



Cambridgeshire & Peterborough Sustainability & Transformation Partnership Update - January 2019

The NHS Long Term Plan: The NHS Long Term Plan was published on the 7 January following the funding settlement announced by the Prime Minister in June 2018, which will see an additional £20.5 billion going into the NHS by 2023/24. Some elements of the plan are clearly defined whilst others are still under development. The Plan is important context for the strategic choices we will be making as a system over the next few months.

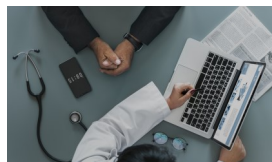


The Plan sets out five main themes which are:

- i) All systems will become Integrated Care Systems (ICSs) by April 2021,
- ii) A new model for integrated primary and community services will enhance out of hospital care,
- iii) Systems will receive real-term investment and work together to use resources collectively,
- iv) There will be better care for major health problems, supported by research and innovation, and
- v) Delivery of care will be supported by an enhanced workforce and digital approach.

The process by which an STP becomes an ICS is not outlined in the Plan as there is no nationally prescribed, “one size fits all” model. However, we are already well positioned to evolve into an ICS as we have demonstrated joined up approaches to planning such as establishing an STP Board in September 2017. Also Alliances have been established in the North and South to lead transformation, focusing initially on the development of Integrated Neighbourhoods. With primary care networks as their cornerstone, Integrated Neighbourhoods bring together all aspects of health services to provide joined-up, proactive care which keeps people well and out of hospital, providing a new model of primary and community care.

The Plan gives a revised timetable for the NHS to return to financial balance. Nationally the number of Trusts reporting a deficit in 2019/20 is expected to halve, and all NHS organisations should be in balance by 2023/24 through the Financial Recovery Fund. This means that the System’s financial deficit should be addressed over the next five years. As a System we will be asked to refresh our five-year plan in the Autumn. Furthermore, as a number of System partners are in financial deficit, we are expected to ensure the five-year plan incorporates financial recovery plans for each Trust in deficit. These Financial Recovery plans will set out the actions needed to make services sustainable at both Trust and System level, and the agreed responsibilities within our system to manage our resources collectively.



Health System Led Investment: Following the submission of the HSLI in provider digitisation bids in October, we have now received formal confirmation that the 2018/19 NWAngliaFT bid has been approved following its Regional Review Panel in January. The bid is for a replacement of the Patient Administration System (PAS) and Emergency Department IT system along with the deployment of the 'in-house' clinical portal (eTrack) to Hinchingbrooke. The bid has now been passed to the National team for final process steps.

NHS 111 online: Local patients across Cambridgeshire and Peterborough now have access to NHS 111 online at 111.nhs.uk, as well as over the phone. Just like the phone service, NHS 111 online takes patients through questions about their symptoms to receive tailored advice on what to do next and where to go, and if necessary, can arrange for them to speak to a healthcare professional. As well as NHS 111 online allowing patients to get urgent healthcare online, it also helps to manage increasing demand on 111 telephone services. You can access NHS 111 online on a smartphone, tablet or computer — 24 hours a day, 7 days a week – and if needed patients will be connected to a nurse, emergency dentist or GP. 111 online is a fast and convenient alternative to the 111 phone service and provides an option for people who want to access 111 digitally. It is one of several digital NHS services that are empowering people to manage their own health and care.



STP Regional Review: Leaders from across the System met with our regulators at NHSE/I. The meeting went well and feedback was fair. See below some headlines from the meeting:

- Well done – progress has been made on a number of areas – for example partnership working with the Councils, the Integrated Neighbourhoods Framework, and we now present as if “we’re on the same side”.
- Much of our work, in particular the Alliances, “bodes well” for our ability to implement the Long Term Plan locally, and return the System to sustainability.
- The capital we were allocated was a real “vote of confidence” from the centre, which we should be proud of.





Short Term Priorities for 2018/19

Accident and Emergency:

Attendance has increased by 10% at all three sites this January compared to last January. Our A&E performance across the whole system is comparable to the England average, but we are not currently meeting the 4hour performance standard. Hinchingbrooke performance has been above 90% for 31 weeks out of 42 weeks so far this year, with Q3 performance at 94.7%. Several projects are in train to address urgent care activity levels, which will come together under the Urgent and Emergency Care Clinical Community.



Delayed Transfers of Care:

The System has particularly high levels of DTOCs compared to other systems. Consequently, patients are staying too long in hospital, beyond the point at which they are medically fit to be discharged. The DTOC programme continues to be the highest priority for the System. Progress includes:

- System brokerage is integrated with social care and health co-located for the first time;
- NWAFT have relaunched and refocused the operational delivery team with changes being implemented through January; and
- CPFT had significant movement through Christmas releasing capacity for the acute trusts.

Trajectories have been remodelled against plans to achieve national target of 3.5% by the end of March 2019, this is a stretch target for the Integrated Discharge Service (IDS) teams. The focus of our DTOC work is now in the North of the System, taking lessons from CUH.



Financial Plan:

Tackling our financial challenge is a key focus in 2018/19 if we are to return the System to financial sustainability and live increasingly within our budgets. At Month 8 the System was worse than plan by £7.3m year to date (on a control total basis inclusive of STF), reflecting cost pressures that have crystallised during the year across multiple system partners. NWAFT has reforecast at Month 9 and this will worsen their outturn by £15m in 2018/19. These pressures present a risk to delivery of the 2018/19 plan and in turn receipt of STF. Additional im-year mitigations to maximise the opportunity of delivering against the financial

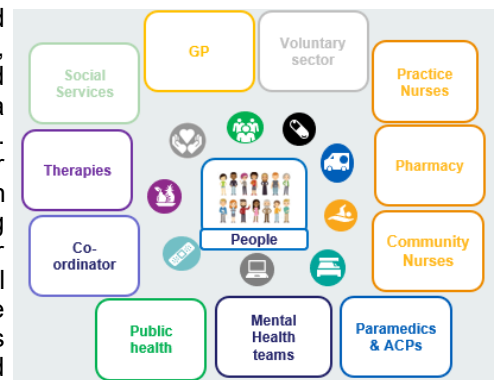
plan are being explored, including in collaboration with System partners.

For 2019/20 we have been working to develop System solutions and estimate indicative financial benefits arising. However, these have yet to be formally agreed for inclusion within the 2019/20 financial plan. Work is on-going and Financial Planning and Performance Group members meeting regularly to review, progress and take stock against our 2019/20 control total offers.

Medium term priorities

North and South Alliances:

The Alliances have developed a common framework for Integrated Neighbourhoods. The framework outlines the characteristics, approach, benefits and initial resourcing for the development of Integrated Neighbourhoods in Cambridgeshire and Peterborough. It also outlines a shared understanding of the model and the outcomes it aims to deliver. Integrated Neighbourhoods build on networks of GP practices working together to serve populations of 30-50k, known as 'Primary Care Networks'. With Primary Care Networks as their cornerstone, Integrated Neighbourhoods bring together community, social, secondary care, mental health, voluntary and wider services to deliver proactive and joined-up care to local people. This model draws on learning from national and international systems and aligns with the policy direction set out in the *NHS Long Term Plan*. Next steps include a focus on developing and implementing initial Integrated Neighbourhoods and alignment with other system priorities.



Other Matters

Prioritisation and Dispute Resolution:

Whilst the System has established a number of priorities there are some important issues which have had to be "parked". To ensure these matters are prioritised effectively the STP Board have endorsed a framework which can be used to agree when an issue is removed from the "parked" list and subsequently moved into a short/medium-term priority. Any framework that enables prioritisation of efforts as a System upfront, can help to minimise the chances of disputes arising and is therefore essential. However, while we endeavour to avoid dispute, given we have a number of legacy issues with difference of opinions across the System it remains conceivable that disputes could still arise in the future. Therefore, we have developed a dispute resolution framework also to ensure these are addressed in a transparent way. Items that that have been "parked" for prioritisation or resolution will be tracked by HCE and STP Board each meeting to ensure matters are not forgotten and there is a common understanding of the process to resolve.