

STP Update to Shropshire HWBB

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- Introduction
- STP Transformation and Vision
- STP Governance Structure
- Delivery Group
- STP Timeline
- One Plan (90 Day Plans)
- Next Steps



STP Transformation and Vision

STP Transformation and Vision



Current Challenges

The delivery of planned and unplanned services across Shropshire, Telford & Wrekin needs to be more joined up and efficient.

From a patients' perspective their health and care experience is not as smooth as it could be. This is because we have:,

- Services aren't designed to meet increasing and changing demand and we haven't introduced/designed modern and effective services in all areas within our cost envelope
- Lack of clarity over roles and responsibilities of each organisation leading to duplication and variability in the quality of services delivered

The current system is resource intensive and focused on piecemeal performance improvement. This exists because of system issues across Acute, Primary and Community systems

- An acute and planned care configuration that is both financially and operationally
- Over intervention in surgical MSK driving c. 50% commissioner recurrent deficit
- Models of acute and community discharge require modernisation and a reduced dependency on physical beds
- A need for Shropshire CCG to drive best value particularly in the area of Complex Care where we are a substantial national outlier contributing c.
 25% of recurring deficit
- Organisational challenges finance, high profile quality issues, political tensions

Projected growth and demand is unsustainable. This means that people are having poor experiences of health and care including waiting a long time to be referred for treatment, long waits in A&E departments and the pressure on community and mental health services is mounting.

What we will deliver

There is a need for a more coherent system strategy with place-based delivery focusing on person and place, rather than organisation and condition.

Through developing this approach we will move beyond thinking about how we have traditionally delivered services to date and organisational boundaries. As part of the programme we will:

- Ensure clinical and financial sustainability for our system through greater integration of workforce and processes
- Develop the leadership, including the clinical guidance required to support system changes
- Work together to deliver place-based care. This means that we will
 continuously strive to deliver the best possible outcomes and ensure that
 people using our services have a positive experience
- Establish governance arrangements that will ensure a balance between organisational autonomy, accountability and system partners

Place based health-

- Open
- Whole system approach
- Horizontal model across places
- Person-centred
- Largely preventative
- Focused on promoting wellbeing
- Wider determinants of health in communities
- Balance of rights and responsibilities





By working together as an integrated system, we plan to ensure people get the best treatment - whenever and wherever they need it - and to share patient information more effectively to avoid duplication and wasted effort. Our plan identifies where £74 million might be used differently and more effectively to provide more care, closer to home for the same money.



Our Programmes and Priorities

Acute services reconfiguration, reduced levels of surgical intervention Redesign urgent and emergency care, creating two vibrant 'centres of excellence' to meet the needs of local people, including integrated working and primary care models Focus on neighbourhoods to prevent ill health and promote the support that local communities offer to help people lead healthier lives and encourage them to care for themselves where appropriate Multi disciplinary Neighbourhood Care Teams to work closer together supporting local people with long term health conditions and those who have had a hospital stay and returned home needing further care Ensure all community services are safe, accessible and provide the most appropriate care

Make the best use of technology to avoid people having to travel large distances where possible



Built on our enabling programmes

Leading and Working
Differently – focuses on
giving the health and care
workforce the skills and
expertise needed to deliver
new models of care.
Programmes include:

- Working differently
- New ways of delivery
- Single Leadership voice
- Shared care record
- Intelligent working
- Self care
- Independent living
- Digitally enabled services
- Continuing digital operations
- Enabling health technologies



Overseen by all Partners

System Leadership Team – Comprises of Chief Executives, Chairs and key stakeholders from across the Shropshire Telford and Wrekin system, as follows:

- Shropshire Clinical Commissioning Group
- Telford & Wrekin Clinical Commissioning Group
- Shropshire Community Health NHS Trust
- The Shrewsbury and Telford Hospital NHS Trust
- Robert Jones & Agnes Hunt
 Orthopaedic HospitalNHS Foundation
 Trust
- South Staffordshire & Shropshire Healthcare NHS Foundation Trust
- ShropDoc (GP out of hours service)
- Shropshire Council
- · Telford & Wrekin Council
- Powys Teaching Health Board
- Healthwatch Shropshire
- Healthwatch Telford & Wrekin
- Voluntary Sector (soon to join)
 Shropshire Partners in Care (SPIC)



Outcomes

Health and Wellbeing

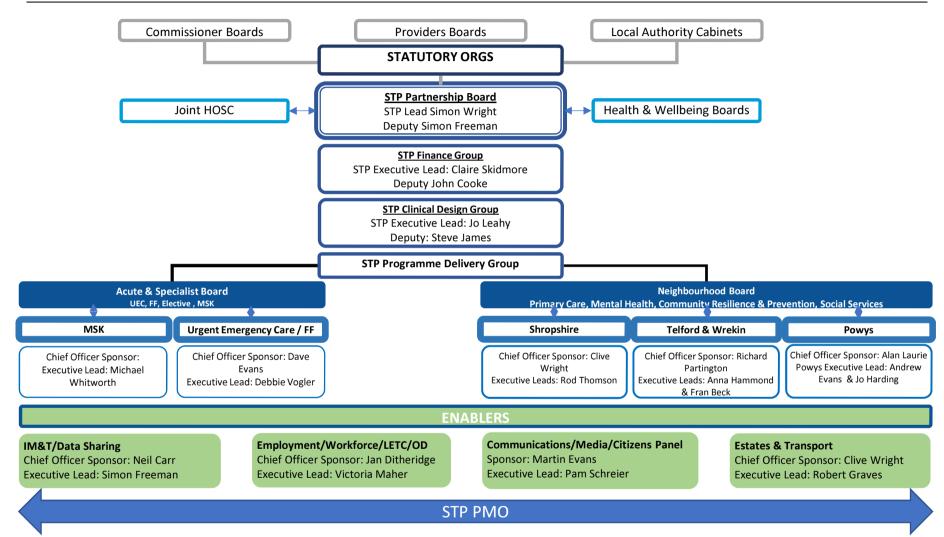
- Helping more children and young people grow, develop and achieve
- Stay healthier for longer, leading to fewer people classified as overweight or obese, smoking, and drinking alcohol
- Taking control over own care
- Equal standard of care
- Improved health outcomes
- Improved access to services7 days a week
- More joined up care
- More opportunities to be cared for closer to home
- Improve patient experience



STP Governance Structure



STP GOVERNANCE STRUCTURE





Programme Delivery Group



Programme Delivery Group Functions

Programme Delivery Group

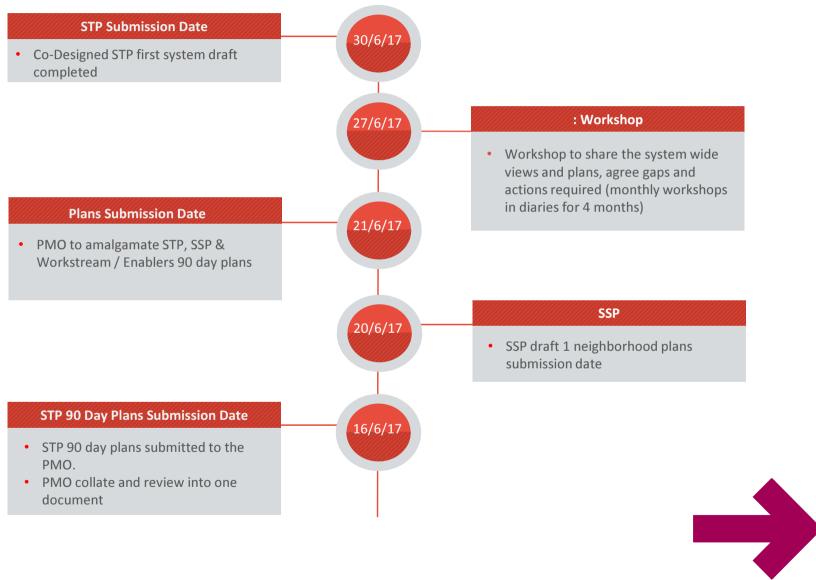
The Group is responsible for the oversight of the development and delivery of the Shropshire, Telford & Wrekin STP. It is established to bring together and align the work streams so they are working at the same pace to deliver the outcomes of Shropshire, Telford & Wrekin STP.

- To actively and constructively challenge each other to ensure that progress is built on solid foundations and to act as a sounding board for new ideas. To challenge the thinking of the Partnership Board if thought appropriate.
- To provide regular and timely reports and assurance to the Partnership Board regarding the progress and performance of the STP Programme.
- To maintain a Risk Register for the STP and manage programme level risks, ensuring escalation to the Partnership Board where necessary.
- Will ensure and provide assurance that clinicians, professionals, social workers and patient and carers are engaged in the co-design of the new system and communicated with appropriately.
- Ensure collaborative working across all work streams and partner organisations for the operational delivery of the change programme.
- Ensure the workstreams are managed within the agreed performance management framework and monitored by the agreed metrics/measurable benefits and outcomes of the Programme.
- Ensure quality across the programme, the work streams, its projects and its outcomes.



STP Timeline





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90 Day Plans

90 Day Plans



Powys

- Two main programmes of work
 - Unscheduled Care
 - Planned Care

Telford and Wrekin

- Three programmes of work
 - Community Resilience and Prevention
 - Neighbourhood Teams
 - Systematic speciality review & transfer of service to community

Shropshire

- Five main programmes of work
 - Prevention
 - Primary Care Development and GP Five Year Forward View
 - Population Health Management
 - Secondary Care Admission Avoidance
 - Community Services Review

All workstreams are currently focused on 3 key products

- The narrative that describes the out of hospital/community landscape for the future that will be part of the Outline Business Case (OBC) and also the next Sustainability and Transformation Programme (STP) submission.
- The solutions for all the neighbourhoods are currently being amalgamated and the executive leads are working with the finance teams to produce a plan with financial assumptions aligned to each of the solutions.
- Each Neighbourhood (along with all the workstreams) are producing a high level plan of their programmes, including overarching objectives and detail around delivery dates to support the production of one co-designed STP Plan.

For the first time the system will have one joined up plan that everyone will have sight of. People will have sight of the system wide meetings enabling the shared learning and the conversations around the interdependencies.

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Other 90 Day Plans



Acute

- FutureFit
- MSK
- Urgent and Emergency Care

Enablers

- Communication and Engagement
- Workforce
- Digital
- Estates

Frailty/Admission Avoidance

- System wide piece of work including 'Pilot'
- Estates

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Next Steps



STP Next steps:

- Combine all existing plans to produce 'One Plan' (STP)
- Send comments back to Executive Leads regarding gaps
- Delivery Group 6th July (see additional slide)
 - Opportunity to 'Deep Dive' into specific STP opportunities/challenges
- Produce 'Final Iteration' of these 90 Day Plans (19th July)
- Work with individual workstreams ensure each workstream has firm foundations to deliver the plan (Clinical, Financial etc input. Work with PMO programme managers through July)
- Update the existing timeline and communicate to the whole system
- Commence the co-design of the narrative for the next STP submission
- Provide clear and consistent communication to the system on a regular basis through the Communication and Engagement Team



Thank You Any Questions