

Somerset Sustainability and Transformation Plan

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1. Summary

- 1.1. The Somerset STP has been developed jointly by Somerset Clinical Commissioning Group, Somerset County Council, Somerset Partnership NHS FT, Yeovil District Hospital NHS FT and Taunton and Somerset NHS FT and was launched in November 2016. It sets out a shared vision for reforming health and social care to address the challenges of the rising needs of our population, changing demographics and increasingly stretched resources.
- 1.2. Since the launch, the STP Programme Executive Group has undertaken a prioritisation process to identify those projects set out in the original submission which, if tackled first, would have the greatest immediate impact, recognising the need to ensure that everything we do now will help us deliver the wider vision for transformed and sustainable health and care services across Somerset.
- 1.3. The Somerset STP was subject to a stocktake by NHS England and NHS Improvement in September 2017. This identified that further urgent work needs to be done to improve the financial and sustainability position across the Somerset health economy in 2017/18 to provide a platform for transformation in the coming years.
- 1.4. The next phase of the STP is to take forward priority schemes to stabilise the financial position. Alongside this Somerset Clinical Commissioning Group and Somerset County Council is developing a Clinical Commissioning Strategy which will set out plans to deliver transformation, working with health and social care professionals, patients, service users and the public to develop new models of care that are effective and sustainable.

2. Issues for consideration / Recommendations

- 2.1. Scrutiny is asked to note the update on developing the STP

3. Background

- 3.1. NHS England challenged the health and care system to develop a Sustainability and Transformation Plan (STP). This five-year forward view is intended to describe the key priorities for an area, describe the challenges that fit within the system, define the priorities for transformation going forward and address any financial gap within the NHS system within that time period.

- 3.2.** The demands on the NHS and social care are increasing, partly because there are more people who are living longer with more complex health problems such as dementia, diabetes and high blood pressure, but also because of the increasing cost of new medicines and treatments. Public demand for health and social care services is constantly growing and the only way to manage this is by thinking as one single health and social care system – rather than as individual organisations – working with people, carers and communities.
- 3.3.** The STP has identified as its focus the following key aims to close the current health and wellbeing, quality and financial gaps:
- **Focusing on prevention to develop a sustainable system** - encouraging and supporting everyone in Somerset to lead healthier lives and avoid getting preventable illnesses
 - **Redesigning out of hospital services** – to enable us to move care, where appropriate, out of hospital beds and into people’s homes wherever possible, providing care designed specifically for each patient’s needs, supporting faster recovery and, in many instances, avoiding the need to go into hospital in the first place
 - **Addressing the problems of sustaining acute hospital care** – reviewing acute care services and increasing the joint working between the hospitals to ensure that urgent and planned care services that rely on specialist skills can be sustained
 - **Driving financial improvement across the system over the next two years** – sharing financial risk across the health system to drive collaboration and improvement and making sure all the back office functions are as efficient as possible
 - **Creating an accountable care system** – with a strategic commissioning function where the NHS and social care commissioners work together under a single commissioning arrangement to secure outcomes and pool budgets; and an Accountable Provider Organisation where services are delivered by a provider, or group of providers (through a single governance structure), who have agreed to take accountability for all care and care outcomes for the population of Somerset
- 3.4** The stocktake in September identified that the STP to date has:
- Delivered a significant reduction in Delayed Transfers of Care with further plans
 - Developed and implemented a new ‘Home First’ system to improve discharges from acute hospitals
 - Developed and begun recruitment to a Psychiatric Liaison Service, supporting patients with mental health issues in acute hospitals
 - Successfully started a Digital Exemplar (TST)
 - Seen the establishment of a GP Provider Board to represent primary care more effectively in the health system
- 3.5** However, the stocktake also concluded that the STP has:
- Not taken forward development and implementation of other new models of care quickly enough
 - Struggled to undertake wider transformational change

- Not delivered the scale of change arising from the South Somerset Vanguard that was anticipated
- Achieved limited public engagement

The system also now has a deteriorating financial position that has to be stabilised this financial year.

3.6 The STP has implemented core actions to address the findings of the stocktake. These are:

- A system design board will oversee the completion of the joint commissioning health and care strategy, including the forward financial plan, prior to the end of December 2017
- A turnaround action team will be formed within the system to deliver key in year actions to continue to mitigate risks
- System-wide workstreams have been established to take forward key priority areas

4. Consultations undertaken

4.1. A range of engagement and information events were held prior to and following the launch of the STP.

4.2. The STP has established a 'People's Panel' comprised of representatives from a range of patient and public representation groups, including Healthwatch Somerset, Carers Voice, Patient Participation Groups and Somerset Users Engagement Group. The Panel met in September to agree its role and areas of focus. It will meet again in January 2018 to support the development of the joint commissioning strategy.

4.3. The STP has also identified a significant number of patient and public representatives to support individual workstreams and the STP held two workshops in September to provide guidance and support around co-production.

4.4. The joint commissioning strategy and any significant service changes arising from it will be subject to a formal consultation with people, families and communities across Somerset.

5. Implications

5.1. The STP identifies a potential cumulative deficit within the region of £600million in 2020/21 if we do nothing differently.

5.2. Any future financial implications will be brought back for consideration. It is however anticipated that the implementation of the STP will result in considerable financial efficiencies to the Somerset health and care budgets