



The better care together strategy

the future for health
and care services in
Morecambe Bay

February 2015

Our Vision for Health and Care Services across Morecambe Bay



By 2025 Morecambe Bay will have a well-deserved reputation as one of the best health and care systems in the world. Promoting wellbeing and preventing ill health will be our prime purpose with mental health, children's, and older people's services receiving equal priority with all other areas of care.

Working here will be an experience that attracts high performing, compassionate staff who are as drawn to our culture of achieving excellence as they are to the beauty and variety of our landscape.

Specialist teams, including hospital consultants will increasingly work in the community, sharing their expertise with GPs and community teams. These health and care professionals will work in a partnership of trust with patients as equal partners to keep people fit and well. When people are ill they will receive high quality care and support to help them to manage their own condition - mainly within their own homes or local community.

If people do need to go into hospital to receive care they will have confidence that they will be treated with dignity and respect. They will expect to recuperate at or near home, freeing up beds for those who really need them. A&E departments will be seen as the last rather than the first port of call.

The funding we receive will fairly reflect the needs of our local populations enabling us to make the best use of every NHS and Social Care pound, meaning that as well as maintaining existing services we can take advantage of new technology and advances in medicine at an early stage to provide even better outcomes for our patients.

People will live longer and in terms of their health and well-being will have a better quality of life wherever they live, whatever their income. When people reach the end of their lives, wherever possible this will be at home in the comfort of familiar surroundings or in a specialist place of care such as a nursing home or hospice.



The Better Care Together programme is the review of health and care services across Morecambe Bay which will turn this vision into a reality.

Our Strategy outlines a new and ambitious way of delivering better care for the people across the Bay, based upon detailed work carried out in the period October 2012 – June 2014.

At the end of June 2014 we submitted a Strategy to NHS England and Monitor, the regulator of Foundation Trusts. Both of these organisations have a statutory role in providing advice and scrutiny to ensure that any proposals for change put forward by local NHS organisations meet appropriate quality and financial standards. As we are asking them for financial and developmental support to underpin our proposals, their agreement is essential for us to deliver our Strategy.

In July and August last year NHS England and Monitor provided us with feedback about our proposals and identified a number of areas where additional work was required. This document responds to the points raised.

This is not a consultation document. This Strategy has been produced to provide our staff, local communities and regulators with an overview of the work of the programme, to share our recommendations based on the work done to date, and to provide a focus for further discussion about the future of local health and care services. This will shape the direction for the development of detailed business cases and action plans. No decisions have been made at this stage, and the Strategy is likely to continue to evolve following feedback from our stakeholders including NHS England, Monitor and the Clinical Senate. The proposals for maternity may need to be reviewed depending upon the findings of the Morecambe Bay Investigation, being led by Dr. Kirkup and the Cumbria and Lancashire North Maternity review by the Royal College of Obstetricians and Gynaecologists.

If you have any further questions about this document or would like a printed version please feel free to contact us via our website: www.bettercaretogether.co.uk or call the better care together team on **01524 518 638**.



1. Our Executive Summary

When things go wrong in our local hospitals it hits the headlines, and the quality, safety and financial issues experienced by our hospital Trust have been well publicised in recent years. But the less well known story in Morecambe Bay is not about what happens inside hospitals – it's about what isn't happening in the primary, community and social care services that most of us rely on for most of our healthcare needs.

Precious lives are being lost because we aren't doing enough to support people to prevent them from becoming ill in the first place. Then, when people are ill, we don't always give them the advice or tools to manage their own condition and prevent crises from occurring – so all too often they end up in a hospital bed with all the upheaval and distress that this can involve.

Our local communities deserve much more. We owe it to them to be clear about what has gone wrong and why and our proposals for fixing this for the future, so that we can restore public confidence in local health and care services. This is why all the health and social care organisations that deliver services across the Bay have united under the banner of the "Better Care Together" programme to co-design high quality adult, children's and mental health services that will be safe, affordable and fit for the future.

The result is a range of proposals shaped around our unique geography and demographics, and is based on sound clinical evidence, national and international best practice and detailed analysis by independent third parties. This work has been led by hospital doctors, GPs, nurses and social care colleagues who have been passionate about finding out what local people and our

partners think of their health and care services and their aspirations for the future. The findings of this extensive engagement have influenced the solutions that we are proposing.

At the heart of our Strategy is a "population" based approach to promoting wellbeing and providing care in which people and their needs are the focus rather than processes and buildings. Responsibility for health and care will become a true partnership between the people needing to access services and those who provide them. People will be enabled to make lifestyle choices that will keep them healthy for longer and to take control and manage their long term conditions with local clinical teams integrating the support and technology they need around them. This will include more effective use of video links, texting and other telehealth facilities which will reduce the need for patients to travel whether from their own or their nursing care home.

Our local GP practices will become the way for people to gain access to all care including hospital services. GPs will work closely with a wide range of other health and social care colleagues to ensure people's needs are met, and to cut through the red tape that causes unnecessary barriers, delays and expense in the existing system. Hospital consultants will work alongside these new teams in the community to share their expertise, so that more staff are able to help patients cope with the long term conditions that so many of us will encounter in our later years.

Over the next two years our focus will be on making these changes happen which will require radical changes in both community and hospital based services. We have a detailed plan which outlines exactly how we will deliver this through a range of projects aimed at ensuring that we have consistent standards of care without reducing the ability to tailor this to the specific needs of local people. Therefore some projects are Bay wide whereas others focus solely on South Cumbria or North Lancashire.

By ensuring that community based services become the first port of call for most people, our local hospitals will be able to focus on providing excellent care to fewer patients who really need it. The reduced pressure on hospital services will drive up service standards, costs will fall, lengths of unnecessary hospital stays will reduce and waiting times will improve.

Many out-patient clinics will take place in the community with hospital consultants travelling to patients rather than the other way around. People will only attend these clinics when they really need to, rather than getting caught up in a cycle of unnecessary appointments caused by an outdated system.

Subject to the outcome of the Kirkup investigation it is our intention that modernised emergency care and consultant led maternity units will remain as core essential hospital services in Barrow and Lancaster even though we know that these services cost us far more to deliver than the funding we receive to provide them. However the distances between our hospital sites, and the consequent travelling times for patients and their families, coupled with the fact that Barrow has a number of industries of strategic national importance including nuclear and defence facilities, mean that it would be unsafe to attempt to reduce or remove these services.

Our research has shown that in addition to the pressures caused by inadequacies in primary, community and social care, the other major contributing factor to the failings in our hospitals is the challenge of providing acute services to a relatively small population spread across three geographically diverse sites.

This is why our medium term proposal (2-3 years) is that the majority of inpatient elective surgery is moved onto two sites. The work we have undertaken to date suggests that this should be on at Royal Lancaster Infirmary and Furness General Hospital. This would help to solve historic problems with staffing, drive up surgical standards and improve outcomes and patient experience for people across the Bay.

A key question for many is the future of Westmorland General Hospital. We see this continuing as a local hospital, but also becoming a vibrant hub for a range of community and specialist services to meet the needs of the South Lakeland population. An element of this could be creating a centre of excellence for eye care and surgery building on the macular degeneration service and extensive eye surgery that already takes place. Alternatively the site may become a centre of excellence for day case surgery. Whatever happens most existing services will remain as surgery only accounts for a modest percentage of activity on this site. We will work with local people and our partners over the next 12 months to develop these ideas further. We remain open minded about what the final options could look like as long as they meet the overall objective of providing high quality, safe and affordable services. The reason we are sharing our thinking at this stage is to allow us the opportunity to have the honest conversations needed to achieve this. In the meantime we are fully supportive of the local campaign to bring radiotherapy to the site.

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Although 525 fewer in hospital jobs will be needed in the future, this will happen through natural wastage and a reduction in agency staff. However our culture will change, and everyone from consultants to health care assistants will need to work more flexibly to deliver care when and where our patients need it. We will provide the support and training needed to achieve this, and for many staff this will provide exciting new development opportunities.

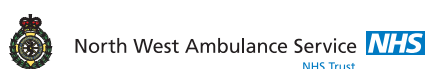
The approach we describe in this Strategy will require some radically different service models. The Five Year Forward View just published by NHS England echoes our proposals for integrated out of hospital care built upon GP practices, supported by specialist teams. It also recognises the challenges of viability faced by small District General Hospitals and suggests one option would be for them to become part of an integrated local care provider along with community and primary care services. We believe that the opportunities presented by the Forward View are crucial to creating the environment to enable us to succeed.

These proposals resolve most but not all of our financial deficit. Nevertheless our consideration of over 130 options and the work we have done so far indicates that our recommendations represent the most clinically safe and financially viable proposal for local people. Our plans do provide a solid platform for us to build upon and we need to act quickly to prevent further deterioration of our position. We will continue to challenge ourselves with ambitious targets for closing the gap further. We will also be working with NHS England to seek support to review the way that funding is allocated to reflect our unique local challenges.

We have been mindful that the NHS and Local Authority partners in North Cumbria and the rest of Lancashire are also undergoing changes and will continue to work with colleagues as our proposals develop to ensure that they complement rather than compete with plans within those localities.

We live and work here. Our families are reliant on the same services as the people we serve. We want to provide the best possible care within the realities of the budgets available to us and recommend the Better Care Together Strategy as a credible and exciting way forward for our local health economy.

Signed: Better Care Together partners





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