

Friday 3 March 2017

Hello my name is Rob, and welcome to the STP update for this week.

There are a number of principles that underpin the fact that our STP is based on collaborative leadership across the whole system. I have always believed that the issues facing health and care require a whole system focus, delivered across a number of years. This is being reinforced almost daily by a series of news reports and my own experience as a front line Chief Executive.

Yesterday, the [Care Quality Commission published a report into the State of Acute Hospitals](#) that was accompanied by Sir Mike Richards' view that:

"The model of acute care that once worked well cannot continue to meet the needs of today's population".

He later talked of GPs, Care Homes and Hospitals working together to transform care. This warning of a "burning platform" comes a few months after the CQC had stated that the Social Care Sector was at a "tipping point". In my experience it is unprecedented for the quality regulator to make statements about the whole system in this way, underscoring that we need to drive on with changes to the way health and care is delivered.

This includes in Mental Health Services, where the Task Force has just published its 'one year on' for the [Mental Health 5YFV](#). One statement stands out clearly for all of us in mental health services and is equally applicable to the STP:

"Delivering this sort of change is not just about writing plans or making national announcements, but about people seeing and feeling the benefit."

As we collectively work to sign off the assurance letters on the [Mental Health Investment Standards](#) [page 12] showing how we back the Mental Health 5YFV, we need to keep this in mind. I have been doing so with my Clinical Commissioning Groups (CCGs), understanding that headline growth figures reflect investments in other providers as entirely right when it backs change and improvement. I also see that some funding is at risk because of demand elsewhere in the system and the degree of transparency about this gives me greater confidence that we can have the right conversations about the STP.

This reality of the current financial plans versus the STP assumptions will be discussed at the next leadership day. This builds on work of the Directors of Finance, who met this week to assess the state of play. Some tough choices lie ahead and we need to ensure we are open and transparent about what they are and the consequences for organisations within the region. The organisational development session next week, run by Practiv, will be an excellent opportunity to challenge ourselves about our collective leadership – something the Care Quality Commission (CQC) said was seen in systems and organisations that perform well.

This will require good input from the local authorities too. Ian and I met with the West Yorkshire Health and Care Consultative Group on Wednesday. This is an informal forum set up to facilitate political consideration of the broad range of issues which impact on the efficiency and effectiveness of health and care services in West Yorkshire. It was a positive first meeting, where we discussed shared challenges and opportunities. We are keen to build on the momentum and are meeting next month to consider how the forum fits with the emerging governance in West Yorkshire.

This is all in a context where national bodies are raising expectations of us and our STP. NHS England in March will publish a **Five Year Forward View Delivery Plan** that will set out what the NHS and its partners will deliver in the next two to three years, within the resources available. This Delivery Plan will explain the improvements needed through the extra investment planned for services, such as mental health and cancer services (we are waiting to hear whether we have been successful in securing some of this money and hope to hear more in the next few weeks).

The Delivery Plan will also describe the changes to urgent and emergency care that people can expect to see in the coming years, using technology to help patients get the right care in the right place. It will also aggregate some of the changes planned in the 44 STP areas.

I have been asked to consider what practical support I need to strengthen our STP, the leadership and infrastructure. We are already seeing alignment of some elements of NHS England resources on planned care, finances and primary care into our programmes, which gives us extra capacity to implement our plan. The Steering Group will now ensure that we consider this question further, following the leadership day next week. To help with this a small amount of centrally held transformation funding will be made available. We may also be asked to develop our own STP Delivery Plan and look at how we may be affected by a formal appointment process for STP leaders given greater control in bringing NHS resources together to implement change at pace. I'll keep you posted when I know more.

You may have also heard the announcements today from NHS England Chief Executive Simon Stevens that hospital bed closures arising from [proposed major service reconfigurations](#) will in future only be supported where a new test is met that ensures patients will continue to receive high quality care. This is a welcome development that will come into play from April 1 and is in line with our commitments around positive engagement with the public and stakeholders. This is apparent in the good response to our stroke engagement work with around 650 people completing the survey so far and various conversations taking place across the area with staff, public, patients and voluntary groups who specialise in this area; some of which have been led by stroke consultants. The engagement will end on the 15 March so there is still time to have your [say](#).

On the theme of delivery plans, people from across WY&H have got together to develop and deliver a single plan to achieve our ambitions to improve cancer outcomes and experience for people. WY&H Cancer Alliance Programme Management Office are coordinating the work and there was a meeting today to progress the development of the plan which will be shared with NHS England at the end of March. Cancer is a priority programme for our STP and a key recommendation from the National Cancer Taskforce report '[Achieving World Class Cancer Outcomes: a Strategy for Cancer 2015-2020](#)' was to establish local Cancer Alliances. Our local ambitions mirror the strategic priorities of the Cancer Taskforce with proposals for work around prevention, earlier diagnosis, modernising treatment services and transforming support for those living with and beyond a cancer diagnosis.

There are three gaps we are addressing on our STP and tackling health inequalities is a priority. Public Health England, NHS England, and the Yorkshire and Humber Directors of Public Health are ambitious for our STP leading the way nationally in reducing health inequalities across the region and within our local areas. Public Health England is facilitating a workshop in April to focus on the implementation phase of the STP and will cover prevention, primary care, and secondary care. For more information e-mail Jayneallen@nhs.net. Please note places are limited.

See you next week, Rob

What's happening next week?

- The next leadership day will take place on Tuesday. **Just to remind everyone we are starting the larger leadership session at 1pm** so that we can have a substantive discussion on finance and an OD session facilitated by Practive.
- Healthwatch will start engaging with the public from Monday on 'follow up' outpatient appointments. There is a potential to learn from the feedback Healthwatch receive in terms of a consistent WY&H approach. A short animation explaining the idea simply can be found on YouTube [here](#).
- Rob is speaking at a Vodaphone "[Transforming the Workplace](#)" event on Friday about agile working and transformation.

For information

- NHS Improvement has produced an [animated film](#) to explain what seven day hospital services are and the potential benefits to patients and staff. It explains the four priority clinical standards for urgent and emergency care which are expected to be met every day of the week.
- A [local investment programme](#) run by the [Care & Health Improvement Programme](#) at the Local Government Association, in partnership with NHS Digital, is inviting councils to bid for one-off funding of up to £50,000 for projects (to be delivered during 2017/18) that seek to use information and technology to improve adult social care outcomes and deliver financial savings. Deadline for expression of interest is Friday 17 March 2017 using the [online application form](#). For more information contact socialcaredigitalmaturity@local.gov.uk.
- Rob took part in a media interview with the Royal College of Psychiatrists this week. They were particularly interested in his views as a CEO of mental health services and as an STP lead.
- The HSJ spoke to Ian Holmes this week about the development of the 11 CCG Joint Committee – they are keen to understand where we are up to alongside other STP areas. A follow up response has been sent.
- The Care Quality Commission has published a report which says, safety at four in five Hospital Trusts in England are below the expected standard. To view BBC coverage on this report's click [here](#).
- National media coverage has been received with regard to a report produced by the King's Fund into NHS finances, to view the coverage click [here](#).