



Somerset's Sustainability and Transformation Plan: an overview for people in our local area

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What is the Somerset Sustainability and Transformation Plan (STP)?

The demands on the NHS and social care are increasing, partly because there are more people who are living longer with more complex health problems such as dementia, diabetes and high blood pressure, but also because of the increasing cost of new medicines and treatments.

Public demand for health and social care services is constantly growing and the only way to manage this is by thinking as one single health and social care system – rather than as individual organisations – working with patients, carers and communities.

The Somerset Sustainability and Transformation Plan (STP) describes a vision for the future of healthcare in the county which has been developed by the leaders of Somerset’s hospital, community and mental health NHS organisations, Somerset County Council and Somerset Clinical Commissioning Group (which is made up of the county’s GPs). This is our joint plan.

Our key priorities outlined in the plan are:

- To encourage and support everyone in Somerset to lead healthier lives and avoid getting preventable illnesses
- To move care out of hospital beds in Yeovil, Taunton and our 13 community hospitals into people’s homes wherever possible, providing care designed specifically for each patient’s needs, supporting faster recovery and, in many instances, avoiding the need to go into hospital in the first place
- To invest in GP teams to develop a mixture of skills and time to support the increasingly complex care that needs to be given
- To respond to the way we live now – making it easier for people to get services closer to home, when they need them, using modern technology that is already transforming other parts of our lives
- To invest more money in frontline care by being more efficient with how we use our buildings, our equipment and our management and administration

We have recently published a detailed document which sets out some of the plans we have. You can read a full copy of Somerset’s STP proposals on the Somerset Clinical Commissioning Group’s website at: www.somersetccg.nhs.uk.

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The STP offers ideas on how we can make sure that we encourage and support people to take responsibility for their own health and wellbeing, as well as focusing on how we can best treat those people who are ill to get better as quickly as possible.

Too many of us eat, drink and smoke too much and don't exercise enough. Unhealthy lifestyles can adversely affect our quality of life. In Somerset, we have higher than average numbers of overweight people and levels of obesity, and higher levels of smoking. We also have lower than average levels of physical activity.

The health implications of this are all too clear. We have higher rates of high blood pressure across Somerset. We have more falls than the national average and higher rates of hip fractures and diabetes-related problems, too.

In the past, we have not invested enough in services that support people – of all ages – to stay healthy in the first place. Money has been spent mainly on treating people after they have become ill.

Care and quality – services that meet patients' needs

The population of Somerset is growing. According to the Office for National Statistics, our population is set to increase by at least 3,000 people every year over the next 20 years.

Life expectancy is also increasing and we have a higher than average older population. In the next two decades the number of people aged 65 and over in Somerset is expected to increase by more than 30%.

As people get older they are coping with more long-term health problems which need greater support from the NHS and social care.

More people than ever are going to hospital Accident and Emergency departments, even though some may have minor illnesses and could seek advice from a pharmacist or NHS 111.

We depend too much on hospital beds and this limits the amount we can spend on providing support closer to home. As good as our local hospitals are, none of us wants to spend time in one as a patient unless absolutely necessary. However, many people, particularly the elderly, end up staying in hospital longer than is necessary. This often leads to loss of mobility and independence – whereas being

at home, with your own family, pets, friends and familiar surroundings, can speed recovery.

We need to invest in mental health services in Somerset and make sure that the same importance is placed on mental health needs as physical health needs. We also need to provide more support for people living with dementia and their families and carers as well.

Local people are waiting too long to get some treatments, including orthopaedic and cancer services. People need to receive high-quality services as quickly as possible to enable them to have the best possible chance of a good recovery.

Health and social care staffing

At the same time as demand for healthcare services is increasing, Somerset, like everywhere else in the country, is facing a shortage of trained doctors, nurses, midwives, social workers and physiotherapists. Many staff are due to retire in the next 10 years and there are already high levels of vacancies in many services. It takes a long time to train doctors, nurses, therapists and social care staff and no amount of extra money can make this happen quickly.

Demand for services has grown and people's needs have changed dramatically, but the way in which the NHS and social care services operate has not really changed. Now is the time to look at how we could do things

differently. We need to move away from the traditional way of doing things and instead ensure that people are able to look after themselves better and then see the best person to meet their needs at the right time.

Balancing the budget – the financial challenge

Doing nothing is not an option. Like most places across England, health and social care funding in Somerset is limited, which means services are under severe financial pressure. Unless we manage the demand being made upon our health and social care services, our budget will be overspent by £33 million in 2016/17.

Every year, the gap between our budget and what we will spend will get bigger. If we do nothing to change the way we manage and provide care, in the five years to 2021 we will spend around £600 million more than the funding available for the population.

However, it is not just about how much it costs. It's also about making sure the services that we provide meet the needs of patients, carers and communities; even if money were not a problem, we would still want to change the way in which services are delivered, in order to improve the experience and outcomes of people in Somerset.

How the health system in Somerset works now

Patients and carers say their current experience of health and social care services is varied. While there is often praise for staff and services, people also tell us that services are not very joined up. This can make it very complicated to find out where to go for advice or support. For people like Jack and Eileen, from Burnham on Sea, it can look like this.

As things are now, services are not as joined up as they should be.

- Eileen has diabetes, memory problems and she is at risk of falling
- She struggles to control her diabetes and her memory is getting worse
- As she gets unwell, she is in and out of hospital
- Health and social care services don't always coordinate their support for Eileen



- Eileen's carer, Jack, has high blood pressure, heart problems and is at risk of a stroke
- He puts his own health second and doesn't feel he has time to go to see his GP
- If he has a stroke, he will be unable to care for his wife and they will both need care from others
- He finds it hard to cope with Eileen's memory problems

We need to challenge ourselves to think differently about the way services are organised, staffed and paid for. Too much money and too many resources are put into hospital-based care instead of providing services closer to patients' homes. People in Somerset are often in hospital for a long time even when they are fit enough to go home.

We know that the longer people stay in hospital, the more likely they are to experience complications. Also, it is expensive to keep someone in hospital when they don't need to be there. If the main reason for delay in getting people home is the shortage of appropriate community-based health and social care services, we need to look at doing things differently.

We want care to be better coordinated, with teams of physical and mental health professionals working closely with voluntary-sector organisations and local communities to work flexibly around the patient, meeting their individual needs.

Key to this improvement is making sure that information about people's health is available to all those people who look after them. This is a critical part of our plan.



The way we think it should work

We asked people in Somerset what they most wanted from their health and care. This gave us the following 'I' statements to guide our planning and service design:

- I want to feel part of my community
- I want it to be easier to get support, close to my home
- I want to be able to find information, help and advice when I need it
- I am a person, not a client or a patient
- I want my family to be supported as carers
- I want the best-trained care staff helping me
- I want to have good experiences when using services
- I want to plan my support
- I want to tell my story once

We have used these wishes to help our future plans for delivering more joined-up health and care services. Jack and Eileen could be enjoying a better quality of life if the support they receive looked like this.

Eileen's diabetic nurse links with dementia services.

The pharmacist delivers their medication.

Jack gets support and advice to manage his high blood pressure and take better care of his health.

The early dementia team diagnoses Eileen and puts care and support in place.



Jack is more confident about keeping himself healthy and has been put in touch with a men's carers group to go to while Eileen is being looked after. He enjoys the break.

Support is provided by Alzheimer's Society and Age UK.

Eileen attends a Dementia Café every week, mixing with other people facing the same challenges.

The Dementia Café gives Jack advice about looking after Eileen.

How does health and social care need to change?

What are we doing about it?

There are lots of great services in Somerset, but we know things can be done better. We can improve the way care is planned, provided, managed and paid for, simply by working together, involving staff, patients, carers and the people of Somerset in the development of how we should deliver our services.

By thinking as one single health and social care system, rather than as individual providers, we can focus on creating services that are joined up and responsive, truly meeting people's needs.

Preventing ill health

We want to support people to stay well, giving them the best chance to live the healthiest, most independent and active life they can.

We will concentrate on the commonest causes of ill health in Somerset: dementia, diabetes, heart disease, cancer, lung disease and joint and back problems. We will target these areas by encouraging physical activity, healthy eating and weight management, and tackling dependence on smoking and alcohol as well as providing specialist help when needed.

We will talk to people and communities to understand what matters to them and design approaches to services

where patients and carers are at the centre of what we provide, helping people to live as healthy a life as possible.

Redesigning GP (family doctor) services

We are short of GPs in Somerset and want to free their time so they can better support their most vulnerable patients. We want to bring more services and clinics into GP surgeries so that patients can see other health professionals, like the practice nurse, health coaches, pharmacists, physiotherapists and mental health workers without having to go to hospital.

We will start by bringing a better range of services into GP practices and local communities. This will increase the time they have available for same-day appointments. It will also help provide seven-day-a-week services for patients who need them the most.

Patients living with long-term health problems are already benefiting from 'telehealth' care, having their blood pressure, heart rate and breathing monitored through a smart phone. This technology helps prevent admissions to hospital by spotting when a person's health is starting to worsen and getting them help from their GP or a community nurse.

Redesigning Community Health and Care Services

Wherever possible we want to shift healthcare into the community and people's homes.

We are developing a 'hospital at home' service that aims to provide patients with the care they need in their own homes rather than having to come into hospital, and we are changing our systems to support people being able to get home from hospital more quickly when they are ready to leave.

Redesigning district general hospital services

We want to be clear on the type of care that should be provided from Yeovil and Taunton's district hospitals in the future. We want to develop new ways of delivering care, to make sure that some more specialist services are sustainable for the longer term. In the first instance we will look at oral maxillofacial surgery (diseases affecting the mouth, jaws, face and neck) and urology (diseases of the urinary tract system). We are also looking at new ways of delivering musculoskeletal services (problems relating to the skeleton, joints and muscles) which will provide easier access direct via local GPs.

We are planning to redesign the way people access emergency hospital services and also make sure that people with mental health issues who attend hospitals are better supported to get the right care.

Next steps

You can find the detailed plans in our STP document which can be found online at www.somersetccg.nhs.uk or by contacting 01935 385240.

Publication of this draft plan marks the start of a big programme of discussions over the coming months, so that local people, patients, carers, partners and our staff can help shape the ideas we have into more formal proposals. Where appropriate, these will be put to the whole population of Somerset for consultation in the summer of 2017.

Look out for more information on how to get involved in these plans and discussions online at: www.somersetccg.nhs.uk.

This guide can also be provided in Braille, audio cassette disk, large print or other languages on request by phoning 01935 385240.

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