

Meeting:	Health and wellbeing board
Meeting date:	28 March 2017
Title of report:	Integration: Sustainability and transformation plan (STP) delivery plan
Report by:	Director of transformation for One Herefordshire; and Director for adults and wellbeing

Classification

Open

Key decision

This is not an executive decision.

Wards affected

Countywide

Purpose

To provide an update on joint working across the Herefordshire health and wellbeing system

Recommendation(s)

That the board:

- a) consider whether the STP and One Herefordshire work is consistent with the Health & Wellbeing Strategy;
- b) make recommendations as to how the STP and One Herefordshire might be made to better align with the goals in the Health and Wellbeing Strategy; and
- c) determines how it would wish to be involved in the STP and One Herefordshire processes going forward.

Alternative options

1. There are no alternative options. The STP is mandated by NHS England, so all the NHS organisations in Herefordshire (and Worcestershire) are required to be actively involved.

Reasons for recommendations

2. The recommendations enable the board to fulfil its role to:
 - a) Review whether the commissioning plans and arrangements for the NHS, public health and social care (including better Care Fund submissions) are in line with and have given due regard to the health and wellbeing strategy; and
 - b) Report formally to the council's executive, the Herefordshire Clinical Commissioning Group, and the NHS Commissioning Board if commissioning plans affecting Herefordshire have not had adequate regard to the health and wellbeing strategy.

Key considerations

3. The Herefordshire and Worcestershire draft STP submission has previously been presented to the Health and Wellbeing Board. These were fed into the drafting process and influenced the revision of the document.
4. It was submitted to NHS England (NHSE) in October 2016 and published in November 2016. A period of STP wide public engagement on the plan and the high level themes within it took place between December 2016 and February 2017.
5. The findings of the public engagement are not available at the time of writing, but will be considered by the STP partnership board and used to update the plan in April 2017, alongside any further NHSE guidance.
6. The updated plan will be presented to a simultaneous meeting of the Herefordshire and Worcestershire health and wellbeing boards in May, and considered by the health scrutiny committees in each county to a similar timescale.
7. CCG governing bodies across Herefordshire and Worcestershire will reconsider the refreshed plans in public sessions in May 2017.
8. The One Herefordshire Transformation Programme is the delivery vehicle for the STP in Herefordshire.
9. In the context of a national drive towards integration it is based upon partnership working across the Local Authority (LA), Clinical Commissioning Group (CCG), Wye Valley NHS Trust (WVT), 2gether NHS Foundation Trust (Mental Health) and Taurus GP Federation.
10. One Herefordshire has developed a "Design Logic Model" that articulates its key aims and intended outcomes, and the underpinning work programs and activities to deliver them. This was developed within the context of the Herefordshire Health and Wellbeing Strategy.
11. It has also developed and implemented a delivery structure across the partner organizations:
 - a. From a system perspective the initial current focus is on developing Out of Hospital Care to provide coordinated joined up services that maximize independence in partnership with patients, the public and the voluntary and community sector (VCS). This is being developed and delivered by the Integrated Care Alliance Provider Board, chaired by the Director for adults and wellbeing.
 - b. From a commissioner perspective the LA and CCG already have an integrated strategy in the form of the Children and Young Peoples Plan,

Further information on the subject of this report is available from
Dr Alison Talbot-Smith on Tel (01432) 260618

supported by a joint commissioning post across the two organizations. We are developing a similar approach for adult health and social care services, which will act as the strategic context for, and be underpinned by, the Better Care Fund (BCF).

12. It should be noted that stakeholder, patient and public engagement remain at the heart of the One Herefordshire approach, to ensure that co-production is embedded within our transformation programme. This includes two separate engagement/consultation activities within Herefordshire:
 - a. A formal public consultation on [7 day primary care services and the Walk-In-Centre](#) - already commenced, and which will end on 24 April 2017.
 - b. A public engagement process on adult community services – to take place in Spring/Summer 2017.
13. We have also started discussions with the VCS to develop our approach to embedding them within this work.
14. Development of the One Herefordshire programme will remain an iterative process to ensure our transformation agenda continues to evolve, rather than being fixed at a single point in time. This will include a review and refresh following a recent One Herefordshire “summit” hosted by the NHS Commissioners Confederation and the Local Government Association on the 3rd March.
15. The revised 5 Year Forward View (5YFV) Delivery Plan is also due shortly, and is expected to set out a clearer direction for the STP and the NHS approach to commissioning and delivery.

Community impact

16. The STP and the One Herefordshire Transformation Program seek to optimize the impact of public sector resources in order to improve the outcomes for Herefordshire residents.

Equality duty

17. Reducing inequalities is a specific aim of the One Herefordshire Transformation programme, and is included within the Design Logic Model.

Financial implications

18. There are challenging financial savings targets across both commissioners and providers within Herefordshire. The STP and the One Herefordshire Transformation Program seek to identify where we can use our resources collectively more efficiently to improve outcomes, improve productivity, and/or reduce costs.

Legal implications

19. None arising from the recommendations – all the organisations are participating in the STP and One Herefordshire within the bounds of their statutory accountabilities.

Risk management

20. Not applicable at this point – any decisions regarding the development of collective risk

management will require consideration through the usual governance process of each organisation.

Consultees

21. Not applicable at this point – but consultees for the STP and One Herefordshire approaches include each organisation, Cabinet, GP Parliament, health scrutiny committees, Healthwatch, patients and the public.
22. A presentation was made to the health and social care overview and scrutiny committee in December 2017 regarding the 7 day primary care and walk-in centre consultation. The committee has not yet received a formal update on this.

Appendices

Appendix 1 - presentation

Background papers

None identified.