

North Tyneside Health & Wellbeing Board Report Date: 16th June 2016

ITEM 6

Title: Development and
Submission of the
Sustainability and
Transformation Plan

Report from : NHS North Tyneside Clinical Commissioning Group (CCG)

Report Author: John Wicks, Interim Chief Operating Officer

1. Purpose:

To bring members up to date on the development of the Sustainability and Transformation Plan.

2. Recommendation(s):

Members are invited to comment on the attached draft STP and to note the content of this report

3. Policy Framework

This item relates to all the objectives of the Joint Health and Wellbeing Strategy 2013-18 but in particular:

- To continually seek and develop new opportunities to improve the health and wellbeing of the population
- To shift investment to focus on evidence based prevention and early intervention where possible
- To integrate services where there is an opportunity for better outcomes for the public and better use of public money
- To focus on outcomes for the population in terms of measurable improvements in health and wellbeing

It will contribute to the following joint priorities:

- Improving the Health and Wellbeing of Families
- Improving Mental Health and Emotional Wellbeing
- Addressing Premature Mortality to Reduce the Life Expectancy Gap
- Improving Life Expectancy
- Reducing avoidable Hospital and Care Home Admissions

4. Information:

Every health and care system is required to develop a 5-year local blueprint - Sustainability and Transformation Plan (STP) - for accelerating its implementation of the national strategy set out in the 5-Year Forward View.

STPs have to address the 'triple aim' of:

- a) Closing the health and well-being gap
- b) Closing the care and quality gap and
- c) Closing the finance and efficiency gap

The local STP planning footprint is Northumberland, Tyne and Wear covering a population of 1.5 million.

The STP is further supported by three Local Health Economy footprints:

- Northumberland and North Tyneside
- Newcastle and Gateshead
- South Tyneside and Sunderland

Each of these LHE footprints will have its own local governance arrangements.

A draft submission of the STP has been shared with NHS England and NHS Improvement. A final version will be completed by the end of June 2016.

A slide-pack setting out the key components of the draft STP is attached for information.

5. Decision options:

This item is not for decision. The Board is invited to comment on the attached draft STP and to note the content of this report.

6. Reasons for recommended option:

Not applicable as the report is for information only

7. Appendices:

Appendix 1 - NTW STP short return – revised 11th May 2016

8. Contact officers:

John Wicks, Interim Chief Operating Officer, NHS North Tyneside CCG (Tel: 0191 293 1140).

9. Background information:

The following background documents have been used in the compilation of this report and are available from the author:-

- Five Year Forward View. NHS England, November 2014

COMPLIANCE WITH PRINCIPLES OF DECISION MAKING

10 Finance and other resources

There are resource implications in securing the expertise necessary to develop the STP. For North Tyneside CCG, support has been provided by North of England Commissioning Support and 'Ward to Board Consulting' who have been commissioned to support the Northumberland and North Tyneside component of the plan.

11 Legal

There are no legal implications arising directly from this report

12 Consultation/community engagement

Planning guidance encourages an open, engaging and iterative process for developing the STP. Individual proposals within the STP may require consultation.

13 Human rights

There are no human rights implications directly arising from this report.

14 Equalities and diversity

There are no equalities and diversity implications directly arising from this report.

15 Risk management

The STP process requires a risk register and mitigating actions

16 Crime and disorder

There are no crime and disorder implications directly arising from this report.'

SIGN OFF

As relevant members/senior officers clear the report this will be recorded by Democratic Services by placing an X in the corresponding boxes.

Director of Public Health

Chair/Deputy Chair of the Board

Chief Finance Officer

Head of Law & Governance