

Health and Social Care Board



15 July 2010





Five Year Strategic Plan Summary

- The Strategic Plan outlines the PCT's vision for health and health services responding to local priorities (JSNA) and an economic case for change.
- Details nine initiatives for implementation redesign of local services in eight key pathways of care and an overarching commitment to commission to enhance residents' experience of local services
- Financial context reflects the expected national protection of NHS budgets but significantly lower levels of growth in funding than in recent years
- Financial projections indicate a local funding gap of c. £90m over the next 5 years and a required savings target of £24m in 2010/11
- Outlines a programme of System Wide Sustainability the delivery of high quality and affordable services across all areas of spend





Achieving System Wide Sustainability

- Commissioning intentions outline actions to deliver services at reduced cost in Acute, Mental Health, Community and Primary Care
- Local application of nationally defined efficiency targets and local renegotiation of Primary Care (GP) contracts to enhance productivity
- Decommissioning of services where they are shown to be of limited clinical effectiveness, e.g. unnecessary follow up appointments
- Decommissioning of high cost Acute Hospital services as the result of enhanced care management and preventative action in community settings
- Redesign of services (e.g. Urgent Care and Outpatients) to enhance efficiency and reduce the costs of care. More services will delivered in, or closer to, patients' homes
- Consistent with 'Transforming Southwark's NHS' consultation on local services in early 2009





System Wide Sustainability in 2010/11

The Strategic Plan describes specific savings in the areas below (plus significant reductions in Management costs)

Acute Services (£7.5m)	Primary Care (£3.9m)
 National efficiency targets Decommissioning Shift in Planned care and Unplanned care to community settings 	•Renegotiation of GP contracts (Productivity) •Rationalisation and decommissioning of Enhanced Services
Community Services (£3.0m)	Mental Health (£3.9m)
 National efficiency targets Shared infrastructure / management Productive Community project 	•Agreed Provider efficiencies •Rationalising CMHT – Shift to community •Reduced out of area placements



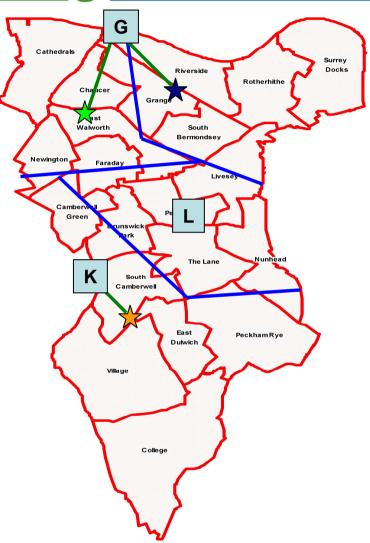


Service configuration

4 localities served by 3 Polysystems – Based upon:

- Localities that make sense to residents
- Integrated pathways before estate considerations
- Optimum use of existing asset base
- Appropriate services closer to home (planned care) 4.
- 5. Avoid unnecessary duplication of services
- 6. Viability of services – critical mass of activity
- Enhanced quality of primary, community & OoH care
- Demographic changes population growth and regeneration

	Locality & Population
1	Borough & Walworth (96k reg. population) served by Hub (Guy's Hospital site) and one community centre for health
1	Bermondsey & Rotherhithe (68k reg. population) served by Hub (Guy's Hospital site) and two community centres for health
2	Peckham (78k reg. population) served by a community Hub (Lister Health centre)
3	Dulwich (74k reg. population) served by Hub (King's College Hospital site) and one community centre for health







SOUTHWARK HEALTH X SOCIAL CARE



Polysystem Delivery - 2010/11

Hub (King's)

K Q2 2010/11

CfH (Aylesbury)

★ Q3 2010/11

Hub (Guy's)

G Q4 2010/11

CfH (Bermondsey Spa) ★ Q4 2010/11

Hubs – Delivery of redesigned and integrated Unplanned Care (A&E, GP Services and OoHs delivery)

Centres for Health – Delivery of planned care (Outpatients / Diagnostics) closer to home and co-located with community based services

