Connecting care in Nottingham and Nottinghamshire

2017-2018 Summary Report
The Sustainability and Transformation Partnership (STP) brings together local health and care organisations across Nottinghamshire, supported by patient/carer representatives and voluntary and community groups.

“"If someone needs help, advice or support, they should easily be able to find out how and where to get it.""
Keeping you healthy and well

We want to prevent ill health and promote good health, as well as supporting people with existing conditions to live as independently as possible.

We want to empower local people to make healthier choices that support their own health and wellbeing.

We want to ensure that people in our communities live long, healthy and independent lives.

That’s why we’re reshaping our approach to prevention to create an environment where people stay healthy for longer, where self-care is the norm and staff include prevention in all that they do.

What matters to you?

CASE STUDY:

‘Social prescribing’ schemes have been advanced in Rushcliffe and Nottingham, referring people to activities like walking groups or friendship groups rather than traditional clinical services.

Enhancing care in the community

We’re focusing on enhancing primary care with physical and mental health teams.

Opening times have been extended at all of our GP practices since 2016 with more evening and weekend appointments available. Rushcliffe is one of only two areas in England where all patients have full extended hours access to a GP.

Clinical pharmacists have been introduced into GP practices, helping people receive expert advice on their medication.

CASE STUDY:

An enhanced support package has been provided to care home residents in Rushcliffe. This included having a named GP for each care home, enhanced support from community nurses and advocacy support for residents from Age UK. The initiative saw a 23% reduction in emergency admissions to hospital for care home residents.

In GP practices across Nottingham and Nottinghamshire, teams of district nurses, physiotherapists, occupational health therapists and social care workers are coming together with GPs and other colleagues to discuss the needs of individual patients. This means their whole needs are considered rather than specific conditions or problems. These multi-disciplinary team meetings are a vital way of joining up health and care services for patients who may suffer from one or more complex conditions.

“We want people to lead healthy lives and to be independent and well.”
Cancer

1 in 3 of us will have cancer during our lives. But 2 in 5 cancers are preventable.

We’re ensuring faster tests, results and treatment for people with worrying symptoms.

CASE STUDY:
FASTER DIAGNOSIS, SAVING LIVES

Lung health checks are being piloted in Nottingham to improve early diagnosis rates of respiratory diseases. Mobile scanners were located in the heart of the community. This meant people didn’t have to go to hospital. The programme detected 5 people with cancer and over 20 people with undiagnosed respiratory illnesses. There are plans to expand this further across Nottinghamshire.

“Hospitals, GPs, councils and other health and care teams are now working more closely together to deliver more joined-up care for local people.”

Urgent and Emergency Care

If you are seriously ill with a heart attack or stroke then it is right that you are taken to hospital.

Your home is where you thrive, where your life is and it makes sense to help you get back there as soon as you are able to.

The best case is if we can help you in your home so you don’t have to come into hospital at all.

CASE STUDY:

We all know that not everyone who attends an emergency department needs emergency care. King’s Mill Hospital in Sutton-in-Ashfield operates a ‘single front door policy’. When patients visit the emergency department, they are triaged by a qualified specialist who decides whether they need acute care (given to patients who are seriously ill) or primary care (treatment for less serious conditions). Based on this assessment, patients are directed to an appropriate medical professional within the hospital.

A Call for Care service, based at Ashfield Health and Wellbeing Centre, is helping health and social care professionals make best use of the various local services available to patients. By calling a single telephone number, professionals are able to access urgent and crisis support for those at risk of admission to hospital for physical healthcare needs. This means that more people can be supported in their own homes, often within two hours, where a full assessment of their ongoing needs can be established and a comprehensive care plan put in place. The Call for Care service is also available to health professionals in hospital to get the right support for people to help them return home.

“Hospitals, GPs, councils and other health and care teams are now working more closely together to deliver more joined-up care for local people.”
**Mental Health**

25% of us will experience a diagnosable mental health problem during our lives.

More people across Nottinghamshire are now able to access psychological therapies.

NHS mental health nurses are working in police stations in Nottingham; not all police forces operate this way yet but they all will eventually.

**CASE STUDY:**
**TALKING THERAPIES, IMPROVING LIVES**

A talking therapies service to help people deal with the psychological effects of long-term physical health conditions is now being provided by Nottinghamshire Healthcare. The Let’s Talk Wellbeing service sees trained therapists use a range of talking therapies that aim to reduce the impact of the emotional distress caused by the patient’s physical ill health, while helping them to better cope with their condition and manage symptoms.

“Local people will get better care, often closer to home in their communities.”

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**Planned Care**

We want to develop consistent ways of delivering care across the area so that services are effective and people do not receive different types of care depending on where they live.

By re-designing non-urgent care services, we can ensure that patients receive the right care in the right place for their level of need.

This may include delivering more outpatient care in the community and increasing the use of technology, for example, for the self-monitoring of long-term conditions.

This will free up space within hospitals to meet the increasing demand for specialist and emergency care.

**CASE STUDY:**

A new way of caring in Mid-Nottinghamshire for patients having problems with muscles, bones and joints was set up in 2017. The ‘MSK (musculoskeletal) Together’ service has seen various health and care organisations team up to oversee GP referrals for services including orthopaedics, pain management and physiotherapy. The referrals are triaged by specialist physiotherapists, with support from other specialists. This new way of working ensures patients are seen more quickly than a traditional referral into hospital care, with their care often taking place in the community or primary care. This has helped free up the time of secondary care experts to deal with patients who really need that specialist input. The new service has reduced the number of people needing referrals to orthopaedics and has helped save vital funds for reinvestment elsewhere.
What could the change to health and care in Nottinghamshire mean for staff?

Each person will need support from health and care professionals that act as one team.

Many staff and teams are already working differently together to provide better care.

Working together across Nottinghamshire will give doctors, nurses and care staff the best chance of success.

CASE STUDY:

Mansfield District Council’s ASSIST team works in partnership with Nottinghamshire County Council social care workers and clinical staff on the wards of King’s Mill Hospital in Sutton-in-Ashfield. Together as one team, they help to identify patients that are remaining in hospital care as they do not have suitable accommodation to go to.

Assessments are carried out quickly and recommendations are made directly to ASSIST officers regarding adaptations; additional care needs are managed by the County Council. Along with co-coordinating adaptations, the ASSIST team can provide temporary accommodation in specialist respite units in the district.

Locally, the ASSIST medical discharge scheme has saved 4.5 hospital bed days per patient. A recent report by Nottingham Trent University identifies that this project saves the NHS around £1.4m annually and has a direct impact on the quality of healthcare provision and patient wellbeing.

“We are also working in partnership with other services such as housing and the voluntary and community sector.”
It’s ‘Our’ Health and Care

Are we making a difference? Yes, I am sure we are. We have had very positive feedback from patients on their experiences after being seen and supported by many of the new services that have been introduced across Nottinghamshire.

However, we have much more to do. We’re working hard together to reshape care for local people.

Local people and staff can help us too. Together, by sharing good ideas, the NHS, local councils, community and voluntary organisations and local people will be better able to continue to improve care and the wellbeing of people across Nottinghamshire.

LOOKING AHEAD – OUR PRIORITIES

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- Ensure timely access to cancer diagnosis and treatment (meeting national target times)
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- Develop mental health and primary care services to reduce reliance on hospital and social care services

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FURTHER INFORMATION

If you have any queries about the information in this Annual Report or would like more details on any aspects of our plans, please visit the STP website at www.stpnotts.org.uk or contact us at:

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