

Friday 31 March 2017

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

The news today is full of trade-offs - better cancer care, mental health, emergency and GP services for slightly longer waiting times for some operations. This has been prompted by the publication of the [Next Steps on the NHS Five Year Forward View](#) Media headlines have seized on the negative side of this on 18 week waits. This is a pity as the document is a welcome, clear and coherent piece that provides certainty where it is needed and gives freedom where it is required. It's probably the best national guidance on the future of the NHS since the NHS Plan in 2000. It carries none of the unprecedented growth of that plan and this is reflected in its balanced tone.

The Next Steps also clearly places our STP in context, making it the 'support chassis' for change. Behind this draft phrase is something really important. Usually, hierarchies are created where bigger geographical bodies are in charge of smaller areas – the old Regional Health Authorities are a good example. This is not the case today; STPs are the servant of the organisations within their area, providing support and a mechanism for coordination and collaboration. In some, there will also be the opportunity to manage transformation funding too. And the policy agenda of urgent care, cancer, mental health, primary care and integration is aligned to our own. Our approach of making place the foundation of the STP looks increasingly the right choice.

The document also makes welcome reading on progress. It's always helpful to reflect on our achievements. They are substantial and our staff deserve the recognition for both increasing the volume of service delivery and changing the way we operate. With vanguards, pioneers, acceleration zones and the annual reality of cost improvement, we have some of the best innovations in the NHS happening right here.

Your leadership is also worth commending – in these tough times we continue to progress and this should be celebrated. We are also progressing in ways that are focused on doing the right thing, putting services first. I was reminded of this at the event I attended in Leeds on Monday. The clinical commissioning groups (CCGs) presented their approach to moving from three teams to one. I was impressed with the pace, the values based approach and the personal courage people had adopted to make change quickly. All this has happened without a penny spent on external consultants too.

Other parts of the country are now taking note and asking how Leeds has done it. Leadership is a big part of the answer.

I will not be attending the Leadership Day next week as I am on leave and Jo Webster will be taking you through a closer look at the publication of the Next Steps. In particular we will be considering the impact this will have on the development of our STP implementation plan and the important links between the two – and most importantly what it means for the 2.6million people living here in WY&H.

It would be remiss of me not to mention Brexit in my update this week, namely the signing of the letter which formally invokes article 50 of the treaty of the European Union. Many unanswered questions lie ahead and the debate continues as to whether this will free up more or less spend on public services, what this will mean for medical research and importantly the 55,000 of the NHS's 1.3 million workforce and 80,000 of the 1.3 million workers in the adult social care sector (Health and Social Care Information Centre 2015; Skills for Care 2016). All remains to be seen over the next two years and the [NHS Confederation](#) has launched a new programme building on its [Cavendish Coalition](#) to lobby on our behalf. It is widely known that health and social care organisations are struggling to recruit and retain permanent staff and this makes the work of Mike Curtis and Chris Mannion around the workforce strategy extremely important.

What else has been happening this week?

There was a meeting of the **Stroke Task and Finish Group** on Thursday, which includes reps from the five area hospitals, Yorkshire Ambulance Service and commissioners. This week's meeting was chaired by Rob Harrison, Chief Operating Officer at Harrogate and District NHS Foundation Trust. Rory Deighton from Healthwatch gave a brief overview on the recent stroke engagement. This led to a good discussion around patient care and experience. The data is being analysed and we will share the engagement report as soon as we can.

Jonathan Booker, Senior Analyst presented the findings of the recent data gathering exercise on the stroke workforce and the group discussed next steps. Jonathan is working with Mike Curtis and Chris Mannion on the workforce productivity element of their work force strategy, which this will feed into.

We are waiting to hear whether we have **secured funds** for diabetes work and for the Cancer Alliance diagnostic work. We are also hoping that in 2017/18 that will be further transformation funding for enhanced health in care homes. With the growing need for more integrated working across the sector for older people, care homes have a critical role to play. Ros Tolcher will be talking about a new care home charter, which cuts across both health and social care, at the **Leadership Day on the 4 April**.

Karen Jackson will also be coming along to update us on the **West Yorkshire Accelerator Zone** next week. Following the success of the WYAZ in delivering performance against earlier funding, NHS England has confirmed this week that we will receive further funding for the next three months, so that the work around reducing the pressure on our A&E departments can continue at pace. The funding, totalling over £4m, may be the last we will receive of this kind and it's critical that it delivers best value. The very fact that we have received further funding is down to the success of the work done across the system, in our operational teams and through the support of leaders in the STP.

The advert for Independent Lay Chair for the **Joint Committee of CCGs** is gathering interest and will close on the 3 April. We have also received good interest in the lay members' roles. You can find out more [here](#).

We will appoint a Chair in time for the first meeting of the Committee in May. Collaborative Forum members will be signing the memorandum of understanding for the new Joint Committee next week.

The Leeds system met on Monday, Ian and I attended to give a WY&H perspective. It was great to see the leadership from across Leeds embodying the approach needed to deliver excellent local place based plans.

Council politicians and officers rubbed shoulders with NHS providers and commissioners, as well as charities, Healthwatch and the Arm's Length Bodies. Real and genuine progress is being made which reinforces the subsidiarity principle we apply in our STP and keeps the energy and focus in the right place.

Finally, Matt Ward has agreed to join the STP core team on secondment from April. Matt is currently the Chief Operating Officer at Leeds South and East Clinical Commissioning Group. He brings with him a wealth of knowledge and expertise. His role will include strengthening the relationship and alignment between the six places and wider WY&H work.

I'm looking forward to working more closely with Matt over the coming months – and welcome the additional support he will bring to us all. He joins a blossoming team of recruits, staff aligned from NHS England and secondees from NHS organisations, which means we are able to move at a much faster pace.

Who knows, we may even be able to enter the coterie of STPs going further faster.

Have a good weekend

What's happening next week?

- Closing date for the Joint Committee Independent Chair is on Monday.
- The Leadership Day takes place on Tuesday.
- Cancer Alliance will be planning a stakeholder submit event to take place in June at their meeting on Wednesday.
- There is a development day for the urgent and emergency care leaders for Yorkshire and Humber on Wednesday.
- Ian and Karen will be meeting with the Yorkshire and Humber Staff Partnership Forum on 7 April to give an STP update and to talk about staff engagement. Rob will attend a meeting in October.

For information

- The West Yorkshire and Harrogate Cancer Alliance are working with Cancer Research UK to appoint a Clinical Lead to help shape and support the development of the Cancer Alliance, for up to two sessions per week. The role provides a unique opportunity for an experienced GP with a special interest in primary care cancer control to get more involved. The closing date is 18 April. Please contact sean.duffy@nhs.net for more information.
- The King's Fund is holding a 'building collaborative leadership' event for health and social care professionals on 18 May. You can find out more [here](#)
- Public Health England (PHE) 'One You – Physical Activity' and 'Active 10' campaign will launch 20 March 2017. An employer toolkit is available that can be ordered directly from Public Health England (PHE). A password is required and this is 'walkatwork17' and is case sensitive. Information on promoting walking, use of the PHE Active 10 app and details on the "How are You" quiz are available for communication leads via the [Campaign Resource Centre](#)
- NHS England will be leading a review of low value prescription items from April 2017 and introducing new guidance for Clinical Commissioning Groups (CCGs), with a view to substantially saving NHS expenditure in this area. It follows extensive work by NHS Clinical Commissioners which identified significant areas where potential savings can be made, up to potentially £400m per year. More information is available [here](#)