

Our Healthier South East London: workstream briefing for JOSC

Our Healthier South East London has six clinical workstreams: community-based care, planned care, urgent and emergency care, maternity, children and young people and cancer. Mental health is a cross-cutting issue which is being considered as part of each of the six workstreams.

Each workstream has developed a proposed model of care and these are set out in our publication [Help us improve your local NHS: Emerging models and further thinking](#) (attached).

This briefing sets out our current view on what areas of the programme may or may not amount to significant service change. In summary, while we believe that the overall impact of the proposed interventions are likely to be transformative, there is little need for significant change to individual services; the most significant changes are to orthopaedic services.

Community-based care

Better care outside hospital is central to our strategy and our proposed 'whole system model'. We are developing 'local care networks' made up of primary, community and social care colleagues working together and drawing on others from across health, wider community services like housing and schools, and the voluntary sector. Local care networks will be delivered at borough level, but with an overarching set of principles.

These developments are already underway and we believe they will deliver major improvements both clinically and financially. We believe they are non-contentious and do not require public consultation.

Planned care

The proposed model of care suggests the development of one or more elective care centres for planned orthopaedic surgery. As this would involve centralising some elective care in one or two locations, we believe this may lead to significant service change. This centralisation is unlikely to cover day case work or outpatients. Our current timescale is for public consultation in summer 2016.

Urgent and emergency care

Our work to date suggests that investment in community and primary care services will help us avoid a further increase in A&E activity and hospital admissions, but will not significantly reduce it. We therefore expect that we will need to retain all of our

existing A&Es. It follows that we do not expect to consult on a proposed A&E reconfiguration.

Our strategy is for all standalone urgent care centres (those not on the same site as emergency departments) to have the same standards and provide consistent services. We are awaiting guidance on the application of national standards on urgent care which will support this. It is possible that local CCGs may want to make changes to local urgent care centres. This may require consultation, but at local borough level rather than across south east London. Any proposals to change local facilities will be brought forward at local level by CCGs.

Maternity

As with A&Es, our work to date suggests that we will continue to need all of our existing maternity units and that public consultation will not therefore be required. We are awaiting the outcome of the Cumberlege Review of maternity services before confirming this.

The focus of the model is on ensuring women have access to safe, personalised and positive experience if pregnancy, including better pre-pregnancy, antenatal and post-natal support (including mental health support where needed).

Children and young people

The model of care requires each hospital to have in place a short-stay paediatric assessment unit. As our hospitals all have these already, albeit to varying models, there will be a focus on ensuring that they meet the required outcomes. As we are not proposing closing any units, we do not believe there is a need for public consultation.

Our aim is to focus on prevention – keeping children and young people mentally and physically well – with more care taking place in community settings and high quality care in hospital for those who need it.

Cancer

We want to improve patient outcomes by putting measures in place to support earlier detection and diagnosis and increased screening. Two new cancer centres are being developed (at Guy's Hospital and Queen Mary's Hospital Sidcup).

Should any public consultation be required, we would set the proposed options in the context of the wider strategy, so that local people are aware of the whole strategy as well as the most significant changes being proposed.