

# Executive summary

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## 5 Year Strategic Plan

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## Executive summary

There is recognition both nationally and locally that the NHS needs to change if we are to continue to provide high quality services to our local populations. The service must adapt to meet the demands of a growing population with higher expectations and more complex needs. Existing services, which have evolved over many decades, are often fragmented and inconsistent, unable to meet the challenges of caring for a population that has changed fundamentally since the system was designed. At the same time, we are faced with a significant financial challenge across the local NHS; whilst our budgets have not been reduced in real terms, rising demand from an ageing population and the costs of new technologies and drugs mean we have to address a gap of around £210m a year by the end of 2018/19. Our providers, meanwhile, have indicated that they need to make cost improvements of approximately £360m, savings considered to be far in excess of what is considered achievable.

This presents us with a dilemma; either we can oversee a continuous decline in our local health system followed by organisational failure and a need for external intervention, *or* we work with clinical colleagues and local people to agree a planned set of changes that deliver the care that our residents deserve within the funding available to us in south west London. As the custodians of the health system, and as local GPs, we believe the latter is the only acceptable way forward.

The following plan sets out our ambitions for transforming health services across the entire SWL health system, incorporating mental health, primary care, community services and local hospitals. Drawing on previous work over the last two years and on more recent discussions with clinical colleagues across the health system, the initiatives are outlined across seven areas of work:

- **Children's care.** We want to focus in the first two years on growing capacity in community services to care for more children closer to home and reduce unnecessary pressures on A&Es. Once there is sufficient capacity in place, there should be a consolidation of acute services to ensure we meet minimum quality standards. The development of a South West London Children's Network made up of experts across the area will oversee the transformation of services and provide leadership and assurance of developments.
- **Integrated care.** We will focus initially on the implementation of the Better Care Fund (BCF) plans alongside local authorities, with work in parallel to consider contracting, workforce and IT enablers for improving integration across south west London. Implementation of seven-day working in the community is targeted from 2016/17.
- **Maternity care.** We will focus on increasing use of midwifery-led services for low risk pregnancies and birth. Also included are initiatives to improve continuity of carer and focus on women's experiences of care, plus additional investment in midwifery and medical workforce. For women with more complex needs, and for those who develop complications in labour, all labour wards must have a consultant obstetrician present 14 hours per day by the end of 2014/15, with 24 hours per day achieved by 2018/19.

- **Mental health.** We will commission a series of initiatives to develop capacity in community services, including developing a single point of access, increased access to psychological therapies and greater provision of home treatment, to be implemented between 2014/15 and 2016/17, with a view to providing better care and reducing acute in-patient admissions from 2017/18.
- **Planned care.** We will co-create an implementation plan for a multi-speciality elective centre (MSEC), with urology services potentially deployed in a MSEC from 2016/17, one further specialty from 2017/18 and three more from 2018/19. Planning to include consideration of appropriate quality measures and approaches to contracting.
- **Primary care.** We will work with NHS England to have a fully networked model of primary care by 2016/17, with implementation plans for estates improvements and workforce transformation to commence in the same year. There will be a greater emphasis placed on multi-disciplinary team working, prevention and supporting self-management, with GP surgeries working in networks.
- **Urgent & emergency care.** We will implement seven-day working across urgent and emergency care services in south west London by 2015/16, supported by an ambulatory (same day) emergency care model. We will commission to London Quality Standards across all emergency departments by 2016/17. Further improvements in efficiency and effectiveness, including greater connectivity with other settings, to be pursued through implementation of new IT systems.

Delivery of these ambitions will require a collective approach, working with local providers, with local authorities and with NHS England as co-commissioners, to ensure the transition happens in a way which is meticulously planned, sufficiently resourced and overseen by senior clinicians and health system leaders. Over the coming months, we will continue to work together to develop these initiatives into an overarching plan. This will require further work to cost and prioritise initiatives, and decisions regarding our approach to their implementation will be considered later in the year by CCG Governing Bodies.