

Improving community health and care services for people in Somerset

Our early thinking about future community health and care services for people in Somerset

1. What this document is about

We have a real opportunity to improve our community health and care services for you and your loved ones. We invite you to join us in thinking about and shaping a new way of providing services which is, where practical, closer to where you live, supports independence and helps you maintain your own health. Your input, ideas and suggestions are vital to help us get the right services in the right place so that they are available when you need them.

We also want to share with you the reasons why our current services need to change and the challenges that we face in continuing to run them in the way they currently are.

Using your feedback and evidence from Somerset and elsewhere we will develop a number of options for the ways we could deliver health and care services differently. We will consult with you about these potential options as part of a public consultation next year.

2. Who we are

Fit for my Future is Somerset's health and care strategy that aims to support the health and wellbeing of the people of Somerset by changing the way we plan, buy and provide services. It is a joint strategy led by Somerset County Council and Somerset Clinical Commissioning Group, who are responsible for planning and buying health services to meet the needs of people in Somerset, now and in the future.

We work closely with the people who provide our health and care services. This includes doctors, nurses, allied health professionals (therapists) and other people working within public health, adult and children's services and health services across a variety of organisations including Somerset County Council, Somerset Partnership NHS Foundation Trust, Yeovil District Hospital NHS Foundation Trust, Taunton and Somerset NHS Foundation Trust and our GP practices.

Together we have been sharing our expertise, experience and understanding – and looking at what happens elsewhere in this country and internationally - to think about how health and care services in Somerset can work better together and better meet your needs. Now we want to hear what you think about our early thinking.

3. Our vision for our services

The shared vision for Somerset is that people can live healthy and independent lives, within thriving communities.

The health and care services in Somerset aim to support people to live independent, healthier lives by having the right services in the right place for their needs, available at the right time and delivered by the right people.

This means

- Where we can we will provide community health and care services as close to home as practical, providing support based on individual needs to enable people to live well, recover well and stay as well as they can
- When people do need care, this will be provided in the most appropriate place to meet an individual's needs to help them regain independence or provide additional support. This may be support in their own home, a short term stay in a residential or nursing home or in a community hospital bed
- When people need urgent 'same day' care for something that is not a medical emergency but for which you need rapid support, we will provide access to advice and guidance that will enable you to "talk before you walk" so you can get to the most appropriate service as close to home as practical . This may be at a local pharmacy, an appointment at a GP surgery or an appointment at an Urgent Treatment Centre which provide a range of diagnostic services, such as x-ray and some blood tests, 7 days a week.
- The changes to our services will help us support our dedicated and hardworking staff by providing more opportunities to work flexibly, offering more career opportunities with a greater range of potential roles, and the support and training to thrive in those roles.

4. Why we need to change

Our health and care services in Somerset are not currently organised in the best way to support people to live independent, healthier lives.

Our population is changing and the support they need from our services is changing - which means that our services must change too. The good news is that people are living longer but that means our health and care services need to care for more elderly people. In addition, more people are living with long-term conditions which affect their physical and mental wellbeing.

When the NHS was launched in 1948 the needs of our population and what we knew about healthcare was very different from today. 23,000 people were in hospital with tuberculosis and very few people had long-term conditions such as heart disease, diabetes or dementia. Today there are hardly any people in hospital with tuberculosis but 1 in 4 adults in hospital has dementia.

Our health and social care services must adapt and we have an exciting opportunity to reshape and improve them for you and your family. We need to make sure the services we provide meet your needs today and the needs of your children and grandchildren in the future.

Considering how people's care needs have changed, we know that we have not got the balance right between services that support people to stay well and live well in

their communities, live well with long term conditions, services that provide care in people's own homes or a residential or nursing home, and care provided in a hospital bed. Compared with other parts of the country we have limited ways of supporting people to remain independent within their own homes and local communities and limited services to support people with illnesses and long term conditions. At the same time we have a comparatively large number of community hospital beds compared to other similar counties, many of whom have already developed services to support people within their own homes or local communities.

In 2018 we reviewed how we had used the beds in our hospitals across our county. This showed that two thirds of the people who were cared for in those hospital beds could have been cared for elsewhere if alternative services had been in place - and last winter we did not use all our community hospital beds.

If you do not need to be cared for in a hospital bed then the evidence shows that it is not the best place for you. Over a third of people aged 70 and over experience a loss of independence and functioning during a stay in hospital, leaving them less able to take care of themselves.

We have begun to successfully develop alternative services. Our Rapid Response Service, which started in November 2018 and provides care in the community for frail elderly people, has supported more than 1,000 people to stay in their own homes in its first year. Home First which supports patients to leave hospital either by providing care at home, in a residential or nursing home or in a community hospital bed, has helped 5,000 people to get home from hospital faster.

We have an opportunity to invest in more of these community services that promote independence, support you or your family members in your communities - at home or in a residential or nursing home - and to do this we will need to spend less money on community hospital bed-based care.

We also know from patient and carer feedback that people do not always know where best to go when they need "same day" help for something that is not a medical emergency - that requires you to go to A&E - but for which you need rapid support. We would like to provide "talk before you walk" guidance to help you access the most appropriate service for your needs as close to home as practical.

There are a number of other challenges that we also need to address.

- We are affected by the national shortages of health and care staff which means that we continually have a high number of staff vacancies and rely on expensive agency staff when we can get them. Sometimes we have to shut or limit services because of staff shortages. We would like to organise our services differently, running services from larger community hubs which are less fragile and better able to withstand fluctuations in staff and develop innovative services and new roles that will attract staff.
- We are spending more money than we currently get from Government to run our services. We need to spend within our means and make sure that we get value for money for the people of Somerset and run the most appropriate services to meet your needs in the most efficient way possible. Some of our

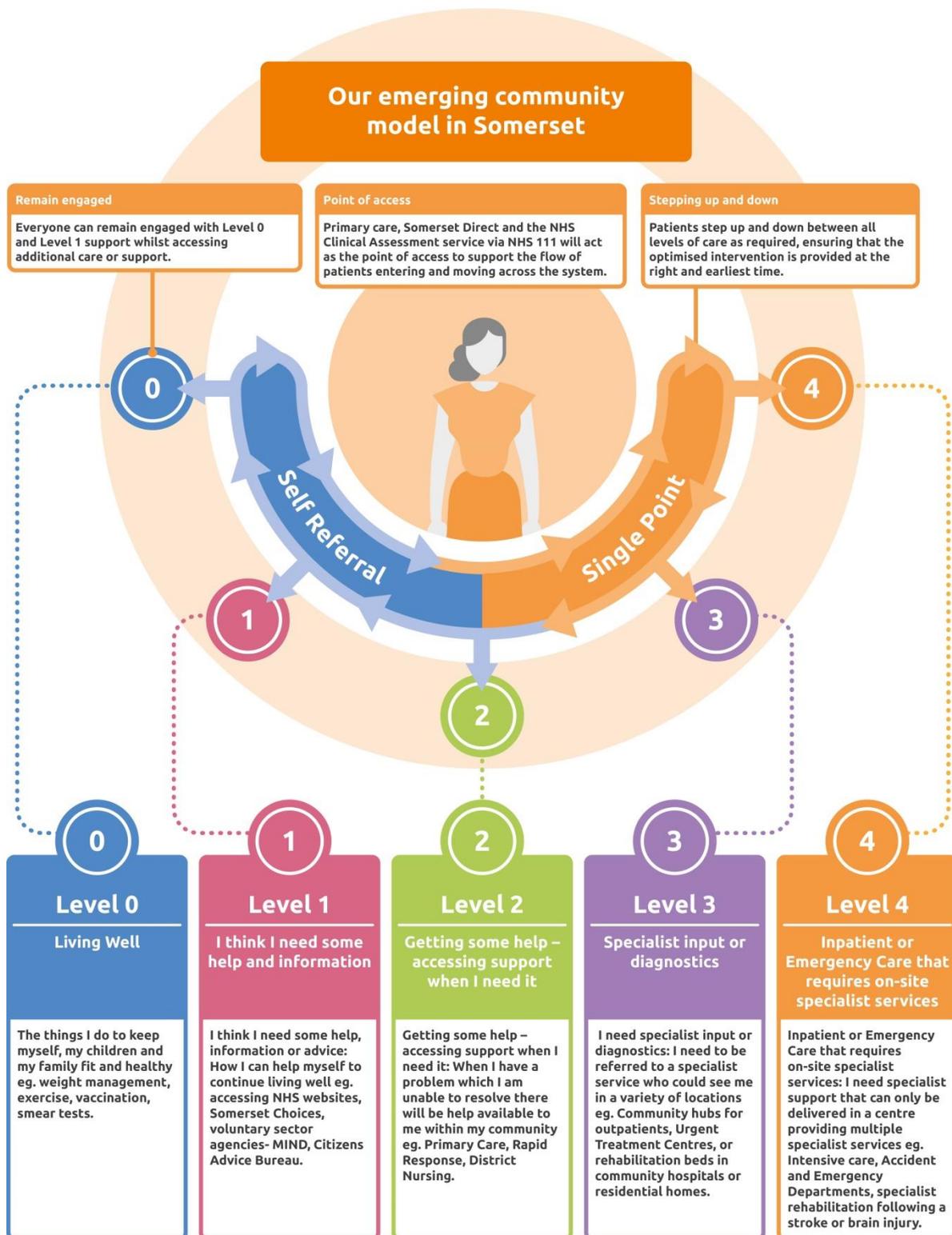
community hospital buildings are not suitable environments in which to provide 21st century care and would need significant investment to make them fit for our future.

5. Our early thinking explained

Community health and care services will be provided as close to home as practical, providing support based on individual needs to enable people to live their best life – supporting them to live well, recover well and stay well.

You and your family members will be able to access the right level of care for your needs within your local community, as close to home as practical. This will range from support to stay well, support to recover well or manage a long term condition, through to care and support at the end of life.

Integrated health and care teams will work together in local areas to achieve this. Teams will include GPs, nurses, pharmacists, physiotherapists, paramedics and social workers as well as partners from the voluntary and community sector such as Somerset Community Connect, Village Agents or Health Connectors, home support from the Red Cross.



Where people need help to regain independence or additional support, care will be provided in the most appropriate place for their needs which may be support in their own home, a short stay in a residential or nursing home or a community hospital bed.

If you or a family member need help to remain or regain independence, or need a bit of extra help, a range of services will be in place to support you in the most appropriate setting as close to home as appropriate for your needs and practical for the service.

We will develop community hubs that bring together in one place a range of services including mental health, district nursing, on the day treatment for some conditions, hospital outpatient appointments, and diagnostics tests such as x-rays.

We will develop innovative services that support you either in your own home or close to where you live, depending on your care and support needs. By investing in and developing these services we will help people to remain independent with the necessary support in place for as long as possible.

We will continue to provide community hospital beds for those people for whom that is the best place to receive care. We have proportionately more community hospital beds and fewer services that deliver care in people's own homes or in a residential or nursing home than other parts of the country. When we reviewed how we used our community hospital beds it showed that two thirds of the people who were cared for in those hospital beds could have been cared for differently, and last winter we did not use all our community hospital beds.

In the future we would like to provide fewer hospital beds, invest money to develop services that support people in their own homes or in a residential or nursing home bed, and ensure that our community bed units are optimally configured so that they are not as susceptible to staffing shortages.

Case study

In November 2018 we piloted a new Rapid Response Service (RRS). RRS supports frail older people who have had a fall, a loss of mobility, or who are unwell, to remain at home and avoid a stay in hospital. In its first year RRS supported 1,000 people to remain at home.

Frank's story

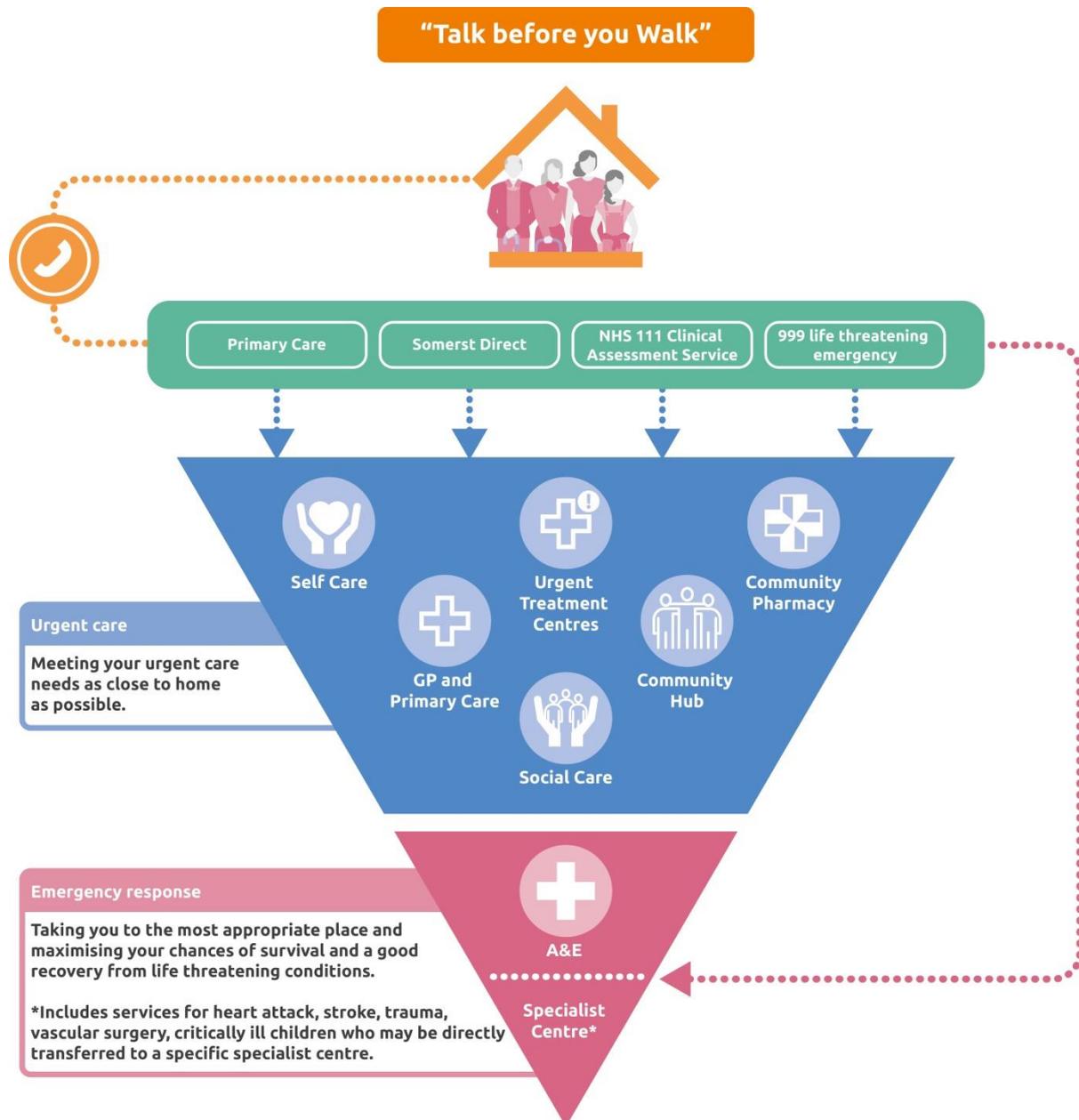
Frank is 86 years old with a long term condition of Chronic Obstructive Pulmonary Disease (COPD). Last winter Frank had a chest infection, was experiencing reduced mobility and did not want to go into hospital.

Frank was referred to RRS by his GP and started on antibiotics and steroids. RRS staff visited regularly to monitor Frank's observations, help with activities of daily living, and they liaised with his GP. After a few days Frank started feeling better and made good progress.

RRS staff made a referral to the Red Cross for further social support for Frank to help him continue to live well at home. He was discharged from the RRS team after 8 days care and support.

When you need "same day" help for something that is not a medical

emergency but for which you need rapid support, we will make sure you have access to “Talk before you walk” guidance to help you access the most appropriate service as close to home as practical. This may be at a local pharmacy, an appointment at a GP surgery or an appointment at an Urgent Treatment Centre.



By ringing NHS111, your GP surgery or Somerset Direct (Somerset County Council’s central contact centre) you will speak to a trained professional who will assess your needs and direct you to the most appropriate care option as close to home as practical - and support you wherever possible to access the service.

Options would include:

- advice on how to care for yourself effectively

- support from a range of local agencies, for example the Alzheimer's Society or MIND
- access to support from social care
- visit to a local pharmacy or other community resource (such as a dentist or optician)
- an appointment at a GP surgery with a GP, nurse or other health professional
- visit to the local Urgent Treatment Centre with an appointment booked for you
- emergency care via A&E or 999.

This approach will save time and unnecessary travel. It will also direct you to the most appropriate service for you, first time, and direct you to support as close to home or work as practical and help us to make sure that services are used appropriately and most effectively.

The NHS has recommended that Urgent Treatment Centres, which provide a greater range of services and a higher level of care than current Minor Injury Units, are opened across the country. They will be open for a minimum of 12 hours a day, provide a greater range of diagnostic services (for example, x-ray and some blood tests) 7 days a week, be supported by GPs and have the facility to book appointments in advance through NHS111 or your local GP surgery.

In Somerset it will not be practical or affordable to replace every Minor Injury Unit with an Urgent Treatment Centre so we will have to consider how many we need for the county. This means that some Minor Injury Units would close while others would be replaced by Urgent Treatment Centres.

We will support our dedicated and hardworking staff by providing more opportunities to work flexibly, offering more career opportunities with a greater range of potential roles, and the support and training to thrive in those roles.

We believe that, by working differently and providing a greater range of services, we will remove some of the barriers that frustrate staff, and improve their satisfaction within their roles. This approach will help us to attract staff to Somerset and retain staff within our services against a backdrop of national staff shortages.

6. How you can help

We want your help to shape and improve our future services. Our thinking is in the early stages and we want to hear what you think.

We have a real opportunity to design a new way of providing care that supports people to live independent, healthier lives.

By having the right services in the right place for people's needs, which are available at the right time and delivered by the right people, we can support people to live well, remain independent for as long as possible, receive the support they need as close to home as practical, and at the same time attract, retain and improve the experience of the dedicated staff who deliver health and care services in Somerset.

No decisions have been made and we do not have any preferred options in terms of how services will be provided in the future.

Please give us your views and ideas and let's work together to shape a health and care system fit for now and the future.

Where can I find out more or give my views?

If you would like to know more, you can read the full engagement document on our website (details are below).

To give us your views you can:

- Fill out our questionnaire which you can find at your doctor's surgery or on our website
- Write to us for free, you don't need a stamp – write on your envelope
FREEPOST SOMERSET COMMUNITY ENGAGEMENT
- Email us – somccg.fitformyfuture@nhs.net
- Call us – 01935 384119
Or you can come to one of our drop-ins, all the dates and places are on our website
www.fitformyfuture.org.uk

If you would like to see the full engagement document visit our website or contact us by email or phone