



**Full Council**

**Date: 23 January 2017**

**Subject: Lincolnshire Sustainability Transformation Plan (STP)**

Report by:

Chief Executive

Contact Officer:

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Purpose / Summary:

To provide an overview of the Lincolnshire Sustainability Transformation Plan (STP). A briefing note to introduce the STP forms the basis of this report. A presentation will be delivered to Full Council by a Clinical Commissioning Group representative. The presentation will not be available for circulation prior to the meeting.

**RECOMMENDATION(S):**

**That members note the information relating to the Sustainability Transformation Plan**

**That members note that the STP is a work stream of the WLDC Health Commission**

**IMPLICATIONS**

**Legal: None arising from this report**

**Financial: 123/17 None arising from this report**

**Staffing: None arising from this report**

**Equality and Diversity including Human Rights: N/A**

**Risk Assessment: N/A**

**Climate Related Risks and Opportunities: N/A**

**Title and Location of any Background Papers used in the preparation of this report:**  
Lincolnshire Sustainability Transformation Plan:  
<http://lincolnshirehealthandcare.org/en/stp/>

**Call in and Urgency:**

**Is the decision one which Rule 14.7 of the Scrutiny Procedure Rules apply?**

i.e. is the report exempt from being called in due to urgency (in consultation with C&I chairman)

**Yes**

**No**

**Key Decision:**

A matter which affects two or more wards, or has significant financial implications

**Yes**

**No**

## 1. Introduction

In January 2016 NHS England asked all 44 areas of the country to each produce a single five year sustainability and transformation plan (STP). The aim of the STP process was to see how, by working together, health and care organisations could improve the health and well-being of their resident population and increase the clinical and financial sustainability of local health and social care services.

Also required within each STP was evidence of how it would contribute to the delivery of the NHS England Five Year Forward View which sets out the national direction for health and care in the country.  
<https://www.england.nhs.uk/ourwork/futurenhs/deliver-forward-view/stp/>

Lincolnshire's STP covers the geographic county of Lincolnshire. It does not include North Lincolnshire or North East Lincolnshire local authority areas.

**Lincolnshire's STP can be accessed here:**  
<http://lincolnshirehealthandcare.org/en/stp/>

Lincolnshire's STP was published in December 2016. Development of the STP was led by Lincolnshire's 7 health organisations:

- Lincolnshire West Clinical Commissioning Group
- Lincolnshire East Clinical Commissioning Group
- South West Lincolnshire Clinical Commissioning Group
- South Lincolnshire Clinical Commissioning Group
- United Lincolnshire Hospitals NHS Trust
- Lincolnshire Community Health Services NHS Trust
- Lincolnshire Partnership NHS Foundation Trust

The STP development has also included discussion and input from Lincolnshire County Council officers, in particular around how health and social care services can be better joined up and how services in the community which prevent ill health can be improved.

Other key organisations that have contributed to the development of the Plan, include the East Midlands Ambulance Service, NHS Trust, health providers, GPs and pharmacies and local organisations from the public, private and voluntary sector that provide relevant services that support wellbeing in the community. Healthwatch Lincolnshire sit on the stakeholder board.

The vision for Lincolnshire's STP is "to achieve really good health for the people of Lincolnshire with support from an excellent and accessible health and care service delivered within our financial allocation".

## 2. STP Priorities

- Spend more money on keeping people well and healthy

- Support people to take more responsibility for their care and increase the number of people who use personal health budgets for their health and care
- Reduce the number of people needing to be admitted to hospital and instead provide care in the community through joined up neighbourhood care teams
- Have a network of small community hospital facilities and urgent care centres to work with neighbourhood teams
- Have a small number of specialised mental health inpatient facilities to provide support to neighbourhood care teams and community hospitals
- Have a smaller acute hospital sector providing emergency and planned care with specialist services for things like heart attacks and strokes and maternity and children's services
- Have a consistent approach for which patients can be referred for treatment to hospital, based on evidence of what has the best results for patients
- Improve the effectiveness and safety of services so patients have a better experience and we meet all national standards for care

### *Building on the Lincolnshire Health and Care Plan*

The Lincolnshire STP builds on the Lincolnshire Health and Care programme (LHAC). LHAC was launched in 2013 as result of organisations in Lincolnshire recognising that current services did not adequately meet the needs of residents and respond to growing demands and financial pressures. Because of this, all the health and social care organisations collaborated for the very first time to attempt to tackle the problems and to design a new model for health and care in Lincolnshire enabling people to access the right services at the right time now and in the future. More information on the LHAC programme can be accessed at [www.lincolnshirehealthandcare.org](http://www.lincolnshirehealthandcare.org)

The primary focus of the LHAC programme has been clinical quality and safety, ensuring the resources that we have are deployed as effectively as possible to deliver services which people want and need and which are sustainable for future generations. Resources are staff, money and NHS buildings.

The LHAC programme was due to go to public consultation at the end of 2015, but the announcement of the STP process delayed this. It was agreed that the LHAC work would become the clinical work stream of the STP programme. The LHAC emerging model of joined up care, closer to home is the foundation for how STP partners see clinical services developing in the county and is aligned to the national Five Year Forward View for the NHS.

The scope of the STP is broader. It covers things like productivity and operational efficiencies ranging from how services are procured to how estates are best used, the development of the workforce and technology innovation.

### **3. STP decision making and consultation**

The STP is not a consultation document. It does not include questions for the public or stakeholders to formally respond to. However, we are advised that a full consultation process is planned for those elements of the plan (major service change) which require consultation and that is likely to take place in

May after the local elections. It is likely to cover changes to our hospital services (urgent and emergency care, women's and children's services, and some planned care) but this is subject to finalisation of the options. There is more work planned in January to evaluate the proposals that have been developed and which will need to go through assurance with clinical experts (the clinical senate, a regional independent body) and NHSE before consultation.

Between January and March, STP representatives are meeting with stakeholders to talk about the STP. The sessions will differ, depending on the audience, but are expected to cover the following:

- What the STP is / what it isn't
- How the STP been developed
- The key elements of the plan
- Some specific areas seeking views and input from public and stakeholders to help develop the plan. The feedback from these sessions will directly feed in to the plan

#### **4. Information from STP Representative regarding engagement with Elected Members**

*"We are committed to being as inclusive and open as possible. We will listen to all contributions and use these contributions to influence the decisions we make. You will be able to have a say in key decisions, including formal consultation. We are now only at the start of a five year process and will need more input and engagement with staff and public if we are to have the best chance of successfully transforming care.*

*At the briefing session(s) we would expect to get some general feedback from your members: what do they like about the plan, what are their concerns, what areas do they feel will have an impact on their residents and they want to know more about, how can the District Council input into developing the plan and support delivery? We would also cover some of the specific areas where we are looking for input – be that around self-care, how people access care etc. As this briefing is not a formal consultation process I would suggest that we would write up the notes from the session and feed them back into SET and the STP Programme Board to be considered as part of the development of the plan"*