

PLYMOUTH CITY COUNCIL

Subject:	Sustainability and Transformation Plan (STP) Wider Devon
Committee:	Cabinet
Date:	6 December 2016
Cabinet Member:	Cllr Lynda Bowyer
CMT Member:	Carole Burgoyne (Strategic Director for People)
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Ref:	
Key Decision:	No
Part:	I

Purpose of the report:

This report provides an update on the progress of the development of the Sustainability and Transformation Plan (STP) for Wider Devon. The STP is a strategic plan that covers the whole of wider Devon, including Plymouth, Devon and Torbay. The three top tier Local Authorities, two Clinical Commissioning groups (NEW Devon CCG and South Devon and Torbay CCG) and all the organisations covered by these CCGs are included in this footprint.

Partners across the wider Devon health and care community are united in a single ambition and shared purpose to create a clinically, socially and financially sustainable health and care system that will improve the health, wellbeing and care of the populations we serve.

Context:

The NEW Devon CCG area has been part of a “Success Regime” since 2015 and, with South Devon and Torbay, both CCGs have come together to form a single strategic planning footprint with the above Local Authorities in order to address together a common set of significant financial and service challenges around health and care. The STP provides information from the original Case for Change which was published in February 2016. The STP further describes the priorities for the next 5 years and includes how these link to the Five Year Forward View published by NHS England.

The STP highlights the significant potential funding gap in health and social care funding over the next five years. If no action is taken the Devon STP footprint will be £557m in debt by 2020/21 across the health and social care system. This includes the Local Authority adult and children’s social care gap across the whole footprint. The plan includes details about how an analysis will be undertaken to ensure that resources are re-allocated to better meet the greatest needs of the population. The analysis of CCG spend indicates sizable inequities in resource distribution across the wider Devon system. It highlights lower levels of spend in our more deprived areas, particularly in parts of Plymouth and on mental health care.

Governance arrangements have been put in place to ensure the plan is delivered, they are detailed in Appendix I of the plan. The Collaborative Board is attended by the Leader and Chief Executive

and there have been a number of meetings across wider Devon involving Overview and Scrutiny Members from all three Local Authorities, officers from across the Council are engaged in all relevant meetings to develop and deliver the plan. The plan highlights the significant work undertaken to develop a strong ethos of system-wide working.

In Plymouth the innovative work to create an Integrated Fund with NEW Devon CCG to deliver health and wellbeing services across the city and the development of the Integrated Health and Care Community Provider with Livewell Southwest are good examples of this collaboration and system working.

The Corporate Plan 2016 - 19:

The STP and the Council's approach as recommended in this report fully reflect the values and vision set out in the Corporate Plan. The seven priority areas in the STP map strongly across the Corporate Plan's themes.

Implications for Medium Term Financial Plan and Resource Implications: Including finance, human, IT and land:

A section 75 agreement is in place across Plymouth City Council and NEW Devon CCG which covers the integrated fund of £462m, this includes the whole of the People Directorate budget and the Public Health commissioning budget. Any changes proposed across the Plymouth area will be considered in the context of the Integrated Fund and will be brought to Cabinet and Overview and Scrutiny for consideration. The Plymouth Integrated Fund is managed and monitored through both the Council's and the NEW Devon CCG's financial management frameworks.

The Council's Adult Social Care staff were transferred to Livewell Southwest on 1 April 2015 to create the integrated health and care community provider and implications for social care will be brought to the Cabinet and Overview and Scrutiny for consideration.

Other Implications: e.g. Child Poverty, Community Safety, Health and Safety and Risk Management:

Any implications will be considered as the proposals in the STP plan are developed and will be subject to appropriate oversight and scrutiny.

Equality and Diversity:

Has an Equality Impact Assessment been undertaken? No

An equality impact assessment will be undertaken as proposals are developed across the wider Devon STP

Recommendations and Reasons for recommended action:

1. Cabinet are requested to note the attached version of the Sustainability and Transformation Plan for Wider Devon and the engagement and involvement from members and officers across the Council.
2. Cabinet are requested to note the proposal to undertake a comprehensive analysis of the financial inequity across Devon which has implications for funding in Plymouth and that a further update will be brought to Cabinet when this work is complete.

Alternative options considered and rejected:

None – it is essential that the Council is involved as a partner in the development and implementation of the STP

Published work / information:

[Sustainability and Transformation Plan \(STP\) Wider Devon
NHS Shared Planning Guidance 2016/17 – 2020/21](#)

Background papers:

Title	Part I	Part II	Exemption Paragraph Number						
			1	2	3	4	5	6	7

Sign off:

Fin	DJN 1617 .47	Leg	DVS 2695 7	Mon Off		HR	DA- HR2 4.11. 2016	Assets		IT		Strat Proc	
Originating SMT Member Carole Burgoyne													

Introduction

- 1.0 In December 2015, the NHS shared planning guidance 16/17 – 20/21 outlined a new approach to help ensure that health and care services are built around the needs of local populations. To do this, every health and care system in England were required to produce a multi-year Sustainability and Transformation Plan (STP), showing how local services will evolve and become sustainable over the next five years – ultimately delivering the Five Year Forward View vision of better health, better patient care and improved NHS efficiency.
- 2.0 There was a requirement to deliver plans that were based on the needs of local populations, local health and care systems came together in January 2016 to form 44 STP ‘footprints’. The health and care organisations within these geographic footprints are working together to develop STPs which will help drive genuine and sustainable transformation in patient experience and health outcomes for the longer term. The footprints had to be locally defined, based on natural communities, existing working relationships, patient flows and take account of the scale needed to deliver the services, transformation and public health programmes required, along with how they best fit with other footprints. The footprint which includes Plymouth in is the Wider Devon footprint which covers Plymouth, Devon and Torbay.
- 3.0 The latest draft of plans to reshape health and care services in Devon, Plymouth and Torbay by 2021 was released on 4 November 2016.
- 4.0 The Wider Devon Sustainability and Transformation Plan sets out ambitious plans to improve health and care services for people across Devon in a way that is clinically and financially sustainable. Health and care organisations as well as the three upper tier Local Authorities across Devon have been working together to create the shared five year vision to meet the increasing health and care needs of the population, while ensuring services are sustainable and affordable.
- 5.0 The STP provides the framework within which detailed proposals for how services across Devon will develop between now and 2020/21. A key theme throughout the STP is an increased focus on preventing ill health and promoting people’s independence through the provision of more joined up services in or closer to people’s homes. Seven priority areas have been identified as key programmes of work:
 - Ill health prevention and early intervention
 - Integrated care model
 - Primary care
 - Mental health and learning disabilities
 - Acute hospital and specialist services
 - Increasing service productivity.

- Children and young people

6.0 The aspiration in the plan is clear stating ‘ We will take a place based approach which links health, education, housing and employment to economic and social wellbeing for our communities through joint working of statutory partners and the voluntary and charitable sectors’. This is aligned to the Place based approach this Council has taken through the Plymouth Plan and its integrated approach to commissioning services for the health and wellbeing of the population.

7.0 The Case for Change highlights a number of reasons why this work is necessary:

- People are living longer and will require more support from the health and care system. In excess of 280,000 local people (23% of the population), including 13,000 children, are living with one or more long term conditions
- We need to respond better to the high levels of need and complexity in some parts of the population
- Some services such as stroke, paediatrics and maternity are not clinically or financially sustainable in the long term without changes to the way they are delivered across Wider Devon
- There is a difference of 15 years in life expectancy across wider Devon and differences in health outcomes – or ‘health inequalities’ – between some areas, particularly Plymouth
- Spending per person on health and social care differs markedly between the locality areas and is 10% less in the most deprived areas
- Mental health services are not as accessible or as available as they need to be which drives people to access other forms of care which don’t always meet their needs. People with a mental health condition have poorer health outcomes than other groups
- There is an over-reliance on bed-based care. Every day over 600 people in Wider Devon are medically fit to leave hospital inpatient care but cannot for a variety of reasons
- The care home sector is struggling to meet increasing demand and complexity of need
- Almost a quarter of local GPs plan to leave the NHS within 5 years and there are significant pressures on primary care services. Some other care services are particularly fragile due to high levels of consultant, nursing, social work or therapy vacancies
- Local health and social care services are under severe financial pressure, and are likely to be £557million in deficit in 2020/21 if nothing changes

8.0 The STP also clarifies the funding gap if no action is taken and identifies the need to shift resources. It states : ‘We will be responding to our analysis of what people need by re-allocating resources to better meet the greatest needs of the population e.g. through shifting our resources out of hospital, reducing the amount spent on unnecessary bed-based care, improving efficiency and reinvesting in more innovative, integrated care models including investing in community assets that do more to prevent ill health, keep people out of hospital, treat them effectively when needed and enable them to recover rapidly and to stay in their own homes for as long as possible.’ In the STP there are statements about how this will be achieved:

- The return to clinical and financial sustainability will be achieved by available resources being distributed optimally to meet population need by the end of the programme.
- The approach to the transformation of care, which is underpinned by population need, will determine and drive resource distribution going forward.
- The analysis of CCG spend which indicates sizable inequities in resource distribution across the wider Devon system is addressed. The fact that it highlights lower levels of spend in our more deprived areas, particularly in parts of Plymouth, and on mental health care is addressed.

A further, more comprehensive analysis will be undertaken which will include sources of funding – primary care, specialised commissioning and provider deficit support - not included in the initial analysis to confirm the scale of the inequities to be addressed, and the output will be incorporated into the financial strategy to ensure our pathway to financial sustainability includes achievement of equitable population and care group resourcing.

9.0 All of the organisations included in the Wider Devon STP footprint are taking the plan to their respective Governing Bodies for NHS organisations and to Cabinet for Local Authorities. The Overview and Scrutiny Panels across the three upper tier Local Authorities are also involved in the scrutiny of the plan and any specific changes that are proposed.

10.0 The STP is an important document as it will shape the future of health and care services across Plymouth, Devon and Torbay for the next 5 years. It is essential that Members are fully engaged in the development and implementation of the plan. There is an opportunity now, working as a single system, to build on the work already undertaken in Plymouth to create One System, One Budget which created an integrated fund of £462m net, a cradle to grave and prevention to acute fund which enables the Council to commission services with NEW Devon CCG to meet the needs of our population. A fully integrated community health and care provider, Livewell Southwest is now established to deliver services to the population of Plymouth which meet their needs.

