
NCHA Conference

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Forward thinking Clinical Homecare Services

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A landscape photograph featuring a vibrant green field in the foreground, dotted with small yellow wildflowers. In the distance, a line of trees and a few buildings are visible under a clear blue sky. The word "change" is written across the sky in a large, white, bubbly font, where each letter is composed of numerous small, white, fluffy cloud-like shapes. The overall scene is bright and optimistic.

change

If you always do
what you always did,
you will always get
what you always got

UK Health Aims

- **more joined-up and coordinated care**

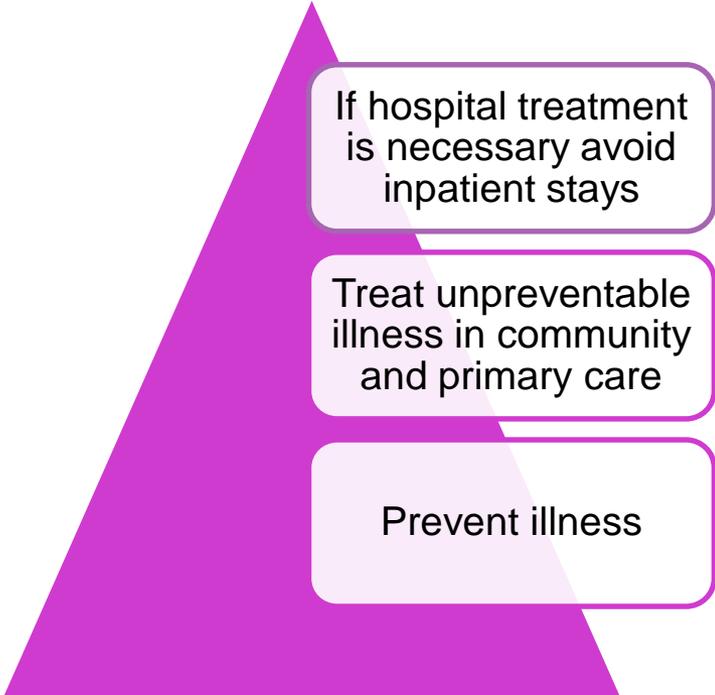
Supporting people with long-term health conditions, rather than individual ‘episodes’ of care

- **more differentiated in its support offer to individual**

Improving choice, access, inequality. With the right support, people of all ages can and want to take more control of how they manage their physical and mental wellbeing.

- **more proactive**

Recognising previously unidentified or unmet need and doing something about it will be normal



If hospital treatment is necessary avoid inpatient stays

Treat unpreventable illness in community and primary care

Prevent illness

Hospital to Home (H2H) programme

A new NHS offer of urgent community response and recovery support: rapid community response teams, to prevent unnecessary emergency hospital admissions and speed up discharges within two hours in a crisis and a two-day referral for reablement care,

Guaranteed NHS support for people living in care homes

Supporting people to age well:

Identifying people with moderate frailty, offering them proactive personalised care and support.

Primary Care Networks deliver a core model for the future care of people with complex needs..



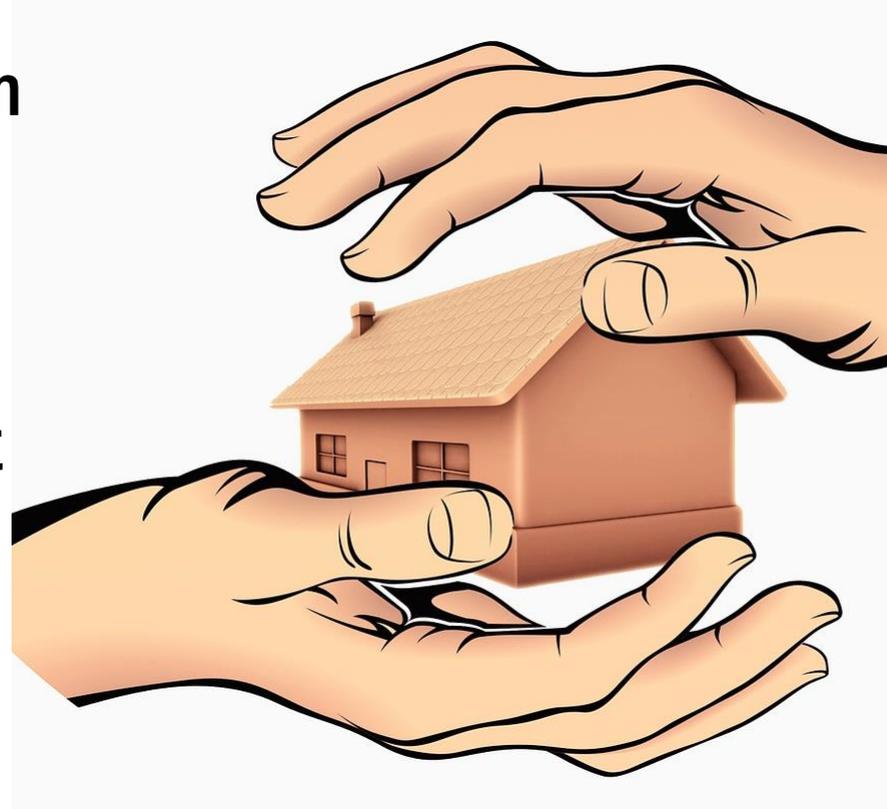
<https://www.longtermplan.nhs.uk/blog/the-long-term-plan-for-out-of-hospital-care/>

Kathryn Evans,
Head of Planning Delivery
and programme lead for the
Hospital to Home (H2H)
programme



Homecare already.....

- Avoids inpatient episodes
- Reduces waiting times
- Supports people with long term physical and mental health conditions to stay in jobs
- Help people manage their own health through patient support programmes
- Is a model for integrated care with good governance and communication structures and cross organisational processes



New World Challenges

- **‘triple integration’ of primary and specialist care, physical and mental health services**
- **Providing national services at ‘place’ level through Integrated Care Systems**
- **The NHS Assembly being established in early 2019**
- **Commissioners (CCG) will continue to make independently decisions for procurement and contract award**
- **More NHS community and intermediate health care packages delivered by primary care networks of GPs, community geriatricians, allied health professionals (AHPs), district nurses, mental health nurses, therapists and re-ablement teams**

NHS Long Term Plan

CHAPTER 1: A NEW SERVICE MODEL FOR THE 21ST CENTURY

1.1 We will boost 'out-of-hospital' care, and finally dissolve the historic divide **between primary and community health services**

1.2 The NHS will reduce pressure on emergency hospital services

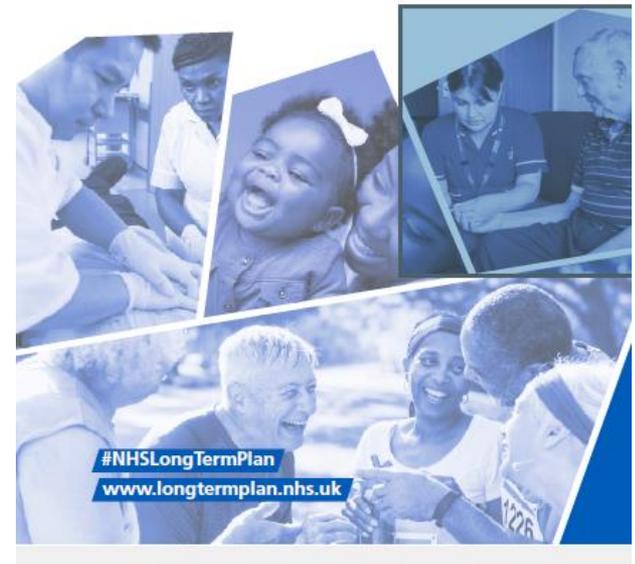
1.3 People will get more control over their own health and more personalised **care when they need it**

1.4 Digitally-enabled primary and outpatient care will go mainstream across the NHS

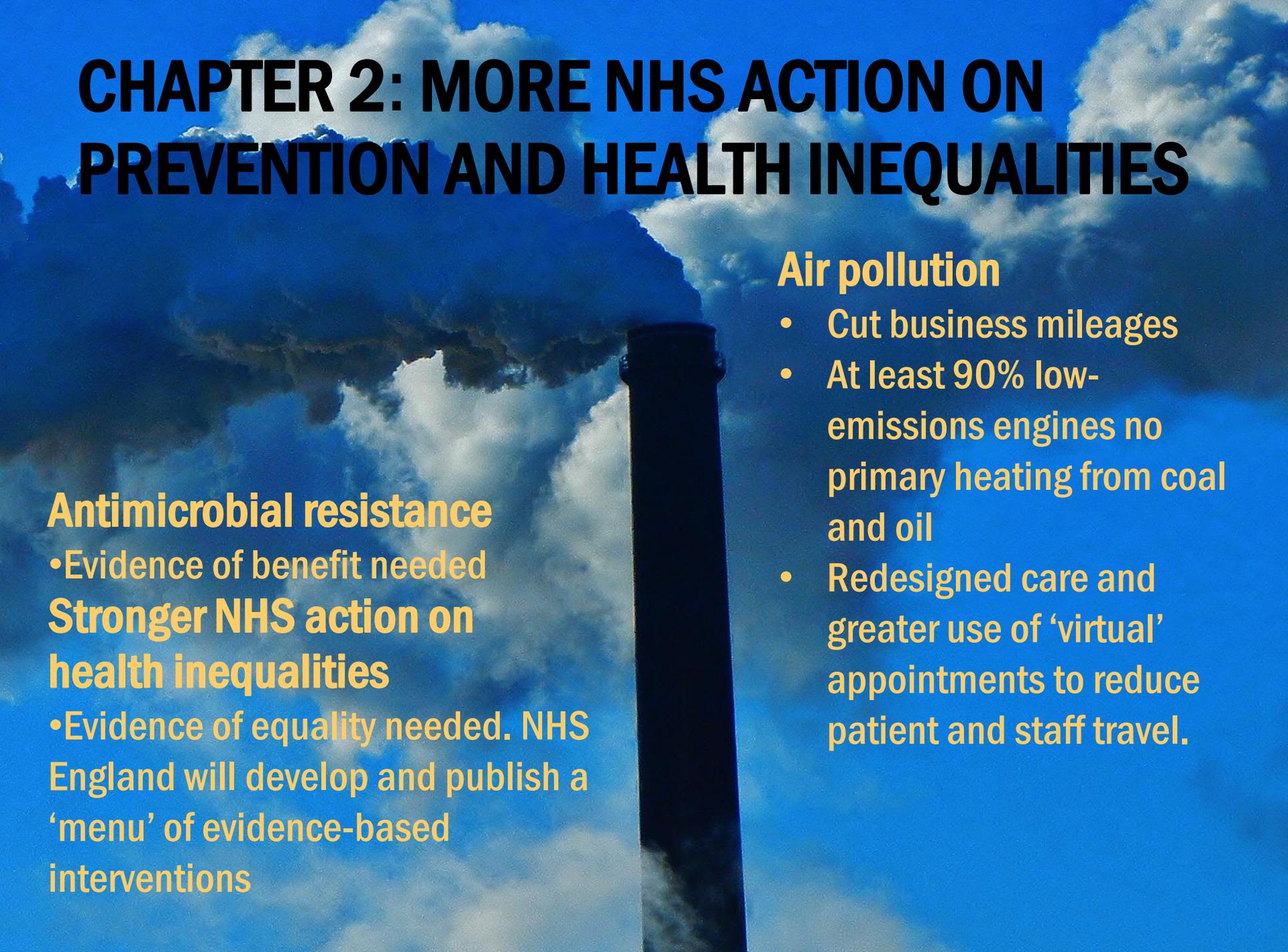
1.5 Local NHS organisations will increasingly focus on population health – moving to **Integrated Care Systems everywhere**



The NHS Long Term Plan



CHAPTER 2: MORE NHS ACTION ON PREVENTION AND HEALTH INEQUALITIES



Antimicrobial resistance

- Evidence of benefit needed

Stronger NHS action on health inequalities

- Evidence of equality needed. NHS England will develop and publish a 'menu' of evidence-based interventions

Air pollution

- Cut business mileages
- At least 90% low-emissions engines no primary heating from coal and oil
- Redesigned care and greater use of 'virtual' appointments to reduce patient and staff travel.

CHAPTER 3: FURTHER PROGRESS ON CARE QUALITY AND OUTCOMES

- Short waits for planned care
- Research and innovation to drive future outcomes improvement



Redesigning
health services
for children and
young people

Challenges & infrastructure

CHAPTER 4: NHS STAFF WILL GET THE BACKING THEY NEED

New roles and inter-disciplinary credentialing programmes will enable more workforce flexibility. Doubling the number of volunteers also helping across the NHS.

CHAPTER 5: DIGITALLY-ENABLED CARE WILL GO MAINSTREAM ACROSS THE NHS

Systems, communications, NHS App online consultations and wearables. Data interoperability. Using technology to redesign clinical pathways

CHAPTER 6: TAXPAYERS' INVESTMENT WILL BE USED TO MAXIMUM EFFECT

Procurement savings by aggregation of volumes and standardising specifications. NHS statutory procurement guidance to reduce wasted procurement costs



Clinical Homecare Opportunities

- Out of hospital rehabilitation for people recovering from stroke
- Structured education and digital self-management support tools for diabetics (and other long term conditions)
- New models of pulmonary rehabilitation services including digital tools, rehabilitation and self-management support
- A new community-based offer for common long-term mental health conditions including psychological therapies
- More physiotherapists working in primary care networks, without needing a GP referral
- Health research and clinical trials
- Faster introduction of proven and affordable innovations
- A new online nursing degree, linked to guaranteed placements

CHAPTER 7: NEXT STEPS

five major, practical, changes to the NHS service model to bring this about over the next five years:

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- 2. The NHS will redesign and reduce pressure on emergency hospital services.**
- 3. People will get more control over their own health, and more personalised care** when they need it.
- 4. Digitally-enabled primary and outpatient care** will go mainstream across the NHS.

With a focus on mental health, children and young adults



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“That is always the process of legislation in this country.

It starts off by voluntary effort, it starts off by empirical experiment, it starts by improvisation. It then establishes itself by merit, and ultimately at some stage or other the State steps in and makes what was started by voluntary action and experiment a universal service.”

Aneurin Bevan, April 1946



Thank You

Any questions?



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