

The background of the slide is a photograph of several people, likely healthcare professionals, working together. They are looking down at a document or screen. The image is overlaid with a semi-transparent blue filter. The text is centered over this image.

Developing Sustainability and Transformation Plans

Preparing for 15 April and beyond

March 15 2016

STPs are an opportunity to develop a local route map to an improved, more sustainable, health and care system



44 STP footprints have been agreed

- Each will be convened by a local leader, backed by national bodies
- Footprints are not statutory boundaries – they are vehicles for collaboration
- Planning will still need take place at different levels - subsidiarity is a key principle

A good STP focuses on the big questions and early action

- Get going on some early actions rather than waiting for the plan to be complete
- As 'umbrella' plans, STPs can be a way of making sense of competing priorities
- Think about populations, not institutions or organisational form
- Spend time on identifying the practical opportunities and solutions, not endlessly debating the scale of the challenge

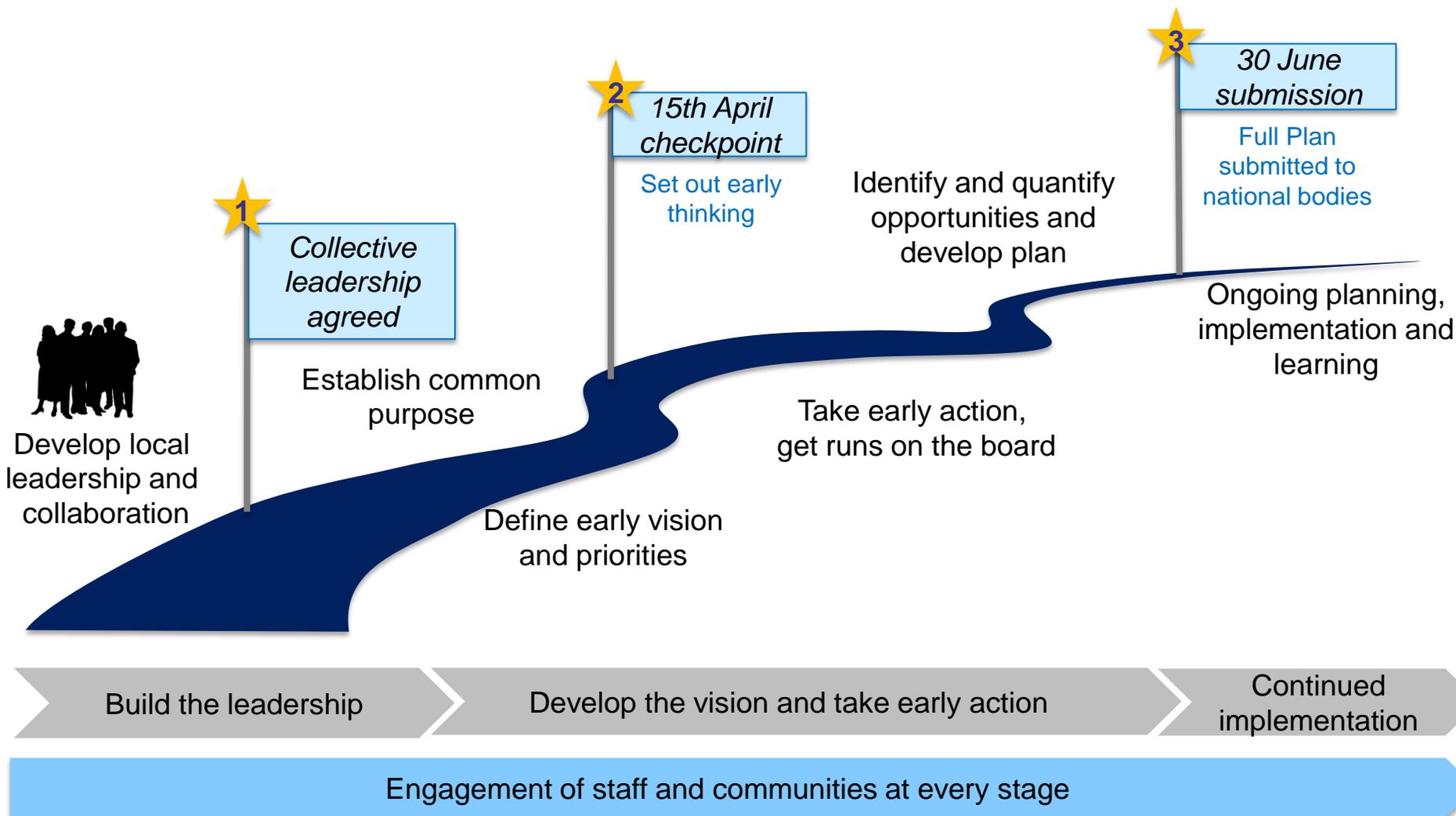
It won't be easy

- There will be technical challenges, e.g.
 - Cross-footprint flows and boundaries
 - Incentives that pull in different directions
- Non-technical challenges, e.g.
 - Building meaningful relationships
 - Freeing people to focus on the long-term
 - Moving quickly, whilst ensuring buy-in

This is an opportunity to build or strengthen relationships

- Across health, social care and local government – but also with patients, communities, staff and the voluntary sector
- STPs aren't all about writing the plan: building energy, relationships and collaborative leadership is even more important
- Trust and ownership is crucial for implementation

Overview of the process



Each STP area is asked to make a submission by 15 April focusing on the following **two questions**:

- a. What leadership, decision-making processes and supporting resources you have put in place to make progress?
- b. What are the major areas of focus and big decisions you will need to make *as a system* to drive transformation?

A short template to fill in and submit to england.fiveyearview@nhs.net is provided in the annex.

Different areas will be starting from different places

- Many areas will have already undertaken considerable amounts of work. Where this is the case, you should of course build on this work – we are not asking areas to redo what they've already done, although there may be gaps to fill.
- National and regional teams will offer greater support to those areas which are just starting out.
 - Page 8 sets out in more detail what to expect by when.
 - Regional teams will contact each area to discuss what support would be helpful.

The April 15th checkpoint: agreeing areas of focus for your STP



A full STP will need to be underpinned by

- an understanding of your current major local challenges against the '3 gaps' (health and wellbeing, care and quality, and finance and efficiency);
- how those challenges are expected to evolve over the next 5 years in a 'do nothing scenario';
- emerging hypotheses for what is driving the gaps and therefore the action needed.

National priorities and local challenges

- The STP process is intended above all to be a process for partners across a footprint to work together to identify, agree and address significant challenges. **It is not a checklist exercise.**
- In order to support this effort, and drawing on commitments from the mandate to NHS England and the shared planning guidance, on the following pages we have set out 10 key areas where we know we need to make progress across the health and care system.
- Reflecting on these 10 areas, for the April submission we would expect footprints to be identifying key local priorities for transformation through the remainder of the STP process.

10 big questions – what are your priorities? (1/2)



Given your local circumstances, where do you need to focus in order to allow you to deliver the priorities for the health and care system by 2020/21?

- 1 How are you going to prevent ill health and moderate demand for healthcare?** Including:
 - A reduction in childhood obesity
 - Enrolling people at risk in the Diabetes Prevention Programme
 - Do more to tackle smoking, alcohol and physical inactivity
 - A reduction in avoidable admissions
- 2 How are you engaging patients, communities and NHS staff?** Including:
 - A step-change in patient activation and self-care
 - Expansion of integrated personal health budgets and choice – particularly in maternity, end-of-life and elective care
 - Improve the health of NHS employees and reduce sickness rates
- 3 How will you support, invest in and improve general practice?** Including:
 - Improve the resilience of general practice, retaining more GPs and recruiting additional primary care staff
 - Invest in primary care in line with national allocations and the forthcoming GP 'Roadmap' package
 - Support primary care redesign, workload management, improved access, more shared working across practices
- 4 How will you implement new care models that address local challenges?** Including:
 - Integrated 111/out-of-hours services available everywhere with a single point of contact
 - A simplified UEC system with fewer, less confusing points of entry
 - New whole population models of care
 - Hospitals networks, groups or franchises to share expertise and reduce avoidable variations in cost and quality of care
 - health and social care integration with a reduction in delayed transfers of care
 - A reduction in emergency admission and inpatient bed-day rates
- 5 How will you achieve and maintain performance against core standards?** Including:
 - A&E and ambulance waits; referral-to-treatment times

10 big questions – what are your priorities? (2/2)

Given your local circumstances, where do you need to focus in order to allow you to deliver the priorities for the health and care system by 2020/21?

- 6 How will you achieve our 2020 ambitions on key clinical priorities?** Including:
 - Achieve at least 75% one-year survival rate (all cancers) and diagnose 95% of cancer patients within 4 weeks
 - Implement two new mental health waiting time standards and close the health gap between people with mental health problems, learning disabilities and autism and the population as a whole, and deliver your element of the national taskforces on mental health, cancer and maternity
 - Improving maternity services and reducing the rate of stillbirths, neonatal and maternal deaths and brain injuries
 - Maintain a minimum of two-thirds diagnosis rate for people with dementia
- 7 How will you improve quality and safety?** Including:
 - Full roll-out of the four priority seven day hospital services clinical standards for emergency patient admissions
 - Achieving a significant reduction in avoidable deaths
 - Ensuring most providers are rated outstanding or good– and none are in special measures
 - Improved antimicrobial prescribing and resistance rates
- 8 How will you deploy technology to accelerate change?** Including:
 - Full interoperability by 2020 and paper-free at the point of use
 - Every patient has access to digital health records that they can share with their families, carers and clinical teams
 - Offering all GP patients e-consultations and other digital services
- 9 How will you develop the workforce you need to deliver?** Including:
 - Plans to reduce agency spend and develop, retrain and retain a workforce with the right skills and values
 - Integrated multidisciplinary teams to underpin new care models
 - New roles such as associate nurses, physician associates, community paramedics and pharmacists in general practice
- 10 How will you achieve and maintain financial balance?** Including:
 - A local financial sustainability plan
 - Credible plans for moderating activity growth by c.1% pa
 - Improved provider efficiency of at least 2% p.a. including through delivery of [Carter Review recommendations](#)

Support for STP areas



Over the next period, we will co-produce and share further support to help develop STPs. We would encourage you to start progressing the work now, and refine in the light of this support:

Support	Description	By when
Library of resources	<ul style="list-style-type: none"> Consolidated resource pack with links to care and quality standards, priorities and policy commitments for 2020 /21 and health and wellbeing indicators to enable Footprints to agree local ambitions to close gaps 	<ul style="list-style-type: none"> March
Finance and efficiency support	<ul style="list-style-type: none"> Financial model/template for footprints to capture the impact of their plans to close the gaps for submission in June 	<ul style="list-style-type: none"> April/May
STP footprint-specific data packs	<ul style="list-style-type: none"> Bespoke data packs for each STP area providing a baseline against key indicators from the CCG Improvement & Assessment framework; key finance and operational performance indicators including CQC ratings, national health and wellbeing indicators and other relevant data 	<ul style="list-style-type: none"> April
Exemplar plan	<ul style="list-style-type: none"> Potential early co- development of a full plan with a leading area to help inform what 'good' looks like 	<ul style="list-style-type: none"> April
"How to" guides for specific priorities & master-classes	<ul style="list-style-type: none"> Concise guides on, e.g. how to implement the cancer taskforce, along with regional roadshows or master-classes 	<ul style="list-style-type: none"> April-May 27 April: North 3 May: London
Development days	<ul style="list-style-type: none"> One-day events with footprint leadership teams across a region to network, share progress and challenges with peers and CEOs of ALBs 	<ul style="list-style-type: none"> 4 May: South 5 May: Mid/East
Leadership support	<ul style="list-style-type: none"> Provision of external support and challenge from independent figures for those STP areas that request it 	<ul style="list-style-type: none"> From April

Key contacts



- If you require any support, please contact your relevant ALB Regional Director.
- For general enquiries and submitting your template, please email england.fiveyearview@nhs.net, copying in your Regional Director.

Annex: Template for the 15 April checkpoint

Please use the following slides for your submission, and remove the earlier slides to keep the pack concise (max 10 slides).

Purpose of this template



This annex presents a simple template, with five sections, that collectively seek to capture:

- The leadership, decision-making and supporting resources you have put in place to progress your STP
- The major areas of focus and big decisions you will need to make as a system to drive transformation

We understand this is an early checkpoint – we don't expect finalised or comprehensive answers at this stage

- Your thinking in some areas will naturally be more advanced than others
- Early hypotheses or potential directions of travel that have not yet been fully signed up to are still helpful
- Please be concise, keeping to 10 slides in total
- The completed template needs to be sent to england.fiveyearview@nhs.net by 5pm on 15 April.

The filled out template will form the basis for discussions at regional development days late April/early May

- The development days will provide an opportunity for:
 - footprints to test out hypotheses and early thinking and exchange lessons learned; and
 - national bodies to understand how STP areas are working together, their early thinking on top priorities and emerging vision, and for local areas to communicate issues and barriers that require national support or action

Please fill in key information details below

Name of footprint and no:

Region:

Nominated lead of the footprint including organisation/function:

Contact details (email and phone):

Organisations within footprints:

Please discuss progress you have made (and any challenges) in the following areas:

- **Collaborative leadership and decision-making.** Please describe what arrangements you have put in place and how they will facilitate rapid progress and meaningful system leadership rather than just individual institutions. Please also give details of how the nominated lead will be supported at a working level e.g. has a programme director been appointed.
- **An inclusive process.** Describe how you are and will be involving patients and the wider community in the development of your STP and—more importantly—in its execution.
- **Local government involvement.** What are the partnership arrangements between local government, NHS commissioners and NHS providers (and others)? How does this fit with existing arrangements such as Health and Wellbeing Boards? If your STP footprint covers organisations under a proposed health devolution footprint how do you propose to manage this if the areas are not coterminous?
- **Engaging clinicians and NHS staff.** Please discuss the role both hospital and community based clinicians and staff will play in shaping and delivering the future NHS in your area.

Please see slide 6 for potential areas of focus for improving health and wellbeing

As you develop your full STP, what are your emerging hypotheses for improving the health of people in your footprint?

These may include:

- Your initial thinking about how to radically upgrade prevention over the next five years.
- The role patients and communities have in mobilising healthier behaviours – and how will you give them greater control.
- How your system will work with local government to deliver prevention and public health improvements.
- Your proposals for improving the health and wellbeing offer the NHS makes to staff in your area and how you will engage other employers, working with local government, on this agenda.

Please see slides 6 & 7 for potential areas of focus for improving care and quality

As you develop your full STP, what are your emerging hypotheses for improving care and quality across your footprint?

These may include:

- The need to invest and support transformation in general practice, with a focus on workforce.
- Ambitions for achieving and maintaining core standards and improving quality and safety.
- Actions you will take on key clinical priorities including cancer, mental health, maternity, learning disabilities and dementia.
- How will you use RightCare to eliminate variation and waste across the health and care economy at pace?
- Developing and implementing new care models at scale to achieve your local ambitions, for example: a simplified and integrated urgent and emergency care system; whole population health models; hospital groups, networks or franchises; health and social care integration
- The role of key enablers, especially workforce and technology, to make the above happen.

It's important that proposed solutions and priorities are linked back to your local challenges

- **This is an opportunity to address areas where footprint partners may previously struggled to make progress on difficult issues**

Section 2c: Improving productivity and closing the local financial gap

Please discuss your emerging thinking in the following areas.

Please set out your current assessment of your footprint's major efficiency and finance challenges, your understanding of the key drivers of those challenges, and the major areas of focus in your STP that will help to address them.

This may include:

- The extent to which your prevention and care model improvement plans will deliver reductions in anticipated levels of demand
- How care and quality and new care model plans will improve provider productivity, both through technical or operational efficiencies but also better resource allocation decisions
- The other big decisions you need to take as a system to return to aggregate balance and longer-term sustainability.

Please note that we do not expect detailed financial modelling at this stage, although you will need this for the final June submission. We will be providing more information soon about support available to develop this.

Instead, we suggest you focus on the big decisions or opportunities you need to take as a system to close the projected financial gap in your area.

Please discuss your emerging thinking on what the key priorities are to take forward in your STP, and why:

- **Describe your main areas of focus**, to address (a) the priorities set out for the NHS in the Five Year Forward View, the mandate and the shared planning guidance, and (b) your own particular local challenges as set out in section 2
- Any **big decisions** you will need to make *as a system* to drive transformation

Please discuss your emerging thinking in the following areas:

- Areas where you would like **regional or national support** as you develop your plans.
- **National barriers** or actions you think need to be taken in support of your STP.
- Areas where you could share **good practice** or where you would like to access expertise or best practice from other footprints.
- Any other **key risks** that may affect your ability to develop and/or implement a good STP.