

**Buckinghamshire health & care system plan  
& the Sustainability & Transformation Plan (STP) for the  
Buckinghamshire, Oxfordshire & Berkshire West footprint**

**Update briefing**

Health and Adult Social Care Select Committee  
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**Presentation content**

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## Sustainability and Transformation Plans (STPs)



- 44 STP 'footprints' across England largely based on patient flows into tertiary (very specialised) acute hospitals
- STPs address strategic issues that span more than one local system e.g. Thames Valley Urgent & Emergency Care Network
- Buckinghamshire is part of a Buckinghamshire, Oxfordshire, Berkshire West 'footprint' 1.8m population, £2.5bn place based allocation, 7 Clinical Commissioning Groups, 16 Foundation Trust & NHS Trust providers, 14 Local authorities
- NHS Shared Planning Guidance 2016-17 asks every health & care system is to co-create an ambitious local blueprint to accelerate implementation of the *Five Year Forward View* – Sustainability and Transformation Plans (STPs) which are:
  - place-based and multi-year built around population needs
  - help ensure that the investment secured in the *Spending Review* does not (just) prop up individual organisations
  - drive a sustainable transformation in patient experience & health outcomes
  - build & strengthen local relationships with a shared understanding of challenges & scale of ambition
- The overall approach is based on developing STP plans in local systems where it makes sense with key partners e.g. for integrated health & care, and collaborating across the STP footprint as necessary on cross system issues e.g. for urgent & emergency acute care

## Buckinghamshire, Oxfordshire & Berkshire West 'footprint'



## BOBW Sustainability & Transformation Plan (STP)



- BOBW STP covers four key programmes and two enabling work streams where Buckinghamshire will work across the footprint to tackle issues that cannot be resolved by acting entirely locally which are:
  - Prevention of ill health 'at scale'
  - Urgent & emergency care e.g. accident and emergency treatment
  - Acute services particularly specialised services such as heart transplants
  - Mental health especially tertiary level and out of county care e.g. mental health high secure services
  - Workforce and the labour market
  - Digital interoperability and technology-enabled change
- STP is being developed 'bottom up' and represents a small proportion of the Bucks health & care system
- Main plan is being developed locally across the health & care system – the Bucks 'chapter'
- Bucks 'chapter' builds on 5 year system plan presented to H&WB in June 2014 and the primary care strategy presented to H&WB in March 2015 informed by:
  - patient experience feedback on services
  - previous engagement and consultation activities such as the Community Hubs engagement events in Bucks
  - urgent care survey results from across the patch
  - Joint Strategic Health Needs Assessment
  - Health & Wellbeing Strategy
  - input from the Thames Valley Clinical Senate & the Academic Health Science Network

## Buckinghamshire 'chapter'

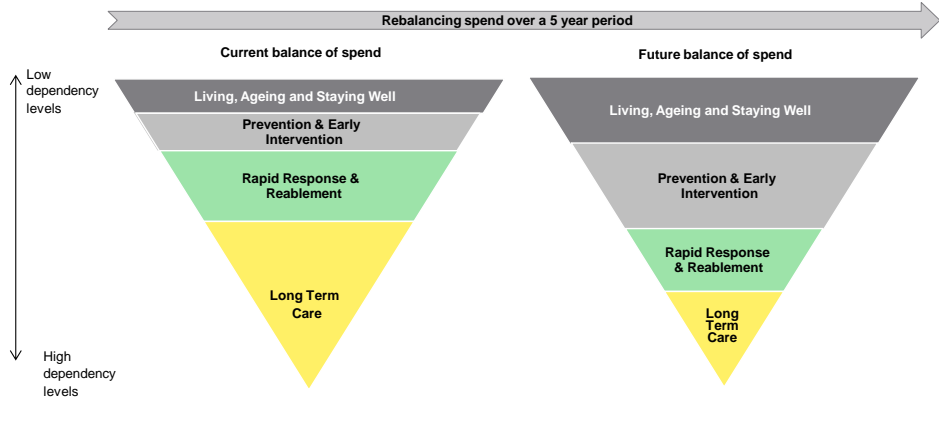


- Continuing to progress Buckinghamshire health and care system approach to developing plans under the leadership of *Healthy Bucks Leaders' Group*
- Identifying priorities where it makes sense to work at a greater population scale e.g. across Bucks, Oxfordshire and West Berkshire STP footprint or wider
- Considerable transformation of NHS services nationally and locally is required to meet the 3 gaps - health & wellbeing, quality and finance & efficiency - over the next five years
- Bucks Primary Care Strategy, published in 2015, describes how Bucks will build integrated care and community services, shifting from a bed base to more ambulatory and community model of care
- Next steps in the development of plans is to work together with local communities to understand their specific population challenges and to jointly describe how strategy will be translated into local health and care services across the Buckinghamshire's localities building on the recent community engagement around 'Community hubs' (led by Buckinghamshire Healthcare Trust)

# Buckinghamshire 'chapter'



- 'Do nothing' risk £202m across the health & care system, low risk relative to elsewhere in the NHS
- Focus is to reduce spend on bed-based care into prevention & care at home
- To integrate health & care services, avoid unnecessary steps in pathways to reduce waste and duplication
- To deliver urgent and emergency care services in the right place at the right time
- To deploy technology to enable rapid access to advice, care and support



**BUCKINGHAMSHIRE HEALTH & CARE SYSTEM WORKING DRAFT PLAN ON A PAGE**

Buckinghamshire has the advantage of the same geographical footprint for the delivery of health & care services. There is a long history of partnership working across public services particularly between the NHS and the County Council's Communities, Health & Adult Social Care and Children's Directorates to deliver health improvement and health & care services. The partners provide strong collaborative leadership to the Buckinghamshire health & care system, the *Healthy Bucks Leaders' Group*, underpinned by a programme governance structure to drive the change that is required to address the health & wellbeing, care and quality and finance & efficiency gaps.

Context	Vision	Aim	Programme workstreams	Strategic interventions & FYFV models	Enabling Infrastructure		
Overall good health status masks variation	Everyone working together so that the people of Buckinghamshire	The aim of partners is to rebalance the health and social care spend to reduce the need for expensive care in hospital. This will be achieved through a combination of Living Well and Prevention and Early Intervention initiatives.	Self care and prevention	<ul style="list-style-type: none"> <li>A life-course approach to:                             <ul style="list-style-type: none"> <li>Promoting healthy lifestyles</li> <li>Improving mental health and wellbeing</li> <li>Tackling inequalities</li> <li>Building community capacity &amp; self help</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Implement the top 6 priorities in the refreshed Health &amp; Wellbeing strategy</li> </ul>	One Public Estate Initiative, optimal use of all public service assets, rebranding PFI debt  IM&T digital interoperability – paperless by 2020, shared care records across all organisations  Estates – reducing capital asset footprint across Council & NHS through Workforce – reduce agency costs, review staff mg & reduce corporate costs e.g. shared bank office functions with Council & other partners	
Unhealthy lifestyles			Integrating the health & social care commissioning & delivery system	<ul style="list-style-type: none"> <li>Frail older people</li> <li>Mental health &amp; learning disability care</li> <li>Children &amp; families</li> </ul>	<ul style="list-style-type: none"> <li>Design <i>multi speciality community provider teams</i> in community hubs accessed via a single point</li> <li>NHS &amp; Council joint approach to residential care &amp; continuing health care market</li> <li>Reduce acute hospital utilisation and investing in community &amp; primary care</li> <li>Redesign community hospital care</li> </ul>		
Ageing population			Reforming urgent & emergency care	<ul style="list-style-type: none"> <li>Thames Valley integrated urgent care</li> </ul>	<ul style="list-style-type: none"> <li>Implement <i>Vanguard</i> 'prime contractor' model for tertiary services</li> <li>Commission services in a new way to improve outcomes &amp; value for money</li> </ul>		
Rising incidence of long term conditions			Planned & specialised care	<ul style="list-style-type: none"> <li>Tackling variation <i>Right Care</i></li> <li>Maternity care strategy</li> <li>Cancer strategy</li> <li>Interventional radiology</li> <li>Primary care</li> </ul>	<ul style="list-style-type: none"> <li>Improve access to care for tier 4 child &amp; adolescent mental health services</li> <li>Improve the lives of children with special educational needs</li> <li>Implement new <i>Urgent &amp; Emergency Care Network</i> model</li> <li>Improve transitional care for those medically fit for discharge</li> <li>Reduce length of stay and unnecessary use of beds within the acute sector</li> <li>Improve performance to upper decile</li> <li>Plan &amp; deliver extra capacity for increase in births</li> <li>Improve network pathways</li> <li>24/7 day working plan</li> <li>Implement the <i>GP Forward View</i> - strengthen &amp; reform workforce, reduce &amp; streamline workload, improve infrastructure, redesign &amp; integrate care redesign</li> </ul>		
Generally system is seen as low risk & performing well							
Financial challenge c.£200m over 5 years							

## Process for programme delivery



- *Healthy Bucks Leaders' Group* continues to drive this work
- Agreed to create a Transformation Delivery Group to oversee delivery of Bucks-wide health & care system plan
- Aligns resources, reduces duplication and gives clear programme leadership and programme management
- Not delegated decision making – organisations remain accountable but supports getting plans developed to stage to be approved and then implemented

## Next steps



- End September 2016 - NHS planning guidance published
- 21<sup>st</sup> October 2016 - STP submissions national deadline
- Mid November 2016 - Operational system & organisations' plans first cut
- End December 2016 - 2 year plans & contract negotiations concluded with provider sector
- Communications & engagement plan begins subject to NHS England approval