



Leadership Board

Tuesday 15th November 2016 at 2.00 pm

Meeting to be held in a Committee Room, County Hall, Durham, DH1 5UQ

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9. NHS Sustainability and Transformation Plan Process	1 - 6

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To All Members

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North East Combined Authority

Leadership Board

Date: 15th November 2016
Subject: NHS Sustainability and Transformation Plan Process
Report of: Head of Paid Service

Executive Summary

In December 2015, the NHS shared planning guidance 16/17–20/21 outlining a new approach to help ensure that health and care services are built around the needs of local populations. To do this, every health and care system in England will be required to produce a multi-year Sustainability and Transformation Plan (STP), showing how local services will evolve and become sustainable over the next five years – ultimately delivering the Five Year Forward View vision of better health, better patient care and improved NHS efficiency.

This report provides NECA Leadership Board with an overview of the STP process.

Recommendations

The Leadership Board is asked to receive the report for information.

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1 Background Information

- 1.1 Sustainability and transformation plans (STPs) are the new strategic planning framework for local health and care economies in England and, as such, are a key way to address the major health and wellbeing, quality and financial challenges facing local health and care systems.
- 1.2 STPs were announced in the NHS planning guidance in December 2015 and provide a new strategic planning framework for health and care services. By requiring local health and care organisations to work together, STPs are intended to encourage forward planning based around the needs of local areas and their populations. By encouraging whole systems to collaborate to find solutions to the issues that organisations cannot individually solve, STPs are seeking to upgrade local health and care systems and deliver better more integrated care for patients and service users.
- 1.3 They are:
- based on a geographical footprint, covering the whole population: there are 44 STP footprints covering the whole of England
 - longer-term plans running to March 2021
 - intended to be strategic plans, encompassing a range of delivery plans for different geographies and types of services
 - required to cover the full range of partners in the footprint, from primary care to specialised services, with an expectation that they also include adult social care, public health and prevention services commissioned and delivered by local government
 - required to address how local partners will meet key national commitments, including returning NHS services to financial balance, seven-day services, targets for cancer treatment and outcomes, investment in primary care and focusing more on prevention
 - all NHS organisations will also be expected to submit two-year organisational plans which are aligned to STPs.
- 1.4 According to the NHS England guidance, the 44 STP footprints are based on “natural communities, existing working relationships and patient flows” and aim to take account of the increased scale needed to plan and deliver services based on population size, taking into account existing footprints, such as local digital roadmaps and transforming care units of planning. The footprints have now been agreed, although it is expected that they may well adapt over time.

2 The STP Process

- 2.1 Each of the 44 footprints were asked to submit draft STPs by 30 June 2016, outlining proposals to transform local health and care services and how they

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intended to address the main issues that are critical to addressing transformation in health and wellbeing outcomes, improvements to care and quality and the finance challenges across the STP footprint.

2.2 The NHS leadership and representatives of the LGA met the leaders of each footprint in July to discuss these early proposals and agree the next steps for developing and refining STPs for each area. Each area was expected to submit revised plans addressing the feedback from the July conversation with NHS leaders and the LGA, including clearly describing the expected benefits for communities. The revised plans needed to include:

- a plan on a page, setting out overall objectives and the benefits to patients and communities, highlighting the key changes between the June and October submissions
- more depth and specificity around implementation plans, particularly where these will involve shifts in activity from the acute sector and therefore require building up the appropriate alternative care in primary and community-based services
- a completed finance template, showing the impact on activity, benefits, capacity, workforce and investment requirements
- the performance measures to be used to track progress on the key issues identified as priorities for action
- a statement on how integration of health and social care commissioning and services will support the overall objectives of the STP
- the degree of local consensus among organisations, and plans for further engagement with patients, clinicians, communities, stakeholders and staff, including evidence that there has been “meaningful strategic engagement” with both NHS boards and local government leaders
- further development of the local estates strategy.

2.3 All individual NHS organisations within each STP footprint are also required to submit two-year operational plans, which are aligned to their STP objectives, in November this year. Following these submissions, most areas are likely to start preparing more formal engagement and consultation by the end of the year.

3 Northumberland, Tyne and Wear and North Durham STP.

3.1 The NECA area covers one whole STP footprint for Northumberland, Tyne and Wear and part of a second footprint that covers Durham, Darlington, Teesside and Hambleton, Richmondshire and Whitby.

3.2 The draft STP for the North East was published on the 9th November 2016 and the publication starts a programme of engagement that runs until the end of January 2017 to raise awareness of the proposals and listen to any ideas or concerns about the detail of the draft plan. The outcomes from this phase

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of engagement will help to shape the next version of the STP, and any subsequent potential proposals to do any major changes to NHS services will be subject to a programme of formal public engagement and consultation in the future.

4 Potential Impact on Objectives

4.1 The report is for information only.

5 Finance and Other Resources

5.1 There are no specific financial and other resources arising from this report.

6 Legal

6.1 There are no specific legal issues arising from this report.

7 Other Considerations

7.1 Consultation/Community Engagement

7.1 Members of the NECA Leadership Board have received informal updates in relation to the work of the STP process.

7.2 Human Rights

There are no specific human rights implications arising from this report.

7.3 Equalities and Diversity

There are no specific equalities and diversity implications arising from this report.

7.4 Risk Management

There are no specific risk management implications arising from this report.

7.5 Crime and Disorder

There are no specific crime and disorder implications arising from this report.

7.6 Environment and Sustainability

There are no specific environment and sustainability implications arising from this report.

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8 Background Documents

8.1 Not applicable

9 Links to the Local Transport Plans

9.1 Not applicable

10 Appendix

10.1 Not applicable

11 Contact Officers

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12 Sign off

- Head of Paid Service ✓
- Monitoring Officer ✓
- Chief Finance Officer ✓

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