

Agenda

Health and wellbeing board

Date: **Tuesday 13 June 2017**

Time: **3.30 pm**

Place: **Malvern Hills Science Park, Geraldine Road, Malvern,
WR14 3SZ**

Notes: Please note the time, date and venue of the meeting.

For any further information please contact:

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If you would like help to understand this document, or would like it in another format or language, please call Ruth Goldwater, Governance Services on 01432 260635 or e-mail councillorservices@herefordshire.gov.uk in advance of the meeting.

Agenda for the Meeting of the Health and wellbeing board

Membership

Chairman

Councillor PM Morgan
Dr D Horne

Herefordshire Council
NHS Herefordshire CCG

Chris Baird
Simon Hairsnape

Interim Director of Children's Wellbeing
NHS Herefordshire Clinical
Commissioning Group

Diane Jones MBE

NHS Herefordshire Clinical
Commissioning Group

Councillor JG Lester

Herefordshire Council

Jo Melling

NHS England

Martin Samuels

Director for Adults and Wellbeing

Ian Stead

Healthwatch

Prof Rod Thomson

Director of Public Health

Agenda

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| PUBLIC INFORMATION | 5 - 6 |
| 1. APOLOGIES FOR ABSENCE To receive apologies for absence. | |
| 2. NAMED SUBSTITUTES (IF ANY) To receive any details of members nominated to attend the meeting in place of a member of the health and wellbeing board. | |
| 3. DECLARATIONS OF INTEREST To receive any declarations of interest by members in respect of items on the agenda. | |
| 4. QUESTIONS FROM MEMBERS OF THE PUBLIC To receive questions from members of the public relating to matters on the agenda. (Questions must be submitted by 5pm two clear working days before the day of the meeting (in this case, by 5pm on Thursday 8 June 2017). | |
| 5. SUSTAINABILITY AND TRANSFORMATION PARTNERSHIP To note the development of the arrangements from a focus on preparation of a sustainability and transformation plan into establishment of a sustainability and transformation partnership (STP), to influence the further work on the plan in the light of national guidance and feedback from local public engagement, and to ensure local implications are addressed. | 7 - 12 |

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| Meeting: | Health and wellbeing board |
| Meeting date: | 13 June 2017 |
| Title of report: | Sustainability and transformation partnership |
| Report by: | Director for adults and wellbeing |

Classification

Open
Report.

Exempt

The appendix is exempt by virtue of paragraph 3 of the Access to Information Procedure Rules set out in the constitution pursuant to Schedule 12A Local Government Act 1972, as amended.

Key decision

This is not an executive decision

Wards affected

County-wide

Purpose

To note the development of the arrangements from a focus on preparation of a sustainability and transformation plan into establishment of a sustainability and transformation partnership (STP), to influence the further work on the plan in the light of national guidance and feedback from local public engagement, and to ensure local implications are addressed.

Recommendation(s)

THAT the board:

- a) consider whether the proposed revisions to the STP plan show due regard to the Herefordshire health and wellbeing strategy and whether the resulting document is likely to fit local needs, and make comments on these issues for consideration by the STP for incorporation in the next version of the plan to be made public;**
- b) consider those parts of the emerging refreshed plan that impact on residents/services in both Herefordshire and Worcestershire, and highlight aspects for consideration by the STP as it develops its plan; and**
- c) identify aspects of the STP plan where common approaches are intended**

across both counties that may have knock-on effects for other organisations, and seek assurance from partner organisations that these are being appropriately taken into account within Herefordshire.

Alternative options

- 1 The health and wellbeing board could decide not to consider or comment upon the emerging refreshed STP plan: STPs are national policy and all NHS organisations are required to participate in their local STP and cooperate to produce a joint plan. It is the statutory duty of the health and wellbeing board to test whether the plans developed by local health and social care organisations have regard to both the joint strategic needs assessment and the joint health and wellbeing strategy. Since the STP plan will represent the foundation of the local health plan, if the health and wellbeing board did not consider or comment on the emerging STP plan, it could be viewed as not meeting its statutory duties.

Reasons for recommendations

- 2 Following a period of public engagement, and consequent to national guidance being published in March 2017 in Next Steps on the NHS Five Year Forward View, the Herefordshire and Worcestershire STP has been refreshing its plan, which is intended to be published in late June. Consideration of the draft plan allows the health and wellbeing board to seek assurance that the plan has regard to the Herefordshire health and wellbeing strategy and the joint strategic needs assessment.

Key considerations

- 3 On 22 December 2015, NHS England published the NHS Planning Guidance 2016/17-2020/21, setting out the mandatory planning requirements for all NHS organisations. This included a requirement for NHS organisations to come together across defined geographical areas to prepare a local health and social care system sustainability and transformation plan. While the guidance is mandatory only for NHS bodies, councils were strongly encouraged to participate actively, given the interdependence between health and social care and their duties to cooperate. Indeed, since the basic philosophy of the plan was that long-term sustainability could be secured only through simultaneous achievement of the triple aim of population wellbeing, high quality service delivery, and efficient use of resources, councils were widely considered to have a critical role, given their wider economic and social roles, beyond social care alone.
- 4 The programme is intended to provide the framework for whole system leadership and collaboration across the footprint of Herefordshire and Worcestershire. This will link into a system-wide strategic direction and mechanism to deliver the health and wellbeing strategy, the shared children and young people's plan, the Better Care Fund plan, the council's adults wellbeing plan, and the Clinical Commissioning Group's (CCG) commissioning strategies. In turn, this will drive improved wellbeing for residents, coordinating activities across the council and the CCG, and their voluntary sector partners. It will enable the council and the CCG to engage with wider

Further information on the subject of this report is available from
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public sector partners in a coordinated manner to increase efficiency and value for money from the available resources.

- 5 The draft plan was considered by the health and wellbeing board at its meeting on 19 October 2016 and a number of recommendations made for inclusion. The final plan was then submitted to NHS England and published in November 2016.
- 6 An extensive process of public engagement was undertaken during the period from December 2016 to February 2017. Supported by active publicity through traditional means and social media, this included attendance at 25 engagement events within Herefordshire and resulted in 478 surveys being completed by people across the county. Similar activity was undertaken in Worcestershire. The resulting report was published on the STP engagement website: <http://www.hacw.nhs.uk/yourconversation/>. This provided summaries of the engagement activity in each county and the issues raised through these processes.
- 7 Key common themes emerging from this engagement work included:
 - Residents generally supported the idea of local hubs, able to deliver a wide range of healthcare services within the community or in people's homes.
 - Residents were often concerned that access to GPs was not straightforward and favoured approaches to encourage people to see other professionals instead, where appropriate.
 - Residents favoured approaches that would keep accident and emergency services focused on those people who really needed them, with others directed to more appropriate services including access to primary care.
 - Residents were divided in their views over whether greater use should be made of technology as an alternative to face-to-face care.
 - Those residents without access to private transport expressed concerns about their ability to access services.
 - Residents were unsure over the number of beds required and the balance between acute hospitals and community hospitals, and wanted more information on community service redesign.
 - Carers felt they needed more support if more was going to be asked of them.
 - Residents were keen to be involved in suggesting ways in which the efficiency of services could be improved, with a number of ideas put forward.
- 8 In March 2017, NHS England published Next Steps on the NHS Five Year Forward View. This laid down that the existing informal sustainability and transformation arrangements were to become sustainability and transformation partnerships (STPs), as a step towards the formation of integrated or 'accountable' health systems. These new forums are intended to enable health leaders to plan services that are safer and more financially sustainable, and are expected to engage actively with local residents. NHS England has stated that STPs will operate according to local context, but there will be increasing nationally-defined requirements in terms of governance, programme management capability, and coverage. NHS England has stated that resources and performance will increasingly be reported at STP level.

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- 9 In order to provide a firm basis for this next phase in the development of the STP, the plan submitted in October 2016 is being reviewed in the light of the feedback received during the public engagement process earlier in the year, and updated to reflect both the latest financial and performance information, especially as affected by the contracts signed between NHS organisations for the two-year period from April 2017. This process remains in hand, such that no full text is available, though representatives from the STP Programme Management Office have provided an outline of the key issues to members of the board. Due to restrictions applied nationally to the NHS in the period before the general election on 8 June, the NHS will not publish working drafts of the plan. The final text will be published later in June, when it will be taken through the governing bodies of the local CCGs and Trusts.
- 10 In considering the issues being taken into account in refreshing the STP plan, members of the health and wellbeing board will wish to bear in mind the following key points:
- All statutory health and social care organisations are legally required to have regard to the health and wellbeing strategy and the joint strategic needs assessment adopted by the local health and wellbeing board. Members of the board will wish to consider the extent to which the refresh of the STP plan achieves this with regard to the Herefordshire strategy.
 - From an NHS perspective, the STP has become the centrepiece of health and social care planning, and forms the basis of NHS planning and delivery for the next five years. However, it should be noted that, at present, STPs have no statutory basis and accountability remains with the individual bodies. This is especially the case for councils with regard to their social care and public health functions. Members of the board will wish to consider the extent to which the STP plan has knock-on consequences for the plans of the local statutory bodies and seek assurance from them that they have taken these into account in their own planning.
 - One of the core planks of the STP approach is the belief on the part of NHS England that many of the barriers preventing achievement of the triple aim of population wellbeing, high quality service delivery and financial sustainability can be addressed more effectively through action above the level of a single county. In the future, this may require some services to be planned or managed at the level of the STP (or higher), as currently happens for services commissioned by NHS England Specialised Commissioning. Members of the board will wish to consider the consequences of any such proposals for the population of Herefordshire. There are currently no specific proposals to centralise services across the STP, but over the course of the next few years a number of key services will be reviewed to consider future sustainability. Any specific proposals that emerge will take into consideration the importance of place and local services, will be mindful of the public feedback around the impact of travel times and would be subject to formal public consultation.

Community impact

- 11 The STP seeks to optimise the impact of public sector resources in order to improve the outcomes for Herefordshire residents.

Equality duty

- 12 The STP plan identifies how support is provided to vulnerable people with a range of tailored services.
- 13 The recommendations support the Public Sector Equality Duty, under section 149 of the Equality Act 2010, which are to:
 - Eliminate discrimination, harassment and victimisation and any other conduct that is prohibited by or under the Act;
 - Advance equality of opportunity between people who share a relevant protected characteristic and people who do not share it;
 - Foster good relations between people who share a relevant protected characteristic and those who do not share it.

Financial implications

- 14 There are no direct financial implications. The STP plan is intended to set out the strategic direction of travel, which will guide the development of local plans by individual organisations. Financial decisions will be made through governance of those local plans.

Legal implications

- 15 There is no legal duty to prepare an STP plan, but guidance issued by NHS England requires all NHS organisations to be actively involved in preparing such a plan, with strong encouragement on councils to be engaged.
- 16 With regard to the duty to consult, councils and CCGs have a general duty to consult on significant changes to services as well as specific duties under equality legislation. The guiding principles are fairness and proportionality, taking into account the extent of the change and the number of people affected. The Gunning principles outline that consultation must take place when the proposal is at a formative stage, sufficient reasons must be put forward for the proposal to allow for intelligent consideration and response, adequate time must be given for consideration and response, and the product of consultation must be conscientiously taken into account.

Risk management

- 17 A full risk register is maintained by the STP Programme Management Office and this is reviewed regularly by the STP Programme Board, which includes senior representatives from all partner organisations.

Consultees

- 18 The STP plan is being refreshed on the basis of feedback gained through an extensive public engagement process, undertaken between December 2016 and February 2017 – the report of that activity has been highlighted above. The revised STP plan will then be considered by the governing bodies and boards of the local NHS bodies and adopted by them. Any significant service changes will be subject to formal public consultation. These processes will be subject to the usual consideration by the adults and health scrutiny committee.

Appendices

Appendix A - STP update, exempt from publication as identified above (to follow)

Background papers

None identified