

Health and Wellbeing Board

18 May 2016

Report of the Chief Operating Officer, NHS Vale of York Clinical Commissioning Group

Sustainability and Transformation Plans

Summary

1. This report is to update the Board on the latest arrangements for the development of Sustainability and Transformation Plans in the NHS for the Vale of York area.

Background

2. The NHS planning guidance sets out the requirement for a five-year place based Sustainability and Transformation Plan (STP), supported by an annual operating plan for each CCG. The 'footprint' for the STP was to be determined by each local area in collaboration with local partners. The deadline for submitting the proposed planning footprint was January 29th 2016.
3. The STP is required to set the direction for the local area to achieve the ambitions of the Five Year Forward View, which are to close the health and wellbeing gap, the care and quality gap and the funding and efficiency gap. It is expected to provide a clear and powerful shared vision across the local NHS system, local government and local communities, underpinned by an open, engaging and iterative process of development and consultation.
4. The STP will be an overarching plan, supported by a number of more detailed plans on primary care sustainability, prevention, self-care and patient empowerment and a joint plan for the delivery of the Better Care Fund requirements.
5. The STP will form the basis for future funding applications and access to development pots, for example to deliver new models of care or technology roll out.

To be successful in accessing funding NHS England expects the STP to be underpinned by clear place-based governance and implementation arrangements.

6. The guidance provides a series of 'national challenges' the STPs must look to address in Annex 1 of the guidance (see link in Background Papers). It references the need for a 'radical upgrade' in prevention, patient choice and community engagement. The STP will be expected to include new models of care, improvement in clinical priorities, including urgent care, cancer and dementia; and to set out how the local area will do these whilst achieving financial balance.

Humber, Coast and Vale Footprint

7. NHS Vale of York CCG has worked collaboratively with the Humber and Coast CCGs over the past year to establish the Urgent and Emergency Care Network and to review and enhance Cancer Pathways across this geography. The development of the Sustainability and Transformation Plan builds on this history of working and allows for service redesign at scale for those pathways / support services where there is a rationale to redesign at scale to improve patient outcomes, for example use of technology, and for specialised health services, whilst maintaining a Vale of York and Scarborough and East Riding system focus on the York Teaching Hospital Foundation Trust footprint for acute services and performance recovery and a Vale of York community focus for integration of community-based services.
8. The Humber Coast and Vale footprint covers the geographic boundaries of:
 - NHS Vale of York CCG
 - NHS Scarborough and Ryedale CCG
 - NHS East Riding CCG
 - NHS North East Lincolnshire CCG
 - NHS North Lincolnshire CCG
 - NHS Hull CCG

This footprint was identified based upon patient flows.

Programme Management Arrangements

9. The CCGs are formally considering proposed governance arrangements, for a Joint Committee of CCGs to be established to take forward the work on the STP on behalf of each CCG. It is proposed that this will begin meeting in shadow form from June 2016. This is informed and supported by stakeholder networks, including a Local Authority Forum. There is a stakeholder event planned for the 18th May to discuss work to date, initial priority areas and the gaps that the STP can address in these areas.
10. The Humber, Coast and Vale STP footprint has been approved by NHS England, and will have a Senior Responsible Officer (SRO) appointed to lead the development and implementation of the plan. Supporting the SRO, the CCGs have agreed to develop a joint Programme Management Office for the development of the STP. Interim arrangements have been established with the NHS Hull CCG's Accountable Officer providing strategic oversight and strategy lead from NHS East Riding CCG providing the coordination and managing submissions.
11. The flow of patients is not restricted to services within the STP footprint, and a small percentage (under 5%) of patients in the Vale of York CCG population use Leeds based services. The footprint arrangements will ensure that work is coordinated across the neighbouring footprints, and particularly those to the West and the North.
12. For the local contribution to the STP, a 'STP Chapters' group has been established, comprising NHS Vale of York CCG, NHS Scarborough and Ryedale CCG, Tees, Esk and Wear Valleys NHS Foundation Trust, York Teaching Hospital NHS Foundation Trust, City of York Council and Healthwatch, reporting to the Integration and Transformation Board and System Leaders Board. The final submission is due to be made by 30 June 2016.

Consultation

13. The organisations listed at paragraph 12 above have been involved in the earliest stages of working. The Humber Coast and Vale workshop is planned for the 18th May to commence wider stakeholder engagement and agree the priorities for wider consultation.

Options

14. Not applicable.

Analysis

15. Not applicable to this report. Public Health England colleagues are compiling a detailed report to identify the health challenges and opportunities for the local population to inform the priorities of the STP. In addition analysis is being undertaken of the pressures across the health system for this footprint. This is not complete, but emerging issues include financial sustainability, workforce and skill-mix, health specialities with long waiting list times, access to urgent care and urgent care.

Strategic/Operational Plans

16. This proposed level of planning is intended to sit above the existing 5-year plan for the CCG, "My Life, My Health, My Way", and the CCG's one-year operational plan for 2016-17. It is intended to reference the existing Joint Health and Wellbeing Strategies for each Health and Wellbeing Board area that it covers.

Implications

17. The implications are:
 - **Financial** – Implications cannot yet be quantified, but the strength of the plan will influence the area's eligibility for future funding pots.
 - **Human Resources (HR)** - Implications discussed within the body of the report
 - **Equalities** - No equalities implications have been identified at this stage
 - **Legal** - No implications have been identified.
 - **Crime and Disorder** – No implications have been identified.
 - **Information Technology (IT)** - No implications have been identified.
 - **Property** - No implications have been identified.

- **Other** - No implications have been identified.

Risk Management

18. There are no known risks associated with the noting of the contents of this report.

Recommendations

19. The Health and Wellbeing Board are asked to note the contents of this report.

Reason: To keep Health and Wellbeing Board apprised of progress against the development of STPs.

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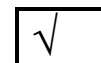
**Report
Approved**



Date 3 May 2016

Wards Affected:

All



For further information please contact the authors of the report

Background Papers:

NHS Planning guidance: <https://www.england.nhs.uk/wp-content/uploads/2015/12/planning-guid-16-17-20-21.pdf>

Annexes

Annex A – Coast Vale and Humber STP Initial Submission April 2016

Glossary

CCG	Clinical Commissioning Group
SRO	Senior Responsible Officer
STP	Sustainability and Transformation Plan