, good or bad, that you are willing to share with us? We will anonymise any quotes used.**

.....

**Please tell us a little about yourself. This helps us understand whether there are different views from different groups or parts of the community.**

You don't have to answer these questions. We will take your views into account whether you answer them or not.

**Are you providing this response as a representative of a group:**

- Yes   
  No   
 If yes, what is the name of the group

**Are you...**

- Male   
  Female   
  Prefer not to say

**How old are you?**

Under 16     16-25     26-40     41-65     Over 65     Prefer not to say

**Are you responding as a...**

Service user     NHS staff member     Carer     Local resident     Other     Prefer not to say

**What is your ethnic background****White**

White British  
 White Irish  
 Any other white background

**Mixed**

White and Black African  
 White and Black Caribbean  
 White and Asian  
 Any other Mixed background

**Asian**

Asian British  
 Indian  
 Bangladeshi  
 Pakistani  
 Chinese  
 Any other Asian background

**Black**

Black British  
 Black African  
 Black Caribbean  
 Any other Black background  
 Any other ethnic group  
 Prefer not to say

**Which belief or religion, if any, do you most identify with?**

Agnosticism     Atheism     Buddhism     Christianity     Hinduism  
 Islam     Judaism     Sikhism     Other     Prefer not to say

**Do you consider you have a disability?**

Yes     No     Prefer not to say

**Which borough do you live in**

Newham     Tower Hamlets     Waltham Forest     Barking and Dagenham  
 City / Hackney     Redbridge     Other

**Would you like to be kept up to date with information about this NHS programme**

Yes     No

If yes, please give us your email or postal address

**Please tear off this questionnaire with your answers and send to: Transforming Services  
 Changing Lives, NEL CSU, Clifton House, 75-77 Worship Street, London EC2A 2DU**

Monday - Friday  
9:00am - 5:00pm

267794



**For free translation phone**

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