

SLOUGH BOROUGH COUNCIL

REPORT TO: Slough Wellbeing Board DATE: 11 May 2016

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Commissioning Group (CCG)

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WARD(S): All

PART I **FOR CONSIDERATION**

SUSTAINABILITY AND TRANSFORMATION PLAN (STP)

1. Purpose of Report

1.1 To provide the Wellbeing Board with an update on the development of the Sustainability and Transformation Plan (STP).

2. Recommendation(s)/Proposed Action

2.1 The Committee is requested to note the report.

3. The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan

3.1 The Slough Joint Wellbeing Strategy and Joint Strategic Needs Assessment have been reviewed to as part of the analysis of system wide gaps.

3a. Slough Joint Wellbeing Strategy Priorities

The priorities in the STP reflect the need to improve overall health and wellbeing of the population. The STP will focus on those priorities that need to be delivered across the system and local areas will continue to address their own local priorities.

3b. Five Year Plan Outcomes

The STP's priorities are:

- 1) Making a further step change to improve wellbeing, increase prevention and early detection
- 2) Significant action to improve long term condition pathways including greater self management and proactive management across all providers.
- 3) Frailty pathways: providing proactive management of frail complex patients, having multiple complex physical and mental health long term conditions, reducing crises and prolonged hospital stays.
- 4) Redesigning urgent and emergency care, including integrated working and primary care models providing out of hospital responses to reduce hospital stays.
- 5) Reducing variation and health inequalities across pathways to improve outcomes and maximise value for citizens across the population, supported by evidence.

Priorities 1 – 3 above particularly support the Council's Five Year Plan outcomes.

4. **Other Implications**

- (a) Financial - These will be addressed in later phases of the STP with a high level financial analysis to be included in the June submission.
- (b) Risk Management - There are no risk management implications directly resulting from the recommendation of this report.
- (c) Human Rights Act and Other Legal Implications - None identified at this point.
- (d) Equalities Impact Assessment - This will be undertaken at a further stage of development of the STP.

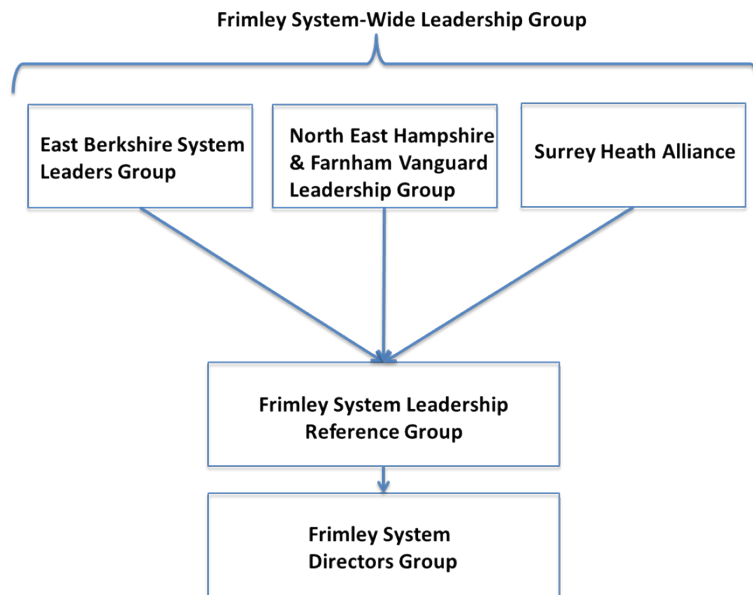
5. **Supporting Information**

5.1 The Sustainability and Transformation Plan (STP) has to be submitted to NHS England by 30 June 2016. It will set out the key priorities the System needs to address over the next five years. An agreed plan will be the sole vehicle for attracting transformation funding into the System.

5.2 The System has been identified as spanning the populations of Slough, Windsor, Ascot and Maidenhead, Bracknell and Ascot, Surrey Heath and North East Hampshire and Farnham CCGs. It has been named the 'Frimley System'.

5.3 The governance has been agreed and is described below:

- The **Frimley System-Wide Leadership Group** brings together all of the members from these three groups (50 people) – with workshops planned for April and June. The three established groups will each sign off the STP before submission on 30th June.
- The **Frimley System Leadership Reference Group** - A new group, chaired and organised by Sir Andrew Morris to work on behalf of the three established system leadership groups to steer and ensure development of the STP, with good engagement and planning for delivery. It brings together the Clinical Commission Group (CCG) Chief Officers and leadership representatives for the public, local authorities and clinicians.
- The **Frimley System Directors Group** – This Group reports to Sir Andrew Morris and takes the lead on the day to day development of the Plan. A dedicated STP Programme Director has been appointed.
- There has been engagement with all partners in the system and there is Local Authority representation on the Leadership Reference Group and Directors Group to ensure that there is adequate reflection of the wider health and care system.
- The following diagram shows the relationship between these various groups across the System.



5.4 A key principle of the STP is that it will only cover those areas that need to be addressed at a System level. Local areas will continue to address priorities for their local communities.

5.5 The agreed priorities for the STP are:

- Making a further step change to improve wellbeing, increase prevention and early detection
- Significant action to improve long term condition pathways including greater self management and proactive management across all providers.
- Frailty pathways: providing proactive management of frail complex patients, having multiple complex physical and mental health long term conditions, reducing crises and prolonged hospital stays.
- Redesigning urgent and emergency care, including integrated working and primary care models providing out of hospital responses to reduce hospital stays.
- Reducing variation and health inequalities across pathways to improve outcomes and maximise value for citizens across the population, supported by evidence.

5.6 These priorities emerged from a gap analysis that included Health and Wellbeing Strategies and Joint Strategic Needs Assessments and were signed off by a workshop of the System Leadership on 22 April.

5.7 Our analysis and discussions to date have identified four key transformations that our System will need to deliver over the coming five years:

- 1) Developing **communities and social networks** so that people have the skills and confidence to take responsibility for their own health and care in their communities.
- 2) Developing the **workforce** across our system so that it is able to deliver our new models of care and recognising that this transformation will be achieved through development rather than recruitment and be within today's costs.
- 3) Becoming a system with a collective focus on **the whole population** we serve and support throughout their lives – not a system based on sectors, organisations, services or parts of the population.
- 4) Using **technology** to enable patients and our workforce to improve wellbeing, care, outcomes and efficiency.

5.8 We have identified a number of system enablers which will require attention from the system as a whole:

- 1) Changing the way we work together collaboratively as a system to deliver change, increasing pace and scale. Moving from the **effort stage** (gaining participation at the required scale and frequency) to the **effect stage** (targeting, delivering and demonstrating real impact at a sufficient scale).
- 2) Developing the **workforce** across our system so that it is able to deliver our integrated new models of care, recognising that this transformation will be achieved through new roles and working differently across and within professional groups, be within today's costs and include initiatives that improve the wellbeing and sustainability.
- 3) Using **technology** as an enabler for both our staff and our residents and users of services, to empower them, to change practice, drive efficiency and to improve care across end to end pathways
- 4) Considering how best to use our **estate and resources** across the system flexibly to support delivery of our new models of care
- 5) Consider **productivity and efficiency** opportunities throughout the system to achieve the same standards of effective working within all organisations and across different sectors within the system

5.9 Stakeholder engagement will continue as the Plan develops and actions to address the priorities are identified. As the STP moves into the next phase wider citizen and elected member engagement will be an area of focus.

6. Comments of Other Committees

The Board's Health and Adult and Social Care Priority Delivery Group considered the Frimley Health and Care System Sustainability and Transformation Plan 15 April 2016 Submission (See Appendix A) at its meeting 26 April and no substantive comments were received.

7. Conclusion

The Wellbeing Board is asked to note the governance, engagement of stakeholders, priorities and transformations.

8. Appendices

'A' - The Frimley Health and Care System Sustainability and Transformation Plan 15 April 2016 Submission

9. Background Papers

None