

# Reconfiguration of hospital services

## A programme to sustain services and improve care

Appendix 3 – Joint Strategic Needs Assessment  
Supplementary Materials  
As referred to in Chapter 7



## Joint Strategic Needs Assessment

The proposed local health and social care model and future model of care for the hospitals has been developed in partnership with and is closely aligned to the strategic plans and goals of the three Health & Wellbeing Boards and the published JSNAs for Mid & South Essex.

The plan will create a health and care system which has the potential to sustainably address the challenges to improve the health outcomes for the population by utilising new ways of working and greater use of improved technologies.

The new proposed models of care will enable the following:

- Manage health demand by empowering people to manage their own health by supporting them with the right tools and information;
- Build capacity in the community so more care closer to home can be delivered (or even within the home) using technology and community-based care approaches
- Delivers personalised care that reflects the specific needs of its users.
- Routine healthcare will take place out of hospital which will enable the role of hospitals to shift from being general centres to more specialist hospitals focussing on higher acuity services
- The community will be better able to manage demand and some specialist acute services will consolidate to be clinically viable offering the best quality of care.

Demand across all of our health services has grown rapidly and continuously over recent years. Our population is aging, with a rising proportion of the population suffering from multiple and complex health and care challenges. These models enable us to focus resources in the right way so that people get the support and care they need. Partly, this is about delivering more supportive, integrated care for those who need it. This is also about helping those who are healthy stay healthy, and more effectively manage their own health.

**JSNA supplementary information for PCBC**

LOCAL AUTHORITY	IDENTIFIED PRIORITIES - JSNA	H&WB Strategy	ALIGNMENT WITH PCBC
<b>ESSEX COUNTY COUNCIL</b>	<b>AGING WELL:</b> Hip fractures Dementia Diagnosis	<b>AGING WELL:</b> Hip fractures Mental health in Older people Dementia Diagnosis	The biggest and most important challenge facing Mid and South Essex is looking after the needs of an ageing population. The Future Model of Care proposed for the hospitals in Mid and South Essex will provide reliable, consistent high quality of care. Each hospital will have a Frailty Assessment Unit which will be supported by acute medics and geriatricians for 12 hours per day, 7 days a week.
<b>ESSEX COUNTY COUNCIL</b>	<b>STARTING AND DEVELOPING WELL:</b> Safeguarding Children Childhood obesity Childhood smoking First time entrants to youth justice system	<b>STARTING AND DEVELOPING WELL:</b> Safeguarding Children Parenting School readiness Educational attainment Childhood obesity Childhood smoking First time entrants to youth justice system	Implementation of the future model for local health and care services with co-located teams will support implementation of the children’s strategy. A key aspect of the model will involve integrating acute and community services, with most children supported in the community reducing the need for A&E attendance.
<b>ESSEX COUNTY COUNCIL</b>	<b>LIVING AND WORKING WELL:</b> Domestic abuse Violent Crime Overweight and Obesity Early cancer deaths Mental health support Suicide	<b>LIVING AND WORKING WELL:</b> Cardiovascular disease Alcohol Misuse Employment Domestic abuse Violent Crime Overweight and Obesity Smoking Physical activity Mental health support	Prevention, early intervention and self-care to help manage growing health needs are core to the future model for local health and care. As a system it is proposed that Mid & South Essex will adopt the principle of “Making Every Contact Count” whereby all professionals in the system who come into contact with individuals who might gain benefit from some form of advice or support, will be

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			<p>signposted or put in touch with relevant agencies.</p> <p>Communities and individuals will be encouraged to take responsibility for their own health wherever possible, supported by a genuine partnership of local stakeholders.</p>
<b>THURROCK COUNCIL</b>		<p><b>HEALTHIER FOR LONGER:</b>                      Reduce obesity                      Reduce the proportion of people who smoke                      Improve the identification and management of long term conditions                      Prevent and treat cancer better</p>	<p>An example of this is evidenced within the business case as follows:  <i>“By providing more care closer to home, one can improve patient outcomes and reduce costs, as supported by several studies. For instance, in a randomised trial for elderly patients who have had a medical event (such as stroke or COPD) but who are clinically stable and not in need of diagnostic or specialist input, it was found that those who received hospital-type care at home have a significantly lower mortality rate at six months after the medical event and report higher levels of satisfaction. Home care can also reduce the cost of care provision. That same study concluded that the cost of delivering hospital-type care at home was lower than the cost of admission to an acute care hospital ward.”</i></p>
<b>THURROCK COUNCIL</b>	<p>Overarching JSNA published 2012 highlights the following:</p> <ul style="list-style-type: none"> <li>• Death rates from respiratory diseases, COPD, Cancer</li> </ul>	<p><b>BETTER EMOTIONAL HEALTH AND WELLBEING:</b>                      Give parent the support they need                      Improve children’s emotional health and wellbeing</p>	<p>The three local authorities lead on prevention plans. Mental health, learning disabilities and other strategies are included within the local health and social</p>

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	<ul style="list-style-type: none"> <li>• Cancer screening services</li> <li>• Mental health issues</li> <li>• Sexual health issues</li> <li>• Physical activity and obesity</li> <li>• Diseases re-emerging such as tuberculosis</li> <li>• Population growth and increase in life expectancy</li> <li>• Smoking cessation</li> <li>• Substance misuse including drugs and alcohol</li> </ul>	<p>Reduce social isolation and loneliness</p> <p>Improve the identification and treatment of depression in high risk groups</p>	<p>care model and continue to be integrated with plans for service change across Mid &amp; South Essex.</p>
<b>THURROCK COUNCIL</b>		<p><b>QUALITY CARE CENTRED AROUND THE PERSON:</b></p> <p>Create four integrated healthy living centres</p> <p>When services are required, they are organised around the individual</p> <p>Put people in control of their own care</p> <p>Provide high quality GP and hospital care to Thurrock</p>	<p>Joint care planning with patients will become central to care across the system. Patients will be supported to manage their own health and wellbeing – including education, peer support and the use of technology.</p> <p>There will be joined up services – with integrated delivery, single points of contact for patients, and the provision of care co-ordinators for those who need it.</p>
<b>THURROCK COUNCIL</b>	<p>Published documents include:</p> <p>2016 Purfleet Integrated Healthy Living Centre</p> <p>2016 Tilbury Integrated Healthy Living Centre</p>	<p><b>OPPORTUNITY FOR ALL:</b></p> <p>Children making good educational progress</p> <p>More residents in employment, education and training</p> <p>Fewer teenage pregnancies</p>	<p>Children from poorer backgrounds, the evidence shows, are more likely to suffer from accidental injury, infections, general ill health, anaemia, dental caries and teenage pregnancy. Moreover, families living in poverty are less likely to access</p>

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		Few children and adults in poverty	health services and to benefit from health-promotion services and advice. The integration of community and acute services will provide easier access to information and support.
<b>THURROCK COUNCIL</b>	2015 Children and Young People 2015 Demographics and population change 2015 Cancer Deep Dive	<b>HEALTHIER ENVIRONMENTS:</b> Create outdoor places for easy exercise Develop homes that keep people well and independent Build strong well-connected communities Improve air quality in Thurrock	
<b>SOUTHEND BOROUGH COUNCIL</b>	<b>Healthy Lifestyles</b> Stop Smoking Support Halting the increase in obesity Increasing physical activity Children have a healthy start in life and maintain healthy lifestyles Reduce rates of substance misuse	<b>Broad Impact Goals</b> <u>Promoting Healthy lifestyles;</u> reduce the use of tobacco promote healthy weight prevention and support for substance misuse	A range of social marketing tools, such as Mosaic, will be used to identify the best methods of communicating health promotion messages to different communities within our population to help promote healthy lifestyles.
	Improving emotional wellbeing services for children and young people Increase access for perinatal mental health Improve access to IAPT Increase access to crisis support care Reduce risk of suicide in high risk groups	<u>Improving mental wellbeing</u> Provide the right support and care at an early stage Work to prevent suicide and self-harm Support parents postnatal  <u>A positive start in life;</u> promote children's mental wellbeing	The provision of integrated and personalised services through locality teams will help to improve mental wellbeing providing the flexibility to co-create packages of care to meet the holistic needs of people. Improvements will also be made for access to and capacity in 24/7 mental health crisis services via urgent and emergency care initiatives.

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	<p>Increasing physical activity Improving long term condition management Reducing falls</p>	<p><u>Active and healthy ageing</u> Join up health &amp; social care services Support those with long term conditions Empower people to be more in control of their care</p>	<p>We will design new integrated pathways for conditions such as COPD and Coronary Heart Disease. The emphasis will be on providing support for patients in their communities, to help them manage their health and maintain independence and quality of life.</p>
	<p>Improve screening uptake Improving infection prevention and control</p>	<p><u>Protecting health</u> Increase access to health screening Increase offer of immunisations Infection control to remain a priority for all care providers</p> <p><u>Living independently</u> Enable supported community living People feel informed and empowered in their own care</p>	<p>We will use an approach called 'population segmented management' to make sure that people receive the most appropriate care for them. This means looking at our population and working out the care needs different groups have.</p>
<p><b>SOUTHEND BOROUGH COUNCIL</b></p>	<p>Children are safe and protected from harm</p> <p>Vulnerable children and families receive early help</p> <p>Carers receive support</p> <p>Improving housing tenure for vulnerable people</p> <p>Monitoring population change to</p>	<p><u>A safer population</u> Safeguard children and vulnerable adults against neglect and abuse Work to prevent unintended injuries among under 15s</p> <p><u>Housing</u> Tackle homelessness Deliver health, care and housing in a more joined up way</p>	<p>Joint care planning with patients will become central to care across the system. Patients will be supported to manage their own health and wellbeing – including education, peer support and the use of technology.</p> <p>There will be joined up services – with integrated delivery, single points of contact for patients, and the provision of care co-ordinators for those who need it.</p>

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	identify inequalities	<p><u>Maximising opportunities</u>                      Have a joined up view of Southend's health and care needs                      Tackle health inequality (including improved access to services)                      Work together to commission services more effectively</p>	