

[Home](#) » [News and events](#) » [News](#)

East of England first to launch vision for local NHS

12 May 2008

Towards the best, together for now and the next decade

The NHS in the east of England is today (Monday 12 May) launching *Towards the best, together*; a vision for the future of NHS services in the region that is clinically led, evidence based and patient centred. It is the road map for our journey towards our goal of becoming the best health service in England.

Towards the best, together starts with a commitment to lifelong support for staying healthy and enjoying good mental health, and then proposes improvements from before birth for expectant mothers to after death for bereaved families, touching all our lives along the way. It also sets out how the NHS in our region will deliver the Improving Lives; Saving Lives pledges which we consulted on last year which set out our outcome-based priorities for improving health over the next three years.

Key proposals from each of eight Clinical Pathway Groups, each lead by a clinician from our region supported by clinicians, staff, and stakeholders representing every NHS organisation in our region, include:

- Making the NHS as much about prevention and wellness as about treating illness;
- Ensuring mental health services are about recovery as well as managing symptoms, including new investment in staff and waiting time guarantees;
- Maintaining hospitals' maternity services and guaranteeing one-to-one midwife led care for mothers in established labour with a choice of where to give birth
- A commitment to maintain an obstetric unit at each of the areas 17 Acute Trust together with midwife led unit also co-located at each Acute Trust
- Creating children's services that recognise the needs of children including new Children's Assessment Units to keep as many children with their families and out of hospital as possible;
- Better access to local services such as dentists; GPs; diagnostics and others
- Planned care delivered locally where possible, centralised where appropriate;
- Maintaining A&E departments across all our Acute Trusts and creating a better triage system linked to a new memorable urgent care number and new Urgent Care centres;
- Delivering new and improved services for stroke; heart attack and major trauma through specialist care provided by specialist staff in dedicated centres;
- Ensuring better outcomes for the 1.6 million people in our region who suffer from Long Term Conditions through personal care plans, trialling personal held budgets and supporting self care more effectively;
- Delivering world class standards for people who want to choose where they die, whilst ensuring the last year of their life is as good as it can be.
- These, and many other proposals, form the basis our vision for becoming the best health service in England.

Dr Robert Winter, Medical Director of NHS East of England and Clinical Champion for Towards the best, together said: "Towards the best, together represents the work of hundreds of staff, patients and our partners across the east of England to forge a path towards the region's goal: to be the best health service in England.

"This vision is based on the latest clinical evidence locally, nationally and internationally. It draws on the wealth of experience that our clinicians and others have brought to the table, asking what is the best service possible and how do we get there? It is based on a clear case for change that energised both me and my clinical colleagues who recognised that in too many areas we are not delivering the best we can for people who use NHS services.

"It promises a sustainable future for district general hospitals across the region with all Acute Trusts providing both A&E and Maternity services, but recognises that many people want routine services closer to home rather than in major acute hospitals. It also makes the case that centralising more complex care is more effective in saving lives and improving patient outcomes.

I am proud to have led my clinical and other colleagues in developing this vision and I am very excited about the future of the NHS as we ask people their views about our proposals. I hope people respond, because it is vital their views shape the future for their services."

Chief Executive of NHS East of England, Neil McKay added: "We have the resources to deliver this vision if it is agreed by the people of the region. We have made debt history, turning around our historic legacy to be ready now to invest in the future with confidence."

Towards the best, together will now be the subject of widespread consultation across the region for the next three months (12 May to August 4). More than 50 meetings with clinical and patient groups have already been arranged and many more are planned. NHS East of England will also be holding a number of deliberative events and conducting public opinion research. People will also be able to give their views by writing in or on line using a special consultation response form.

After the consultation all views will be analysed and presented in a report to the NHS East of England Board on 25 September. This meeting will agree the content of the final vision which will be used to drive PCT strategies.

The next stage will be for the regions 14 Primary Care Trusts (PCTs) to prepare their local strategies. These will set out the PCTs' intentions to improve local services and how this will be achieved. These local strategies will be built on this vision as well as any local priorities.

ENDS

For further information please contact either Martin Cresswell, Hazel Thomson or Zoë Shepherd on 01223 597540 or email vision@eoe.nhs.uk

Notes for editors

The case for change is stark

- People are not as healthy as they could be - We lag behind other European countries, our obesity rates are rising, more than 20% of adults and 10% of children have a mental health problem.
- Patient outcomes and safety are not good enough - Death rates in our hospitals vary widely. We lag behind other EU countries in survival rates in some cancers. Our maternity and children's services do

- not meet national standards, and we still have too many healthcare associated infections such as MRSA.
- There is too much unfairness in health - There is a region wide life expectancy difference of 10 years across the region, looked after children tend to have very poor health compared to the rest of us and there are other sections of our society that are marginalised..
 - We are not meeting the expectations of those we serve - Many people across the east of England have some dissatisfaction with NHS services. They want more attention on basic services and standards, easier access to services, less waiting and to be treated as an individual with respect.
 - It needs to be easier for people to choose and access the services they need - Nearly three quarters of people want to be able to book a GP appointment two days in advance, but only a third can do that. People want to be able to see an NHS dentist, choice of where to go for services, and women want choice on where they give birth.
 - We still send too many to hospital unnecessarily - There is a compelling case that too many people go to hospital when they do not need to. This is not good for patients, and it is not sustainable financially or environmentally. We also see 56% of our people die in hospital when the majority want to die at home.
 - Specialist care is not organised well enough to deliver the best - Specialist care, like stroke care and neonatal care for ill babies and others, needs specialist equipment, staff, facilities and a minimum number of patients if it is to save as many lives as it can. Reorganisation of these services will deliver better care.

The eight clinical pathway groups are:

Staying Healthy - key recommendations from this group are:-

- Ensure we focus on improving health and wellbeing, through better prevention and treatment services for the whole population and wellbeing services targeted to reduce unfairness
- Guarantee access to screening and immunisation programmes for all, to detect risk factors, early on-set of disease or prevent disease
- Offer an assessment for the risk of heart disease to everyone aged 40 - 74 and provide lifestyle support and treatment to those who will benefit
- Cut the number of smokers by 140,000 and seek to reduce childhood obesity
- Deliver packages of integrated lifestyle support services to targeted groups
- Create an innovation fund to support new approaches to staying healthy
- Strengthen health partnerships across the local authority, voluntary, private and public sectors
- Launch Staying Healthy in the Workplace with employers and our own staff
- Do all we can to fight climate change and reduce its impact on health.

Mental Health - key recommendations from this group are:-

- Recognise the importance of prevention and the need to tackle the stigma associated with mental health problems
- Ensure mental health services are recovery focussed
- Introduce a maximum 18 week wait for services, with shorter guarantees where appropriate
- Seek to detect dementia earlier
- Help more people with dementia live at home as long as possible
- Recruit hundreds of new mental health professionals, including: at least 350 new psychological therapists; older people's mental health teams; recovery, time and support workers; and carer support workers
- Deliver a new deal for carers through an expert carer's programme.

Maternity and Newborn - key recommendations from this group are:-

- Ensure all 17 Acute Trusts will keep an obstetric unit, with a co-located midwife-led unit
- Guarantee one-to-one midwifery care in established labour by recruiting at least 160 more midwives
- Maximise care for ill babies by increasing level 3 intensive care cots, increasing the number of level 1 special care units and reducing the number of level 2 high dependency units
- Offer pre-conception care to women with pre-existing health problems and lifestyle issues
- Increase the overall number of NHS-funded IVF cycles against standard criteria
- Guarantee women direct access to midwives and choice of antenatal care
- Promote normality of birth and guarantee women choice on where to give birth, based on an assessment of safety for mother and baby
- Guarantee choice of postnatal care to women, especially those most in need
- Establish networks covering maternity and neonatal services

Children's Services - key recommendations from this group are:-

- Ensure children's services are truly designed for children, taking into account all their needs
- Implement the Child Health Promotion Programme for all
- Split non-urgent care from urgent care by providing more of it in the community, rather than hospitals
- Develop new Children's Assessment Units, and review whether every acute hospital needs an inpatient ward
- Create clinical networks for sub-speciality services, including surgery
- Strengthen Child and Adolescent Mental Health Services
- Ensure the needs of adolescents are properly catered for and there is a seamless transition to adult services Have common information systems, integrated care and co-located staff to deliver better services for children
- Create a region wide Children's Services Board to oversee the development of children's services.

Planned Care - key recommendations from this group are:-

- Deliver more care closer to home, away from acute hospitals
- Guarantee better access to GPs, dentists and radiotherapy services
- Provide direct access to specialist advice and diagnostics; and more local provision of diagnostics
- Guarantee a maximum 18 week for more of our services, including speech therapy, podiatry, orthotics, wheelchair services and orthodontics
- Ensure that all patients have a full and free choice of where to go for planned care
- Develop better local support for post operative recovery
- Agree, and measure, new clinical, quality of life and experience outcomes
- Ensure that there is appropriate centralisation of complex care, particularly specialised surgery.

Acute Care - key recommendations from this group are:-

- Ensure all 17 Acute Trusts will continue to have an A&E department
- Make access easier by creating a new memorable telephone number for urgent care and ensuring consistent triage across all services
- Create a series of Urgent Care Centres
- Work towards providing 24/7 access to a fuller range of key acute services
- Create new specialist centres for stroke, primary angioplasty and major trauma
- Introduce universal 24/7 coverage of stroke thrombolysis

- Create clinical networks for specialised services

Long Term Conditions - key recommendations from this group are:-

- Remember that people with long term conditions are people first - "a person with diabetes" and not "a diabetic"
- Ensure personal health plans for everyone with a long term condition
- Extend expert patient programmes
- Improve timely access to specialist advice and diagnostics in primary care
- Guarantee access to cardiac and pulmonary rehabilitation
- Ensure comprehensive disease registers are in place for long term conditions
- Increase the emphasis on self care and pilot patient held budgets
- Agree and measure a new set of patient outcome and patient experience indicators
- Ensure all relevant staff have received training on delivering a self care approach

End of Life - key recommendations from this group are:-

- Deliver world class standards in choice of place of death
- Set and monitor core best practice standards for all end of life providers
- Create and extend support services for all families and carers, including bereavement support
- Ensure needs assessments and advance care planning for all identified as being in their last year of life
- Guarantee better access to supportive and palliative care services, particularly out-of-hours
- Work with the public and partners to raise awareness of end of life issues
- Establish a Palliative and End of Life Care Board and create managed Palliative and
- End of Life Care networks

The eight clinical pathway groups have a total membership more than 200 members; all groups are led by leading clinicians from the east of England and have a majority of clinicians on them.

The consultation runs from 12 May 2008 to 4 August 2008 and people can make their views known in a number of ways:

- They can complete the response form included with the document
- Write to NHS East of England giving their views using the freepost address given here
- Log on to our website at www.eoe.nhs.uk and complete the online response form or email us via the website.

Response forms and written responses should be sent to:

Towards the best, together
NHS East of England
FREEPOST
Victoria House
CapitalPark
Fulbourn
Cambridgeshire CB21 5XB

[Back to news release index](#)

© 2008 NHS East of England Victoria House, Capital Park, Fulbourn, Cambs CB21 5XB