



Title of the report:	STP Programme Update
Responsible Director:	Phil Evans, STP/Future Fit Director
Author of the report:	Joanne Harding, Head of STP PMO
Presenter:	
<p><b>Purpose of the report:</b> The purpose of this paper is to provide an update with a high level RAG rated Programme Status Report against the STP Programme Structure, Governance and Delivery Plan.</p>	
<p><b>Key issues or points to note:</b> The Dashboard below gives a sense check as to the individual components that make up our system wide STP and our progress towards system wide working</p>	

Criteria used to demonstrate progress towards system working	
<p>Accountable care systems are place-based systems which have taken on the collective responsibility for managing performance, resources and the totality of population health. In return, they receive greater freedoms and flexibilities from NHS England and NHS Improvement. (Shropshire STP is still in discussion stage re ACS across system leadership, the criteria below is for information)</p>	
Effective leadership and relationships	<ul style="list-style-type: none"> <li>• Strong leadership team, with mature relationships across the NHS and local government</li> <li>• Effective collective decision-making that does not rely solely on consensus</li> <li>• Clinicians involved in the decision-making, including primary care</li> <li>• Evidence that leaders share a vision of what they're trying to achieve</li> </ul>
Track record of delivery	<ul style="list-style-type: none"> <li>• Evidence of tangible progress towards delivering Next Steps on the Five Year Forward View especially: redesign of UEC system, better access to primary care, improved mental health and cancer services</li> <li>• Leading the pack on delivery of constitutional standards, especially A&amp;E and cancer 62 day</li> <li>• Ability to carry out decisions that are made, with the right capability to execute on priorities</li> </ul>
Strong financial management	<ul style="list-style-type: none"> <li>• Demonstrated ability to deliver financial balance across the system</li> <li>• Where financial balance is not immediately achievable, control totals are being achieved and there is a compelling system-wide plan for returning to balance and/or resolving historic debt</li> <li>• System will be ready to take on a shared control total and has effective ways of managing collective risk</li> </ul>
Coherent and defined population	<ul style="list-style-type: none"> <li>• A meaningful geographical footprint that respects patient flows of at least 0.5m</li> <li>• "Core" providers in the area provide ~70%+ of the care for their resident population</li> <li>• Is contiguous with STP or if not has clear division of labour with STP and is not simply a 'breakaway' area</li> <li>• Where possible, is contiguous with local government boundaries</li> </ul>
Care redesign	<ul style="list-style-type: none"> <li>• System has persuasive plans for integrating providers vertically (primary care, social care &amp; hospitals) and collaborating horizontally (between hospitals), supported by a solid digital plan</li> <li>• Widespread involvement of primary care, with GP practices collaborating through incipient networks</li> <li>• Commitment to population health approaches, with new care models that draw on the best vanguard learning</li> <li>• Includes a vanguard with plans to scale or has demonstrated learning from the best new care models</li> </ul>



**STP Director's Update to STP Partnership Board  
November 2017**

**Phil Evans, STP/Future Fit Director**

The purpose of this report is to provide the meeting audience and distribution list with a summary of progress in regard to delivery of the STP Programme Development & Delivery.

This report will be used at all Board Meetings from 2<sup>nd</sup> Weds of each month until the following 2<sup>nd</sup> weds of next month

RAG rating		Key Updates / Issues / risks
		<b>Last Updated: 08/11/2017</b>
1.0	Sharing a Patient Story <b>To be developed</b>	
2.0	<b>Overall STP Programme Governance</b>	
2.1	STP Programme Structure & Reporting	<ul style="list-style-type: none"> <li>• Programme Structure has been updated following a One Plan workshop held on 2<sup>nd</sup> Oct 2017. This will continue to be developed as the Organisational Development work with The Kings Fund gets underway.</li> <li>• Membership of all work streams and enabling groups are being updated and a full Programme Structure will be shared across all STP Partners once complete</li> <li>• Meeting Structures have been updated and will now comprise               <ul style="list-style-type: none"> <li>○ 1<sup>st</sup> Weds of Month – Meetings, action log from previous meeting to be sent out</li> <li>○ 2<sup>nd</sup> Weds of month – updates due and STP dashboard report updated</li> <li>○ 3<sup>rd</sup> Weds of the Month – agenda, papers &amp; minutes to be circulated</li> <li>○ 4<sup>th</sup> Weds of the month – STP Partnership Board meeting occurs</li> </ul> </li> <li>• <b>Reporting for all Boards will be via the STP Directors Update</b>, you may receive this report via more than one route, the report is updated constantly and becomes final on the 2<sup>nd</sup> Weds of every month</li> </ul>
2.2	STP Programme Processes	<ul style="list-style-type: none"> <li>• These continue to be developed and need to align with existing organisational statutory responsibilities and existing processes. Work has commenced on these and are being tested through the Programme Delivery Group</li> <li>• Priorities include:               <ul style="list-style-type: none"> <li>○ Reporting</li> <li>○ Membership</li> <li>○ Internal processes</li> <li>○ Risk register</li> <li>○ Escalation</li> <li>○ Office organisation and file sharing</li> <li>○ Comms and engagement with partners re:progress updates</li> </ul> </li> <li>• This work will continue through the Kings Fund OD work with the first workshop planned for 22<sup>nd</sup> November 2017</li> </ul>
2.3	STP Programme Reporting & Risks	<ul style="list-style-type: none"> <li>• This highlight report serves to give the STP system partners an initial high level view of Programmes within our One Plan. Further iterations and development further development of the reporting dashboard will be developed over the coming weeks which will include NHSE dashboard requirements to move from level 3 to level 2</li> </ul>



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		<b>Last Updated: 08/11/2017</b>
		<ul style="list-style-type: none"> <li>• A Risk Register has been established, this is reliant on system partners sharing their programme plans and internal risks already identified. The STP PMO can this pull these together to form a system wide Risk register.</li> <li>• Risk register will come to STP Programme Delivery Group meetings and RED rated to be escalated to STP Partnership Board monthly with a plan for approval.</li> </ul>
2.4	STP PMO Finances	<ul style="list-style-type: none"> <li>• The STP PMO is operating within the STP overall budget controls set by STP Partners</li> </ul>
2.5	STP Programme Team	<ul style="list-style-type: none"> <li>• The STP Team is now fully established following recent recruitment. New starters are on a phased start and will all be fully in post by Feb 2018</li> </ul>
2.6	System Organisational Development	<ul style="list-style-type: none"> <li>• The Kings Fund are supporting STP system wide OD, this includes               <ul style="list-style-type: none"> <li>○ Facilitated STP Programme Delivery Refresh session on 22<sup>nd</sup> Nov</li> <li>○ Facilitated System Leaders Session via 1:1 &amp; group</li> <li>○ Future co-designed workshops to support system transformation</li> </ul> </li> <li>• Transformational Change through System Leadership application has been submitted. If successful the Programme commences in Feb 18</li> </ul>
3.0	<b>Programme Delivery – Out of Hospital Transformation</b>	
3.1	Telford Neighbourhood	<ul style="list-style-type: none"> <li>• Work is progressing with this key area of work. Teams have started to form around groups of practices (i.e. Neighbourhoods), and Early Help and Support Workers assigned to specific practices.</li> <li>• The first of the MDT style around Neighbourhoods bringing together staff from SSST, ShropCom and the local authority took place on 2<sup>nd</sup> November, commencing in Newport.</li> <li>• As estates workshop has been scheduled for November between health and social care stakeholders to identify the estates available and practical requirements to deliver neighbourhood working.</li> <li>• Work is progressing with the Dementia Workstream with named staff aligned to practices.</li> </ul>
3.2	Shropshire Neighbourhood	<ul style="list-style-type: none"> <li>• Four main programmes of work               <ul style="list-style-type: none"> <li>○ Primary Care Development and GP Five Year Forward View</li> <li>○ Population Health Management</li> <li>○ Secondary Care Admission Avoidance</li> <li>○ Community Services Review</li> </ul> </li> <li>• Lisa Wicks Commissioning &amp; Redesign Lead is in post</li> <li>• Reviewed the 90 day plan submission 1 and mapping next steps to prioritise the projects to maximise impact on system flow.</li> </ul> <p>Review the art of the possible for system flow.</p>
3.3	Powys Neighbourhood	<p>Two programmes of work</p> <ul style="list-style-type: none"> <li>• Admission Avoidance</li> <li>• Enhanced management of long term conditions</li> </ul>



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<b>Last Updated: 08/11/2017</b>		
4.0	<b>Programme Delivery – Acute &amp; Specialist – in Hospital Transformation</b>	
4.1	Local Maternity Services	<ul style="list-style-type: none"> <li>STP PMO is due to meet with LMS Leads to establish working processes and alignment of each programme of work</li> </ul>
4.2	Muscular Skeletal Services	<ul style="list-style-type: none"> <li>A Commissioner led programme of work is currently being developed.</li> </ul>
4.3	Urgent Emergency Care	<ul style="list-style-type: none"> <li>UEC tracker submitted to NHSE, no questions raised or feedback received.</li> <li>System Winter plan has been included in the submission</li> <li>Confirmation that we have received the 197k from NHSE</li> </ul>
4.4	Future Fit / Sustainable Services Programme	<ul style="list-style-type: none"> <li>Verbal update to be provided regarding the NHSE FF assurance panel taking place on the 16<sup>th</sup> November at 1600</li> </ul>
5.0	<b>Programme Delivery – Enablement of Transformation</b>	
5.1	Digital Enablement Group	<ul style="list-style-type: none"> <li>15 programmes created to cover 6 LDR Goals, 1 of which is 10 Universal Capabilities.</li> <li>Project register created. Many projects discussed, but none officially approved or in progress.</li> <li>Collaboration workspace options being evaluated to allow all team members to view and contribute to progress, even between meetings.</li> <li>Clinical Professional Reference Group (CPRG) – agreed to nominate clinical lead for all programmes and projects, to ensure true goal is understood and work with Owner to create mandates for new projects as required. Also agreed to reinstate monthly meeting to achieve this.</li> <li>IG Group – assigned project to implement and populate Data Sharing Agreement register. Group tasked with reviewing project register to ensure and enable IG compliance</li> <li>Design Authority – aiming to increase meeting attendance levels. Weekly meeting started with DA Chair to expand programmes into defined projects. Aim is to create a portfolio of projects ready for immediate use to bid for funding as it becomes available.</li> <li>Key risk: lack of project managers offered by contributing organisations.</li> </ul>
5.2	Strategic Workforce Group	<ul style="list-style-type: none"> <li>Positive workshop on October 11<sup>th</sup>. Both Jan Ditheridge and Victoria Maher in attendance. The group agreed to explore 3 key areas within the next 90 days: Agile Workforce, (system wide working) led by Sarah Sheppard Digital Collaboration, lead to be identified working with Rob Gray Show and Tell – workforce intelligence, lead to be identified.</li> <li>The next workshop is planned for November 14<sup>th</sup> Links to HEE Integrated Care Programme offer and Neighbourhood working are on the agenda along with updates on progress for the 3 key areas</li> <li>Workforce Workstream members agreed the workshop format created good energy and made more progress and so once a quarter there will be a formal business meeting with the other 3 meetings being in the workshop format.</li> </ul>



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5.3	Strategic Estates Group	<ul style="list-style-type: none"> <li>• More information is required to work with all partners on a strategic estates plan for Shropshire, Telford &amp; Wrekin. Additional Executive level support is required within this work stream</li> <li>• Establish a clear recognition of the LEF (local Estates Forum)</li> <li>• Counsellor meeting 2 November to discuss how we can join the work stream up and move forward for efficiencies and transformation.</li> <li>• 11 Oct meeting OPE (one public estate) colleagues to plan a session across the LEF members to start a joint mapping process, from a health perspective.</li> <li>• Wk commencing 9<sup>th</sup> Oct meeting with Telf &amp; Shrop N’Hoods &amp; Finance to progress strategy.</li> <li>• Requirement to complete STP Strategic Estates Workbook – see additional item for information – completion being led by BE on behalf of the system</li> </ul>
5.4	Communication & Engagement Group	<ul style="list-style-type: none"> <li>• The communications and engagement work stream met on 12 October 2017.</li> <li>• Leads aligned to each work stream provided feedback, where available, on work streams progress.</li> <li>• Gaps in support on work streams were identified, with estates and back office functions interim leads identified.</li> <li>• An update was provided around progress to developing winter communications and engagement plans ahead of a NHS England STP coordinated submission.</li> <li>• Wider STP Communication &amp; engagement strategy still needs to be developed, priorities concerning FF are preventing this at the moment</li> </ul>
5.5	STP “System” Finance Group	<ul style="list-style-type: none"> <li>• Meeting with Finance lead to develop ‘Terms of Reference.</li> <li>• Plan is developed and the 90 – day plan needs refreshing to year end.</li> <li>• Review of governance documents to support work stream.</li> <li>• A methodology that tracks system finances needs to be developed and agreed.</li> </ul>
5.6	STP Clinical Design Group	<ul style="list-style-type: none"> <li>• Agreed to review TORs in light of STP focus rather than just FF</li> <li>• Discussed clinical engagement and leadership and DONs will be invited to the CRG from Nov.</li> <li>• Phil to meet DONS to discuss clinical leadership and involvement going forward.</li> </ul>
6.0	<b>Cross Cutting Work Programmes of work</b>	
6.1	GP5YFV	<ul style="list-style-type: none"> <li>• GPFYFV 90 day plan has been updated and all progress is green currently.</li> </ul>
6.2	Mental Health	<ul style="list-style-type: none"> <li>• PMO require an update of the 90 day plan, we need a lead to check the next STP submission has ‘Mental Health’ as a common theme running through all work streams.</li> </ul>
6.3	Frailty	<ul style="list-style-type: none"> <li>• Considerable work is taking place to support frailty, this will be updated for the Dec report</li> </ul>
6.4	Cancer	<ul style="list-style-type: none"> <li>• A programme of work to be developed – more information on how this is progressing in Dec update</li> </ul>

## Shropshire, Telford & Wrekin Sustainability & Transformation programme



Key ( base on STP PMO system intelligence)

	Unknown	Need to engage and receive update from Programme Lead
	On track – no issues requiring escalation	
	Require Programme Delivery Executive Lead & or SRO input	Where this is required, this will be detailed in recommendations and noted for relevant SRO
	Require STP Partnership Board input	Where this is required, this will be escalated via STP Partnership Board by STP Programme Director