

Oxfordshire Transformation Board

Date of Meeting: 26 January 2016	Paper No:
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Title of Presentation: A Sustainability and Transformation Plan for Oxfordshire
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Is this paper for	Discussion	<input checked="" type="checkbox"/>	Decision	<input checked="" type="checkbox"/>	Information	
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Purpose of Paper: To provide detail of the system wide 5 year Sustainability and Transformation Plan for Oxfordshire for submission to NHS England at the end of June 2016, outlining the steps to develop the plan and ensure readiness to consult with the public on Oxfordshire's transformation plans for each of the Transformation Boards 9 pillars.
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Action Required: To agree the suggested approach for developing a robust system wide 5 year Sustainability and Transformation Plan for Oxfordshire that describes the scale and pace of transformational change needed to deliver savings and create sustainable services in the community to meet local need, reducing the reliance on hospital based acute care services.

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1. Background

The Transformation Board has made good progress during 2015 in developing the scope and vision for change needed across Oxfordshire to address both current issues and future demand against a backdrop of achieving significant savings and financial constraint in future years.

The storyboard provides a clear rationale for change and the Care Closer to Home model provides a means of scoping the transformational change required for individual service areas at both a county and locality level.

Alongside this the Transformation Board now needs to develop a financial sustainability plan, spanning providers and commissioners, showing how resources will be allocated, the £270m savings will be released and where and when they will be re-invested.

The requirement in the national NHS Planning Guidance, December 2015, for systems to develop a place based 5 year Sustainability and Transformation Plan by end of June 2016 provides us with an opportunity to bring these strands of work together in preparation for public consultation in the second half of this year.

It is likely that NHSE will also require a detailed activity plan. However we are awaiting further STP technical guidance that will specify what is required, later this month.

2. The Five Year Sustainability and Transformation Plan (STP)

Oxfordshire's STP should be our local blueprint for articulating and taking forward, at scale and pace, our ambition for transforming the system and evidence the ways in which we will be working together to deliver the national 'must do's' and Governments Mandate to the NHS through to 2020/21.

It will be an umbrella plan that covers the period between October 2016 and March 2021 and should be our single strategic plan for implementing the governments Five Year Forward View, showing how we will close the health and wellbeing gap, laying out our plans for releasing the £270m savings and achieving and maintaining financial balance and show how we intend to ensure that the people of Oxfordshire have access to the right services in the right place at the right time.

The STP will include a number of different costed delivery plans, reflecting the nine pillars identified by the Transformation Board, each of which might be on different geographical footprints.

Supporting the development of longer term plans the CCG has received a 5 year financial allocation with the first 3 years fixed and indicative allocations for the subsequent 2 years.

During 2015 Oxfordshire has increasingly been developing itself as a system and our plans for devolution are moving forward at pace. Oxfordshire's STP will therefore need to reflect our local commitment to work together as commissioners and providers across both the health and social care system.

The STP should cover all areas of commissioned activity including specialised services, primary medical care, prevention and social care and reflect local agreed health and wellbeing strategies

Individual organisations are required to develop 1 year Operational plans that are in effect the year on year implementation of the overarching STP.

The STP's will unlock access to national Sustainability and Transformational funding and affect the real terms element of growth in CCG allocations from 2017/18 onwards. Meaning that sign off of a robust plan is essential.

The plan should include a powerful vision for the system, and create coherence across the different elements e.g. prevention, self-care and patient empowerment, workforce, digital, new models of care and finance reflecting best practice and national frameworks.

It is essential that the development of the STP evidences strong local engagement, including partners in the community, voluntary sector and the local authority. The plan will need to demonstrate the strength of system leadership locally and the agreed governance structures to deliver system change.

3. Transformation Footprints

In developing our local STP we are asked to consider and agree our planning and/or transformation footprints. NHSE have provided examples of different levels of health and care economies/system footprints categorising them as:

- **Major** – Specialised Commissioning Hubs, Clinical Senates, Strategic Clinical Networks, Local Education and Training Boards (LRTBs)
- **Local** – Systems (including groups of providers, CCG and Local Authority commissioners)
- **Micro** – Individual Health and Wellbeing Boards, SRG's, Local Authorities, CCG's, Providers

Although it is important to identify the most appropriate footprint for our planning purposes there is no right answer and NHSE acknowledge that footprints may adapt over time. It is suggested therefore that the footprints for submission on the 29th January for Oxfordshire should be:

- **Major – Thames Valley** –Clinical Senate and Specialised Provision/Commissioning (could be wider than Thames Valley for OUH)

- **Local/Micro - Oxfordshire** – Transformation Board Health and Social Care System (Provider and Commissioner), HWB, OCCG, OCC, Oxfordshire SRG, OH, OUH

4. New Care Models

There is an expectation that new care models will feature prominently within STPs. In 2016/17 NHSE are asking for expressions of interest in trialling two new specific approaches:

- Secondary mental health providers managing care budgets for tertiary mental health services; and
- The reinvention of acute medical model in small district general hospitals

Local discussions are underway and expressions of interest should be made to NHSE by 29th January 29th 2016.

5. The National ‘must do’s’

The National Planning Guidance, the Governments Mandate to NHS England and the County Councils delivery against nationally set performance criteria and savings targets are the backdrop for developing our longer term plans through to 2020/21.

2016/17 Operational Plans

The NHS has a clear set of plans and priorities to be delivered in 2016/17, that will form part of this year’s operational planning including; the roll out of access to acute hospital services on every day of the week, access to enhanced primary care, a reduction in excess deaths, improvements in out of hours care and access to primary care at weekends and evenings.

Sustainability and Transformation Plan – (2016 – 2021)

Oxfordshire’s STP needs to set out ambitious local plans showing how it will deliver NHS Mandate 2020 goals in the following key areas:

- **Improving local and national health outcomes through better commissioning** addressing areas of poor outcome and inequalities
- **Creating the safest, highest quality health and care service** including; reducing avoidable deaths, roll out of seven day services, improving patient experience and delivering the Independent Cancer Taskforce recommendations
- **Balancing the NHS Budget and improve efficiency and productivity** using the Lord Carter and RightCare tools

- **Maintaining and improving performance against core standards** particularly in A&E, Urgent Care/111 services, ambulance services and waiting times
- **Improving out-of-hospital care**; taking forward new models of care and improvements in primary care, integrating health and social care and closing the gap between people with mental health problems, learning disabilities and autism and the population as a whole
- **Supporting research, innovation and growth** including; improving the uptake of affordable and cost-effective innovations, use of technological solutions and digital records, delivering improvements in the health and wellbeing of our local health and care workforce and contributing to the reduction of the disability employment gap

6. STP Timetable

	Date
Submit proposed STP footprints	29 th January 2016
Applications/Volunteers for Mental Health and small DGH trials	29 th January 2016
Issue of further guidance on STP's	By end of January 2016
Submission of full STP's	End of June 2016
Assessment and Review of STP's (by NHSE, TDA and Monitor)	End of July 2016

7. How we will develop Oxfordshire's STP

Building on the story board and the assignment of leads for key workstreams such as workforce and estates, South Central Commissioning Support Unit (SCCSU) has been engaged to support the process by:

- **In January** undertaking a stocktake and gap analysis of our preparedness for consultation on Oxfordshire's transformation plans for the 9 transformation board pillars, taking into account the type, scale and pace of change needed to shift services safely to a community setting where possible in line with Oxfordshire's 'Care Closer to Home' model.

The output will be a timetabled programme plan, with milestones, that will set out the activities required to address the gaps. A report, including an assessment of the level of capacity/resources required to deliver the programme plan, will be presented to the February Transformation Board. The stocktake is currently underway.

- **In February** make recommendations for how to take forward a 'single' multi professional conversation across Oxfordshire, in localities, to develop our plans for transformation formulating clear plans for each of the pillars, showing how they will be implemented at locality level.

SCCSU are presenting a finance and activity modelling tool to the Transformation Board in January that, if approved, will help with costing the new models of care that arise from the locality discussions. This information could be used to track the £270m savings and re-investment as well as populating our financial sustainability plan.

Our transformational plans will need to be backed by robust evidenced of best practice and delivery of improvements and outcomes both for the submission in June 2016 as well as the consultation with the public.

8. Roles and Responsibilities

As stated above the aim is to manage the development of the STP and preparedness for consultation as one exercise.

The Transformation Board Programme Director working with the CCG Director of Strategy and Transformation (the SRO) and his team will take the lead on planning and leading the overall process, ensuring appropriate stakeholder engagement.

The CCG's Strategy and Transformation function will take the lead on developing and writing the STP document, requesting and/or developing analysis (e.g. health needs, demand and capacity, PESTLE) and contributions from partner organisations.

9. Recommendation

The members of the Transformation Board are asked to:

- Note the national requirement for the NHS to provide a 5 year system wide Sustainability and Transformation Plan by the end of June 2016
- Discuss and agree the initial Transformation Footprints for submission on 29th January 2016
- Note the process for moving forward to a timetabled Programme Plan with clear milestones to achieve a full STP for the Oxfordshire, reflecting our whole system transformation plans, by the end of June 2016 and

ensure that we are ready to consult with the public in the summer of 2016.

- Agree roles and responsibilities as set out in the paper.