

Bristol City Council People Scrutiny Commission, North Somerset Health Scrutiny Committee and South Gloucestershire Health Scrutiny Committee meeting in common

**1<sup>st</sup> December 2016**

**Report of:** Robert Woolley, Chief Executive University Hospitals Bristol NHS Foundation Trust

**Title:** Sustainability & Transformation Plan (STP) for Bristol, North Somerset and South Gloucestershire

**Ward:** City Wide

**Officers Presenting Report:** Robert Woolley, Chief Executive University Hospitals Bristol NHS Foundation Trust (\* other attendees to be confirmed)

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## **RECOMMENDATION**

- Note the STP in its current stage of development as the basis for further detailed work leading to implementation of specific proposals
- Consider the preferred approach to receiving further updates as this work is progressed

### **Summary**

The purpose of this report is to receive the Sustainability and Transformation Plan for Bristol, North Somerset & South Gloucestershire

### **The significant issues in the report are:**

The local STP is being organised across three broad, interrelated themes

- Prevention, early intervention and self-care
- Integrated primary and community care
- Acute care collaboration

This work is being supported by a number of enabling work-streams particularly including workforce, digital and finance

The STP in its current stage of development includes; a shared assessment of the service and financial challenges facing the local health and care system, a summary of the case for change and our vision for working together and working differently to meet this challenge.

Following a 'checkpoint' review by NHS England, the STP will now be progressed leading to the development of specific plans and proposals.

## Consultation

1. The development of the STP to date has been undertaken with reference to existing information on people's view of local health services. This includes; feedback through public engagement activities, local surveys and local health scrutiny committees, and information collated from 'friends and family' test data, patient complaints and Care Quality Commission reports.

There will be opportunities for local people, patients and carers, and other stakeholders to get involved and have their say in the development of specific plans and proposals, and where a significant change is involved there will also be formal public consultation before changes are made.

## Context

2. Following on from the publication of the Five Year Forward View for the NHS in England, the development of Sustainability and Transformation Plans (STPs) are a new approach to planning health and care services across over the next 5 years.

Local organisations are required to work together to develop a shared understanding of the challenges and to agree joint plans for addressing these.

The principal aims are to:

- Improve the health and wellbeing of local people
- Improve the quality of local health and care services
- Deliver financial stability and balance throughout the local health care system

Locally, *Bristol, North Somerset and South Gloucestershire* (BNSSG) are working together as one of 44 agreed local areas across the UK.

The initial development of the local STP has involved 15 local organisations responsible for planning and providing your health and social care services (see table below).

### **Table: Local STP partners for Bristol, North Somerset & South Gloucestershire**

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| <ul style="list-style-type: none"><li>• Bristol City Council, North Somerset Council, South Gloucestershire Council</li><li>• Bristol CCG, North Somerset CCG, South Gloucestershire CCG</li><li>• North Bristol NHS Trust, University Hospitals Bristol NHS Foundation Trust, Weston Area NHS Health Trust, South West Ambulance NHS Foundation Trust, Avon and Wiltshire Partnership</li><li>• Bristol Community Health, North Somerset Community Partnership, Sirona care &amp; health</li><li>• NHS England (as the commissioners for Primary Care and for Specialised Services)</li></ul> |
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The development of the STP is overseen by an executive programme board on behalf of the existing BNSSG System Leaders Group, and is led by the Chief Executive of University Hospitals Bristol NHS Foundation Trust in the role of 'Senior Responsible Officer' for the local STP.

## Proposal

3. Every day our local health and care services successfully see and treat thousands of people. They are important services that all of us, our families and our friends will rely on at

one time or another.

Across the country and also locally throughout Bristol, North Somerset and South Gloucestershire, these health and care services are under significant and sustained pressure which continues to increase.

The reasons for these growing pressures are well known. As our population ages the number of people requiring care for life changing diseases such as diabetes dementia and other long term conditions continues to rise.

With sufficient and well organised services this care can be provided effectively in the community supported by specialist services in hospital when required. But where this isn't the case people with these conditions are more likely to end up being admitted to hospital for an extended period leading to a loss of independence.

Although significant progress has been made in modernising and improving local services, many services both in hospital and in the community continue to be organised around historical patterns which can be less efficient and which can give rise to duplications and gaps in coverage.

With total annual expenditure for local NHS services of around £1.5 billion, our local combined financial position is not in balance. If demand for services continues to grow in the way we expect, this combined deficit will continue to increase. Local authority budgets for social care are also reducing.

This combination of growing demand and increasing financial deficit is not sustainable.

We need to work together and work differently - between health and social care, between hospital and community services and with local people - in order to continue to meet the health needs of our local population

The STP describes our assessment of the local challenge in further detail.

It explains our approach to securing a step-change in the way health and care works across Bristol, North Somerset and South Gloucestershire.

It outlines of our vision for; a substantive programme of *prevention, early intervention and self-care*; for a dynamic new model of *integrated primary and community health services*; and for a *new collaborative approach to the way our local hospitals services work together*.

It affirms our commitment to achieving parity of esteem, the principle by which mental health is given equal priority to physical health in the way local services are planned and delivered.

These draft proposals have already been shaped by the feedback that we receive from people about their experiences of using current services, and from our own staff involved in organising and delivering care.

We will continue to involve local people and our workforce as specific proposals for change emerge, and where a significant change is involved there will also be formal public consultation before changes are made.

## **Risk Assessment**

4. A high level assessment of risks and mitigations is included in the STP. Risk identification and risk management will be undertaken through the STP programme management arrangements.

## **Public Sector Equality Duties**

5. There are no specific implications for equalities arising from the recommendations in this report.

Further consideration of any implications for equalities will be undertaken where indicated as part of specific portfolios and programmes of work arising from the further development of the STP

## **Legal and Resource Implications**

### **Legal**

6. There are no specific legal implications arising from the recommendations in this report.

### **Financial**

7. There are no additional resource implications arising from the recommendations in this report.

The STP includes an assessment of the combined financial challenge for the whole health system both in terms of revenue and capital, together with an assessment of the workforce issues relating to the further development of the STP.

### **Appendices:**

- A – STP October 2016 submission
- B – STP summary

## **LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985**

### **Background Papers:**

- STP June 2016 submission