

North Tyneside Health & Wellbeing Board Report Date: 15 September 2016

ITEM 10

Title: Sustainability and
Transformation Plan and
Accountable Care
Organisation Update

Report from : North Tyneside CCG

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John Wicks, Interim Chief Operating Officer

1. Purpose:

This paper has been prepared by North Tyneside CCG to provide members of the Health and Well Being Board with an update on:

- a) the development of the Northumberland, Tyne and Wear Sustainability and Transformation Plan (STP);
- b) formal interventions regarding the management arrangements at North Tyneside CCG; and
- c) the development of a North Tyneside Accountable Care Organisation (ACO).

2. Recommendation(s):

The Board is recommended to note the update in relation to the Sustainability and Transformation Plan and Accountable Care Organisation

3. Policy Framework

This item relates to all of the objectives of the Joint Health and Wellbeing Strategy 2013-18.

- 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 well being

It will contribute to the following joint priorities:

- Improving the Health and Wellbeing of families
- Improving the 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:

4.1 Sustainability and Transformation Plan

Sustainability and Transformation Plans (STPs) provide us with a significant opportunity to bring together organisations across a geographical footprint to develop shared plans and priorities to ensure sustainable health and care services for the future by closing the three gaps as identified within the *5 Year forward View*:

- Health and Well being
- Care and Quality
- Finance and Efficiency

The Northumberland Tyne and Wear (NTW) footprint has recently been expanded to include the North of County Durham with specific details supporting this currently being discussed and agreed between relevant stakeholders.

The NTW(ND) Sustainability and Transformation Plan will not replace existing plans to improve services in local areas. Instead it will act as an 'umbrella' plan holding underneath it a number of different specific plans to address the challenges.

Early drafts of the STP plan have been submitted to NHS England in April and again in June 2016. These iterations of the plan were developed with representatives from each of the three Local Health Economy Areas to ensure they reflected the key priorities, transformation and reform work underway at a local level. Following submission of the draft plan to NHS England in June 2016 further work has been identified and a new submission date has been scheduled for the 21st October 2016.

We anticipate that the draft plan currently in development for the October 2016 submission will be shared with stakeholders to gather their views and inform the next stages. It is critical to recognise that there will be no changes to services people currently receive without engagement and where required consultation.

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

4.2 Accountable Care Organisation

During 2015, NHS North Tyneside Clinical Commissioning Group reviewed the possible options to identify the best way to commission affordable, sustainable and quality healthcare that would meet future needs for patients in the borough. In November 2015, it was concluded that an Accountable Care Organisation (ACO) was the best option, with the aim of achieving full ACO operation from April 2017.

In order to achieve this, key partners entered into a 'Memorandum of Understanding' and committed themselves to undertaking a substantial amount of work to achieve and reach an agreement on the proposed model and future ways of working.

The decision on whether or not to 'go live' would be made by both the CCG and ACO partner organisations by the end of September.

In addition to the ACO work, the CCG is now required to implement the legal directions from NHS England which are to stabilise the financial and management position of the CCG so that its commissioning capacity can be strengthened in North Tyneside.

Despite significant progress and meeting the programme milestones, the CCG and its ACO partners have concluded that the work on the ACO model will pause. It has become apparent that the ambition of establishing a full ACO operation from April 2017 is not realistic. However, all ACO partner organisations remain committed to place based commissioning which will integrate mental health, physical health and social care services. The ACO model will be given further consideration by January 2017.

5. Decision options:

The Board is not being asked to make any decisions at this meeting regarding these items.

6. Reasons for recommended option:

See paragraph 5.

7. Appendices:

Slide Presentation Pack: Update on Northumberland, Tyne and Wear Sustainability and Transformation Plan.

8. Contact officers:

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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 2016

COMPLIANCE WITH PRINCIPLES OF DECISION MAKING

10 Finance and other resources

There are no financial implications directly arising from this report.

11 Legal

There are no legal implications directly arising from this report.

12 Consultation/community engagement

Consultation has and will be conducted on component parts of the Sustainability and Transformation Plan as it affects populations within the NTW footprint. In North Tyneside, the CCG has conducted a public consultation on the future of urgent and emergency care services, the results of which has been published, although decisions on services has yet to be concluded.

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

Risks identified will be managed within standard NHS organisation risk management processes.

16 Crime and disorder

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

SIGN OFF

Director of Public Health

Chair/Deputy Chair of the Board

Chief Finance Officer

Head of Law & Governance