



# STP News

Issue 1  
2017

Several months into planning a whole system solution is an appropriate time to reflect on how far we have come, and how far we have to go, in our first BLMK newsletter.



How can it be acceptable in 2017 that in many parts of BLMK a few bus stops can mean the difference of up to a decade in life expectancy? How can so many of our patients receive their cancer diagnosis only after an emergency attendance at a hospital, thereby limiting the success of potential interventions as it is just too late? And how can we spend such different amounts of funding on providing services, some of which have equal income but excessive costs which are squandering much needed resources? Whether it is easy access to services, where and when required, or inequality in clinical outcomes, there is no doubt that we need to transform how we provide treatment to our population.

So how far have we come since we met as a group of 16 organisations for the very first time in March last year? Well, we started by looking at BLMK – something that had never been done before – and analysed our population data to model what could happen if we don't change the system over the next 10 years. We worked to produce a draft plan, reflecting our ideas as system leaders and clinicians, and have since been discussing our priorities with stakeholders, the public, our staff and our clinicians.

In the meantime we have been making real progress in a number of areas, as you will read later in the newsletter. Celebrating good models of care

from one area and encouraging their development elsewhere does not have to wait, nor do sensible pragmatic solutions such as making sure clinicians from across the three hospitals can all see Imaging on any patient wherever it was captured.

We have made a number of bids for funding to support our transformation and have already received £1.7m to resolve long standing frustrations to link and get access to existing IT systems. We will continue to bid for funding in other areas too with a view to improving the care our population receives. While we make incremental improvements, the system has an appetite for a new model of care, allowing our clinicians and carers to do the right thing for the population, and break through some of the frustrating 'silos' and unhelpful incentives currently in place.

We aspire to deliver real continuity of care for our population and see the STP as the opportunity for staff and public to embrace this. These newsletters will showcase progress, and highlight opportunities to keep involved.

## Pauline Philip

chief executive of Luton and Dunstable University Hospital NHS Foundation Trust, national lead for urgent and emergency care and lead for the Bedfordshire, Luton and Milton Keynes (BLMK) Sustainability and Transformation Plan.

# BLMK in a snapshot



## Our community

Almost one million people live in the BLMK area - 166,252 in Bedford Borough, 274,022 in Central Bedfordshire, 214,710 in Luton and 261,762 in Milton Keynes.



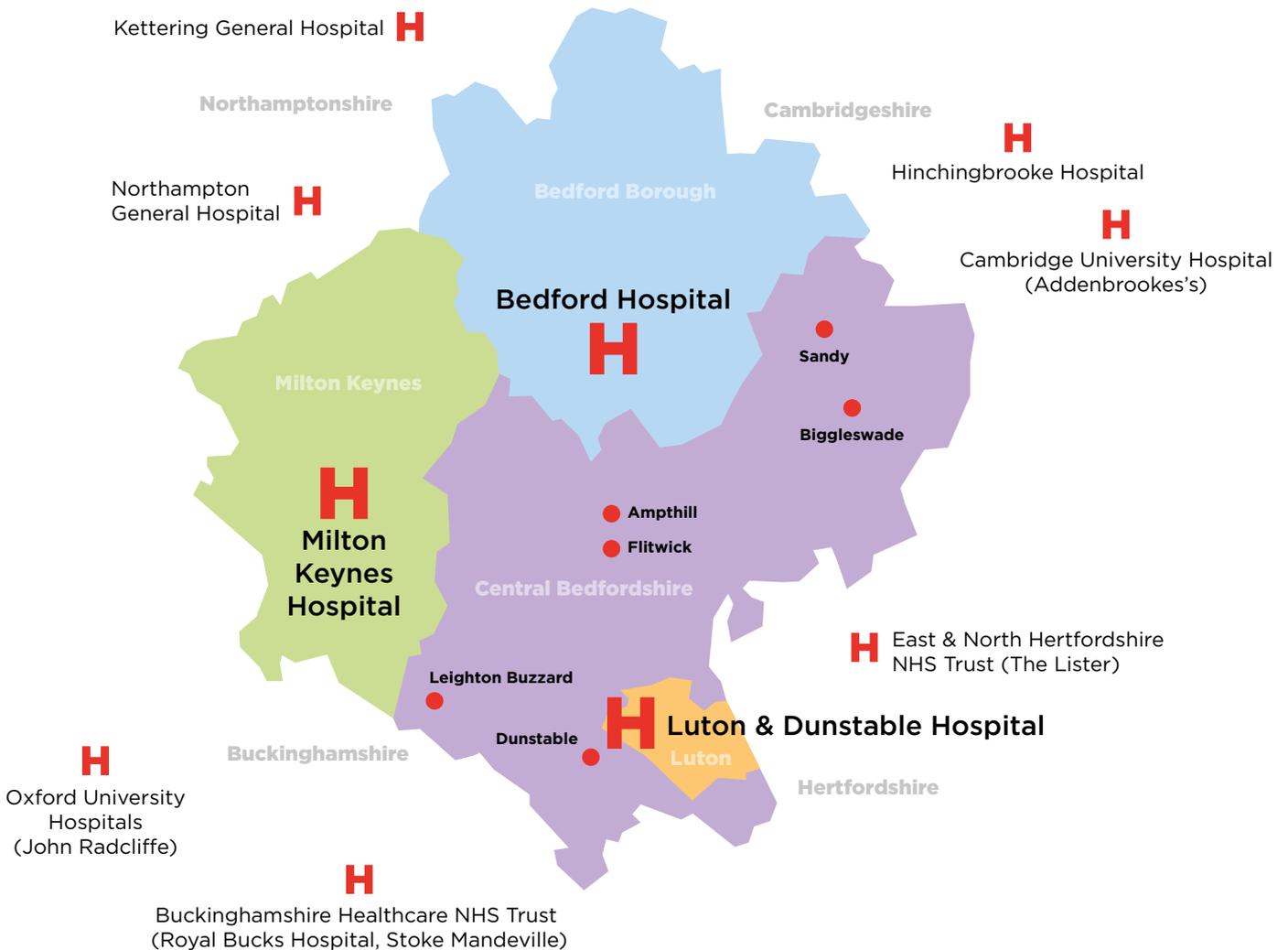
## Ageing population

The 85+ age group is expected to grow fastest in the next 20 years.



## Financial challenge

If we don't make changes, by 2020/21 our spending will exceed our income by £311m a year.





# So who is part of the BLMK STP?

## 3 Clinical Commissioning Groups (CCGs)

**Bedfordshire CCG**  
Matthew Tait  
Accountable Officer

**Luton CCG**  
Colin Thompson  
Interim Accountable Officer

**Milton Keynes CCG**  
Matthew Webb  
Chief Officer

## 4 local councils

**Bedford Borough Council**  
Philip Simpkins  
Chief Executive

**Central Bedfordshire Council**  
Richard Carr  
Chief Executive

**Luton Borough Council**  
Trevor Holden  
Chief Executive

**Milton Keynes Council**  
Carole Mills  
Chief Executive

## 3 local hospitals

**Bedford Hospital NHS Trust**  
Stephen Conroy  
Chief Executive

**Luton and Dunstable NHS Foundation Trust**  
Pauline Philip  
Chief Executive

**Milton Keynes University Hospital NHS Foundation Trust**  
Professor Joe Harrison  
Chief Executive

## 6 Community care, mental health and ambulance service providers

**Cambridgeshire Community Services NHS Trust**  
Matthew Winn  
Chief Executive

**Central and North West London NHS Foundation Trust**  
Claire Murdoch  
Chief Executive

**East of England Ambulance Service NHS Trust**  
Robert Morton  
Chief Executive

**South Central Ambulance Service NHS Foundation Trust**  
Will Hancock  
Chief Executive

**South Essex Partnership University NHS Foundation Trust**  
Sally Morris  
Chief Executive

**East London NHS Foundation Trust**  
Dr Navina Evans  
Chief Executive



Last year, the 16 BLMK partners worked together to identify five key priorities to focus on in order to achieve our vision of building a high quality health and social care system in the region that is financially sustainable, now and into the future.

They consist of three 'front line' priorities focused on health, wellbeing and patient care and two 'behind the scenes' priorities – technology and system change – which will help transform the way we provide health and social care in the region.



# Priority progress

## Priority 1 – Prevention

*Working together to close the health and wellbeing gap by improving healthy life expectancy and reducing health inequalities.*

Work is already in full swing to embed a culture of prevention across BLMK so we can keep people healthy, improve care and quality and reduce the burden of ill health.

### Falls & Fracture Prevention

A falls prevention service has been commissioned at Bedford Hospital from April to offer specialist support to people who have fallen, or are at risk of falling.

A multi-disciplinary team will help to improve the health and quality of life of the community by preventing further falls while helping people to improve strength, balance and mobility, and helping them to regain confidence and independence.

This and similar approaches are being discussed by a falls and fracture prevention group which has formed across BLMK.

Our Priority 1 team is also supporting a bid to introduce a Fracture Liaison Service at Milton Keynes University Hospital, which will aim to help fracture patients who are susceptible to further fractures avoid further injuries and stay healthy.

### Prevention Champions

A region-wide Prevention Steering Group, with nominated Prevention Champions from the STP partners, has been established to monitor, encourage and empower colleagues to work towards improved prevention in the region.

They will champion a renewed focus on prevention from each of the organisations and support the delivery of new prevention plans to be agreed in March this year.

### Social Prescribing

In Luton patients can be offered targeted support and navigation to non-clinical services to try and improve their health and well-being and this is being built on for wider roll-out across other areas.

A good example of this was a patient who was referred to their GP with recurring health problems and, as a result, suffered from low confidence and a feeling of isolation. Using social prescribing, the GP referred the patient to: a support group to give her housing advice to help her move closer to her family; a women's centre to receive counselling; a gym training project that aims to build confidence in participants.

The GP is now confident the patient will have "great outcomes" from these services, which would not have happened had she not had access to them.

## Priority 2 - Primary, community and social care

*We want to provide better care, closer to home and ensure organisations are working together to improve outcomes for the patients.*

### Primary Care Home

This is a well-proven model whereby when visiting your GP there are also a whole range of locally available services provided by the practice. This includes specialist nurses who can help with whatever physical or mental condition needs supporting. We have two of these practices already but are committed to rolling this out further. Building on work already happening across BLMK, we are developing a primary care home model in the region that will see teams of healthcare professionals from a range of different disciplines formed in communities to deliver primary care service based on the needs of the local population.

### New ways of working

Some primary care services across the patch have already adopted new ways of working to great effect.

Lea Vale Medical Group, a long established medical practice with three sites across Luton, have made a number of changes that have made a huge difference to both the access to and quality of care received by their patients.

### Since May 2016 they have:

- Increased their GPs capacity to see patients by 44%, with an additional eight appointment contacts per session – this equals a massive 3,240 extra patient contacts
- Reduced the rate of 'Did Not Attend' patients from 8% to 2%
- Improved the process to ensure patients see the most appropriate clinician – 16% of GP work has moved to nurses, emergency care practitioner and practice pharmacist
- Improved the wellbeing of the workforce by reducing stress on the team with the above improvements.

These outstanding results have been achieved with a number of innovations, all underpinned by the fact that the practice has built a team with a greater mix of skills so that care isn't just centred around patients seeing the GP.

Teams consist of a GP, nurse, health care assistant and administrator with a pharmacist and specially trained nurses, who take over the care of patients with long term condition, also based in the practice.



Not only are these changes delivering improved access to patients and improving the speed and quality of care, they are also helping to deliver more joined-up working with other services and make the practice run more efficiently.

Dr Nina Pearson, Luton CCG Chair, said: "Primary care has a central role to play in a sustainable system, and by adapting our working we are able to do today's work today. This is a model for general practice to follow across BLMK."

If you would like to hear more details about this work, please contact [communications@mkuh.nhs.uk](mailto:communications@mkuh.nhs.uk) to see a presentation Dr Pearson gave at one of our recent events.

### Priority 3 - Sustainable secondary care

*To make sure hospital services in BLMK are clinically and financially sustainable now and in the future, our hospitals are working together to plan, develop and provide a unified service across the region from the three existing sites in Bedford, Luton and Milton Keynes.*

The CEO, Medical Director and Director of Nursing of each hospital are all working closely together to create an integrated way of working together across the three hospitals, looking at clinical services, support services and workforce requirements.

Already by purchasing together we are saving money, and key support services such as Radiology, are bringing their systems together so a scan anywhere within the STP can be viewed and reported by a clinician on all sites within BLMK. This is just the start of the efficiencies we can deliver to improve services to our patients.

In March we will be talking to staff and the public to find out what they think about possibilities for improvement of hospital-based care.

### Priority 4 - Technology

*If we are to create integrated models of care and encourage greater collaboration across organisations, we need to transform the way we securely share information.*

The need for electronic sharing of patient records locally has been recognised as fundamental to achieving many of the goals set out in the STP.

Building on the work of large digital projects already happening in many of the partner organisations, the Priority 4 team produced a Local Digital Roadmap for the BLMK footprint; a document which sets out the vision of how the region will achieve NHS England's

ambition of becoming 'paper-free at the point of care' by 2020.

Already the STP has managed to secure £1.7m of funding by bidding together we have a larger and more coherent voice. . These funds will be targeted at quickly resolving long standing issues with SystemOne where clinicians have been frustrated in referring, developing and sharing care-plans electronically. Work is already underway in this area.

### BLMK Shared Health and Care Record Engagement Day

We invited public, stakeholders and staff across the 16 partner organisations to an engagement day on 23 February 2017 where the exciting possibilities of a secure, shared patient care record were discussed.

Attendees heard from external speakers from other health and social care providers in the UK that are delivering integrated digital care records and suppliers who could provide the technology to deliver our vision in BLMK.

### Priority 5 - System redesign

*The STP partners have concluded that the current arrangements for analysing and assessing healthcare needs, and for buying and providing health and social care in BLMK, needs to be simplified and streamlined.*

*Redesigning the system used to commission, plan and deliver will deliver a number of significant benefits.*

Nearly everyone accepts that the incentives in the current system aren't right, and talks of fines and short sighted financial decisions made in islands of the system are common place. This priority aims to resolve these issues. We want to develop an Accountable Care System concept and model in BLMK, which takes into account the existing foundations that are already in place in the region.

### What is an Accountable Care System?

An Accountable Care System brings together a number of providers to take responsibility for the cost and quality of care for a defined population within an agreed budget - in our case BLMK. They can take many different forms ranging from fully integrated systems to looser alliances and networks of hospitals, medical groups and other providers. (Taken from King's Fund website).

We will engage with all partners and key stakeholders to help design an Accountable Care System that is right for BLMK.



# Your BLMK STP team

The team working hard on the STP bring a wealth of experience to the work in BLMK from a mixture of different backgrounds and disciplines.

## The Programme Management

### Mark England

Chief of Staff & Joint Programme Director  
(Priority 4)

### Emma Goddard

Programme Director  
(Priorities 1 & 2)

### Cathy Jones

Programme Director  
(Priority 3)

### Pam Garraway

Joint Programme Director  
(Priority 4)

### Matthew Webb

Joint Programme Director  
(Priority 5)

### David Harrison

STP Advisor & Joint Programme Director  
(Priority 5)

### Tom Joyce

Programme Manager

## Priority Leads

### Ian Brown

Beford Borough Council  
Priority 1 Lead

### Matthew Tait

NHS Bedfordshire CCG  
Priority 2 Lead

### Cathy Jones

Luton & Dunstable University Hospital  
Priority 3 Lead

### Pam Garraway

Luton Borough Council  
Priority 4 Lead

### Matthew Webb

NHS Milton Keynes CCG  
Priority 5 Lead

## Workstream Leads

Staff from all 16 partner organisations are also involved in different work streams, looking at different components of care and service provision in the STP. Here are the leads for that work.

### David Hartshorne

Luton & Dunstable University Hospital  
Estates

### Kate Burke

Milton Keynes University Hospital  
Communications

### Jane Meggitt

NHS Bedfordshire CCG  
Engagement

### Clare Steward

NHS Bedfordshire CCG  
Governance & Legal

### Mike Keech

Milton Keynes University Hospital  
Finance

### Oonagh Monkhouse

Bedford Hospital  
Workforce



# Involving staff, stakeholders and local people in developing plans and making decisions

We want to make sure staff, stakeholders and local people are involved and engaged in developing plans for transforming care and services across Bedfordshire, Luton and Milton Keynes.

In addition we also ensure Local Authority scrutiny committees and Health and Wellbeing Boards in BLMK receive appropriate and timely information to inform their decision-making.

We have established a number of key advisory groups and forums to discuss the STP. They include:

**A Staff Voice Partnership**  
To inform, involve and engage staff in every STP partner organisation

**A Public Voice Partnership**  
To inform, involve and engage local people

**A Trades Union Partnership**  
This Partnership has been established to enable staff representatives from relevant Royal Colleges and trades unions to introduce a staff-side perspective into our planning and to inform our decision-making

## Recent events

Over 170 members of the public attended four events in Bedford, Central Bedfordshire, Luton and Milton Keynes in January and February to hear more about the plans for the area.

The events were hosted by each of the Healthwatch organisations in the four areas and gave us a good opportunity to gather views and feedback on the STP, which will be used to inform the plans in the future.

As well as speaking to the public, we also hosted our third BLMK Clinical Conversation in January, where 120 clinicians from across the 16 partners heard updates on each of the five priorities and discussed how we could develop the workforce in the region to help improve health and social care.

## Upcoming events

In March, we will be holding a number of events for staff across Bedford, Central Bedfordshire, Luton and Milton Keynes to gather their views on how best we can transform hospital-based care in our three hospitals.

To see details on public events we're holding, details are over the page.



# Staying in touch

There's plenty of ways that you can keep up-to-date with the latest news, developments and upcoming events.

Visit [www.blmkstp.co.uk](http://www.blmkstp.co.uk) and enter your details at the bottom of the page to join our mailing list and receive details of any events, meetings or updates we might have.



## Get social

Like our page on Facebook at [www.facebook.com/BLMKSTP](http://www.facebook.com/BLMKSTP) and follow us on Twitter at [www.twitter.com/BLMK\\_STP](http://www.twitter.com/BLMK_STP) to keep up-to-date with all the latest developments.

## Upcoming events

**We have a series of public events in March to gather public views on our ideas for transforming hospital-based care.**

Come along to hear more about the progress of the plans and give your feedback on how you think we could transform health and social care in BLMK.

We will be hosting two events (times as in brackets) at the following four locations:

### Monday 6 March

Milton Keynes Christian Centre, Oldbrook, MK6 2TG  
2.30pm – 5pm and 6.30pm – 9pm

### Tuesday 7 March

Rufus Centre, Flitwick, MK45 1AH  
2.30pm – 5pm and 6.30pm – 9pm

### Wednesday 8 March

Addison Centre, Kempston, MK42 8PN  
2.30pm – 5pm and 6.30pm – 9pm

### Thursday 9 March

Chiltern Hotel, Luton, LU4 9RU  
10am – 12.30pm and 6.30pm – 9pm

To attend, please [email communications@mkuh.nhs.uk](mailto:emailcommunications@mkuh.nhs.uk)



This publication was produced by the BLMK STP communications team.

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