



The Norfolk and Waveney Health and Care Partnership

## Norfolk and Waveney STP Oversight Group

### December 2018 update

As a partnership of local health and care organisations, we are working to provide better and more coordinated care for patients and carers. We can only do this by really understanding what health and care services are like for the people that use them.

So in a change to how our meetings normally run, we started our December meeting with Jane Shuttler, who lives locally, telling us about the care her father received when he was diagnosed with a terminal illness and the support she was given as his carer.

Jane's talk was insightful, thoughtful and difficult to hear at points when she shared missed opportunities to make relatively small changes that would have improved the care her father received and the support she was given. She reminded us of the importance of good communication, both with patients and their carers, but also between health and care staff.

Jane praised individual members of staff for the excellent care they'd provided, but said she felt that the health and care system they were working in was too disjointed and lacking in compassion, both for patients and their carers.

It was encouraging to hear that improvements have been made over the past couple of years as a result of Jane sharing her story and campaigning for greater compassion in health and care services. Jane remains an actively involved patient advocate and has supported other families experiencing a terminal illness.

Jane's story and her experience stuck with us throughout our meeting as we discussed how we can create an integrated care system and how we can improve local mental health services.

I hope that you find the updates below useful – please let me know whether you'd like more detail on any of them.

Patricia

**Rt Hon Patricia Hewitt**

**Independent Chair of the Norfolk and Waveney STP**

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## **Mental health care in Norfolk and Waveney**

Mental health was the focus of a large section of our meeting. This was the first time we had met together since the CQC published its report about the Norfolk and Suffolk NHS Foundation Trust (NSFT), which is our largest provider of mental health services. Antek Lejk, Chief Executive of NSFT, updated us on some of the immediate actions they've taken as an organisation to address the issues highlighted by the CQC.

As a partnership we are committed to working together to make the improvements to mental health care that we need to. Over the past few months we've been reviewing both adult mental health services and child and adolescent mental health services. We have also been working closely with our Suffolk colleagues, who have been conducting their own review.

On Monday, 10 December we published the first draft of our ten-year mental health strategy for Norfolk and Waveney – [read it on the Healthwatch Norfolk website](#). This is just a first draft. There has already been extensive engagement with service users, carers, staff and other stakeholders to develop it, and more will follow in the new year.

Based on what we have heard, our vision is to develop and deliver 'place based' services wrapped around primary care through integrating mental and physical health services in each of our localities - Great Yarmouth and Waveney, North Norfolk, Norwich, South Norfolk and West Norfolk. It will be important to take a 'whole system' approach to improving mental health and wellbeing, working with schools, police, the voluntary sector and other partners.

At the moment we are working closely with our national NHS colleagues, our counterparts in Suffolk and NSFT itself to ensure that the necessary short-term changes take place quickly and effectively while we're developing a new model of care, based on prevention, primary care and community.

As part of this work, we are conducting another phase of public engagement, so that future mental health provision is genuinely co-designed with service users, carers and the public. Tell us what you think of our draft strategy by completing [our survey](#).



### **Get your flu jab #helpushelpyou**

People with serious health conditions, adults over 65, some carers, frontline health and care staff and healthy children between the age of 2 and 4 all qualify for a free NHS flu jab.

If you believe you are eligible, please ask your GP or pharmacist.



## What might an integrated care system for Norfolk and Waveney look like?

We hope to have an early opportunity to submit an expression of interest to become an Integrated Care System (ICS). So what is an ICS?

Integrated care systems are a partnership of NHS organisations, local councils, the voluntary sector, care organisations and others taking collective responsibility for managing resources, improving the health of their population and ensuring high quality services.

We held a workshop session as part of our meeting to discuss what our ICS might look like. Learning from other parts of the country, and from the excellent work already being done in many parts of Norfolk and Waveney, we are considering what we could do differently at these three levels to better integrate services and provide more joined-up care:

**At “neighbourhood” level:** We will create 20 “neighbourhoods” – four in each CCG area, serving a population of between 25,000 and 70,000 people. At this neighbourhood level we have some really exciting ideas about how we can transform care, based on what the most effective GP practices are already doing.

In each neighbourhood we want to create primary care networks – teams based around groups of GP practices and made up of professionals from a range of different backgrounds, for example there would be an adult social care lead and team, mental health workers and community healthcare colleagues.

These multi-disciplinary teams would work closely with local voluntary and community groups and other statutory services; social prescribing will be a key tool for helping tackle the underlying causes of ill-health. We’ve just been awarded £535,000 from NHS England to develop our primary care networks. [Watch this video](#) to find out more about primary care networks and the benefits they’ll bring to people living in Norfolk and Waveney.

**At place level:** We have five CCG areas which are very different from each other in many ways. For example Norwich is urban and has a much younger population than rural North Norfolk, and so there are some instances when we need to adapt services to meet the needs of each area. We are creating local delivery groups in each of the five places, involving the District Council(s) and other key partners including the voluntary and community sector.

**Across Norfolk and Waveney:** There are times when it makes sense for us to make decisions and provide services for the whole area or ‘system’, particularly to remove the unwarranted variations in quality and care that still exist. We need to be clear about when this is the case and equally to understand when we’d be better to make a decision at a more local level.

We’ve already started talking with voluntary sector colleagues and patients, service users and carers about what they think we need to do differently at neighbourhood, place and system levels. We’ll continue to do so in the coming months as we develop our expression of interest for becoming an ICS and our plans for integrating local health and care services.

