

**Health, Housing and Adult Social Care Policy  
and Scrutiny Committee**

**12 December 2017**

Report of Programme Director, Humber, Coast  
and Vale Sustainability and Transformation  
Partnership (STP)

**Update on the work of the Humber, Coast and Vale Sustainability and  
Transformation Partnership**

**Summary**

1. This report provides an update on the work of the Humber, Coast and Vale Sustainability and Transformation Partnership, and in particular the local place-based work in York.
2. It is provided in order to keep members informed of the ongoing efforts to improve local health and care services through greater integration and collaboration across a wide range of partners in the Humber, Coast and Vale.

**Background**

3. Since early 2016, the organisations responsible for providing and commissioning health and social care services across the area known as Humber, Coast and Vale have been working together to plan the future of local health and care services. They formed a partnership known as the Humber, Coast and Vale Sustainability and Transformation Partnership (STP) and have been taking steps to work together in order to address the challenges facing local health and care services both now and in the future.
4. The Partnership has developed a shared vision for our local health and care system: **“We want everyone in our area to have a great start in life, to have the opportunities and support they need to stay as healthy as they can throughout their lives.”**
5. In October 2016, we published our outline plan for the partnership, which set out our key goals and aspirations for our population.

6. Since then, we have been working together in partnership on a wide-ranging programme of work addressing the six priorities identified by the Partnership:
  - a. **Healthier People** – working with Local Authorities to address the wider determinants of health, focusing on prevention and self-care;
  - b. **Better ‘Out of Hospital’ Care** – improving, extending and joining-up services in local communities so people only go into hospital when it is absolutely necessary and do not stay longer than they need to;
  - c. **Better ‘In-Hospital’ Care** – making the best use of the resources and workforce across the system to plan and deliver hospital-based services for those who need them;
  - d. **Better Mental Health Care** – ensuring mental health is seen to be equally important as physical health and that the services we offer promote the best mental health for our local population;
  - e. **Better Cancer Care** – working together to improve the effectiveness of cancer services, promote early diagnosis and support people to live well with and beyond cancer;
  - f. **Balancing the Books** – making the best use of all the resources – financial, human and physical – within the system to deliver good quality local services within the funding available.
7. Work programmes have been established in each of our local places that are focussed around our six Clinical Commissioning Groups, to plan and implement local transformation programmes. We have also established cross-cutting workstreams focusing on cancer, mental health and hospital-based care as well as enabling workstreams covering workforce, digital technology, communications and engagement and estates.
8. The Humber, Coast and Vale Partnership will meet in early December to review the priorities and programmes of the Partnership and make any changes to our programmes of work that are necessary in order to accelerate progress on delivering the vision.
9. Representatives from the Humber, Coast and Vale Partnership attended this scrutiny committee in November 2016 to brief members on the development of the initial outline plan, submitted in October 2016. The report below provides an update on key developments within the partnership and particularly the York Place Based Plan.

## **Place-based care for York**

10. The place based plan for York has been developed jointly by the Vale of York and Scarborough and Ryedale Clinical Commissioning Groups working with partner organisations.
11. It covers the following four localities: City, North, South (Vale of York) and Scarborough – recognising ‘one’ Ryedale. The joint plan priorities include:
  - a. Planned care transformation
  - b. Winter Planning (specific focus for 2017/18)
  - c. Sustainability for Scarborough and Ryedale with ‘core’ services of emergency care, pediatrics and maternity
  - d. Diagnostic capacity, access and tertiary flow aligned with the STP Cancer Alliance work
12. The plan also includes specific priorities for the Vale of York (covering the three localities). These priorities are:
  - a. Population health
  - b. Emerging new models of care for Community Care
  - c. Complex case management
  - d. Developing general practice as provider at scale
13. A further update will be provided through a presentation at the meeting of this Scrutiny Committee.

## **Other key developments across the Humber Coast and Vale STP**

### **Leadership and system change**

14. Emma Latimer, who has led the Humber, Coast and Vale STP since it was established in early 2016, stood down from the role at the end of August 2017. Simon Pleydell, former Chief Executive of Whittington Health NHS Foundation Trust, joined the Humber, Coast and Vale leadership team in September 2017 as independent Chair and STP lead.
15. We have taken a number of steps to enable better collaboration between the organisations that are providing health and care services to our local populations. A Humber, Coast and Vale Provider Collaborative has been established, chaired by Michele Moran, Chief Executive of Humber NHS Foundation Trust. This group first met in June 2017 and has now developed a work programme and key priorities for collaboration. Topics covered in the workplan include: workforce, managing risk, governance, resources and population health management.

16. The 'Next Steps to the Five Year Forward View', which was published by NHS England in March 2017, launched the concept of Accountable Care Systems (ACSs). The first eight Accountable Care Systems (ACSs) in eight STP or sub-STP areas across England were announced in July 2017. These areas are currently working towards the implementation of a new model for Accountable Care in their area, which bring together local NHS organisations, in partnership with social care services and the voluntary sector.
17. The first group of designated ACSs have agreed with national leaders to fast track improvements set out in Next Steps on the Five Year Forward View, including taking the strain off A&E, investing in general practice making it easier to get a GP appointment, and improving access to high quality cancer and mental health services.
18. These areas will also lead the way in taking more control over funding available to support transformation programmes, matched by accountability for improving the health and wellbeing of the populations they cover. NHS national bodies will provide these areas with more freedom to make decisions over how the health system in their area operates.
19. Early discussions are taking place amongst the Partners within Humber, Coast and Vale in relation to the concept of Accountable Care Systems and what the potential models might be for developing an Accountable Care System(s) in the Humber, Coast and Vale.

## **Cancer**

20. The Humber, Coast and Vale Cancer Alliance is leading our work to improve cancer care across our region. Jane Hawcard, Chief Officer, East Riding Clinical Commissioning Group is the Senior Responsible Officer for this workstream and was joined in September by Rafael Cicci, as Cancer Alliance Programme Director.
21. The four priority areas that the Cancer Alliance is working on are:
  - a. Increased awareness and early diagnosis
  - b. Improving diagnostics
  - c. Getting the best treatment for everyone
  - d. Living with and beyond cancer
22. The Cancer Alliance is also continuing its partnership with Macmillan, to support their Living With and Beyond Cancer programme, which aims to

improve the support available to the approximately 53,000 people in Humber, Coast and Vale who have cancer or have had cancer in the past.

23. Over £4million worth of transformation funding will be made available over the next two years to invest in improving local cancer services across Humber, Coast and Vale, with a focus on improving early diagnosis. There are eight projects in total associated with these programmes. For example, the cancer champion project aims to help support people to take charge of their own health and wellbeing and help those with cancer get diagnosed and treated earlier.
24. The transformation funding includes: revenue funding of £0.6m in 2017/18 and £1.8m in 2018/19 and capital funding of £2m in 2018/19.

### **Hospital-based care**

25. The Partnership has begun to develop the process for a comprehensive review of hospital-based services across Humber, Coast and Vale with the intention that this will take the form of two parallel reviews, one for the Humber area and the other for the York/Scarborough area.
26. York Health Economics Consortium (YHEC), based at the University of York, has been commissioned to undertake analytical work that will provide a sound information and evidence base upon which the review can be built. The work conducted by YHEC will provide an evidence-based understanding of current and future demand for hospital-based services that can be used to help plan hospital services that will be needed in the future.

### **Mental Health**

27. Our work towards improving mental health care across the Humber, Coast and Vale is being led through our Mental Health Workstream. Michele Moran, Chief Executive of Humber Foundation Trust is the Senior Responsible Owner and was joined earlier this year by Alison Flack, as the Mental Health Programme Lead.
28. The six priority areas that the mental health workstream is working on are:
  - a. Eliminating out of area placements for patients
  - b. Implementing a 24/7 Mental Health Crisis Care and Liaison Services
  - c. Developing the Community Mental Health Teams through redesigning and providing alternative roles within the workforce

- d. Increasing access to locally based Specialist Perinatal mental health community services
- e. Transforming Secure Care through the expansion of community services
- f. Improving the provision of Dementia assessment, diagnosis and treatment pathways for patients.

## **Stakeholder Engagement**

- 29. An initial meeting of Lay Members and Non-Executive Directors (NEDs) was held in May 2017 to consider the recommendations in the Next Steps on Five Year Forward View document and lay representation within the STP. Further discussions have taken place – led by Sharron Mays, Chair of Humber NHS FT – to develop the lay member/NED input into Humber, Coast and Vale going forward.
- 30. GP representative Leads have been appointed to all STP workstreams. This is providing a different perspective on the way in which we are working together and planning future service changes. We are working to ensure primary care is at the forefront of developing new models of care and fully involved throughout the process.
- 31. Humber, Coast and Vale was successful in a bid to join the Building Health Partnerships self-care programme in 2017/18. The programme, delivered in partnership with Social Enterprise UK and the Institute for Voluntary Action Research aims to develop collaborative work with citizens and the Voluntary, Community and Social Enterprise sector to make progress on the self-care priorities within our STP. The first stakeholder event took place in September and work is ongoing to plan the remainder of the programme.
- 32. Regular meetings with trade union representatives through a Humber, Coast and Vale Staff-Side Forum have been established to maintain regular contact and enable discussion of issues raised by the staff side representatives.

## **Financial Picture**

- 33. Two geographies within Humber, Coast and Vale became and continue to be subject to the Capped Expenditure programme: the York/Scarborough System (including Vale of York CCG, Scarborough and Ryedale CCG and York Foundation Trust) as well as the North Lincolnshire System (including North Lincolnshire CCG and Northern Lincolnshire and Goole NHS Foundation Trust).

34. The process of refreshing the financial model has been initiated through the HCV Finance and Technical Group, supported by colleagues in NHS England. The initial refresh incorporates financial outturn figures for 2016/17 and the financial figures built into the latest 2017/18 plans. Further work is underway to work through the assumptions within each of workstream plans and the impact on the financial position for each year to 2020/21.

### **Access to National Funding**

35. Increasingly, NHS organisations are expected to work collaboratively in developing bids for national capital and revenue funding, via STPs. The Humber, Coast and Vale Executive Group is putting in place measures to strengthen our collaborative planning processes and to ensure that potential bids are worked up well in advance of deadlines. In line with this move, a number of collaborative bids for funding have been submitted and/or are under development within Humber, Coast and Vale.
36. Successful funding bids to date include:
- a. Urgent and Emergency Care Delivery Funding – allocation will be on fair share basis, each STP to receive circa £250k.
  - b. National Elective Programme – each STP will receive circa £150k for 2017/18 and 2018/19 to support delivery of the Elective Care Programme. This is particularly focussed on the MSK and clinical peer review activity.
  - c. Cancer Alliance – Awareness and Early Diagnosis and Diagnostics Consolidation bids successful (£0.6m revenue in 2017/18 and £1.8m revenue in 2018/19, and £2m capital in 2018/19)

### **Recommendations**

37. Members are asked to consider and note the contents of the report and update provided.

Reason: To keep members informed of the ongoing efforts to improve local health and care services through the work of the Humber Coast and Vale STP.

## Contact Details

**Author:**

Karina Ellis  
Head of STP Programme  
Delivery

**Telephone:** 01482 344733

**Email:** [Karina.ellis@nhs.net](mailto:Karina.ellis@nhs.net)

**Chief Officer Responsible for the report:**

Chris O'Neill  
STP Programme Director, Humber, Coast and  
Vale

Phil Mettam

Accountable Officer, Vale of York CCG

Report Approved  Date 30/11/2017

Wards Affected:

All

For further information please contact the author of the report

## Background papers

Humber, Coast and Vale STP Outline Strategy, October 2016 Submission:

[http://humbercoastandvale.org.uk/wp-content/uploads/2016/12/HCV-October-Submission\\_v.3.1-updated.pdf](http://humbercoastandvale.org.uk/wp-content/uploads/2016/12/HCV-October-Submission_v.3.1-updated.pdf)

## Abbreviations

ACS – Accountable Care System

CCG – Clinical Commissioning Group

FT – Foundation Trust

HCV – Humber Coast and Vale

MSK – musculoskeletal

NED – Non-Executive Director

STP – Sustainability and Transformation Partnership

YHEC – York Health Economics Consortium