



Health and care in South
Yorkshire and Bassetlaw

**Sustainability and Transformation
Plan – a summary**



Introduction

This is the summary version of the South Yorkshire and Bassetlaw Sustainability and Transformation Plan (STP).

It sets out our vision, ambitions and priorities for the future of health and care in the region and is the result of many months of discussions across the partnership, including with patient representative groups and the voluntary sector.

It is being shared widely, with views sought from staff, patients and the public on the high level thinking about the future of health and care services in the region. All feedback will be taken into account before any further work takes place.

The South Yorkshire and Bassetlaw STP is the local approach to delivering the national plan called the Five Year Forward View. Published in 2014, it sets out a vision of a better NHS, the steps we should take to get us there, and how everyone involved needs to work together.

25 health and care partners from across the region are involved in the STP, along with Healthwatch and voluntary sector organisations.

The ambition

The goal of the STP is to enable everyone in South Yorkshire and Bassetlaw to have a great start in life, supporting them to stay healthy and to live longer.

The thinking starts with where people live, in their neighbourhoods, focusing on people staying well. Introducing new services, improving co-ordination between those that exist, supporting people who are most at risk and adapting the workforce so that people's needs are better met are also key elements.

Prevention is at the heart – from in the home to hospital care, supported by plans to invest in, reshape and strengthen primary and community services. At the same time, we agree that everyone should have improved access to high quality care in hospitals and

specialist centres and that, no matter where people live, they get the same standards, experience and outcomes for their care and treatment.

In line with the GP Five Year Forward View priorities, we plan to invest in, reshape and strengthen primary and community services so that we can provide the support people in our communities need to be as mentally and physically well as possible. Mental health will be integral to our ambitions around improving population wellbeing.

We want to work together more closely to provide the care in the right place, at the right time and by the most appropriate staff. To do this we will develop innovative, integrated and accountable models of care and build on the work of the current partnership between NHS providers (Working Together Partnership Acute Care Vanguard) who have already come together to work collaboratively on common issues and goals.

The plan is also about developing a networked approach to services across South Yorkshire and Bassetlaw to improve the quality and efficiency of services, in areas such as maternity services. It is also about simplifying the urgent and emergency care system so that it is more accessible.

We also focus on other factors affecting health, including education, employment and housing, to not only improve the health, wellbeing and life choices, chances and opportunities of every person in the region but also to deliver a more financially sustainable health and care system for the future.

People's health is also shaped by a whole range of factors – from lifestyle and family backgrounds to the physical, social and economic environment. At the same time, NHS services tend to focus on treating people who are unwell. We need to look at the connections between the £11 billion of public money that is spent in South Yorkshire and Bassetlaw and the £3.9 billion that is focused on health and social care.



We will work better together to get the best value and services for everyone. If we don't work differently now, in five years' time, there would be increasing demand on our services and we would have an estimated financial shortfall of £571 million. Therefore, doing nothing is not an option. The way we are organised is out of date compared to people's needs – we therefore need to rethink and improve how health and care services are delivered.

By working more closely and in new ways, we will also contribute to the region's economic growth. Helping people to get and stay in work, as well as supporting their health and wellbeing, will help to keep South Yorkshire and Bassetlaw economically vibrant and successful.

The case for change

There have been some big improvements in health and social care in South Yorkshire and Bassetlaw in the last 15 years. People with cancer and heart conditions are experiencing better care and living longer. There has also been improvement in mental health and primary care services. On the whole, people are more satisfied with their health and care services.

However, people's needs have changed, new treatments are emerging, the quality of care is variable, and preventable illness is widespread.

Quality, experience and outcomes vary and care is often disjointed from one service to another because our hospitals, care homes, general practices, community and other services don't always work as closely as they should. STP organisations have had some good Care Quality Commission feedback but there are areas for improvement.

In addition, there are some people admitted to hospital beds who could be cared for in the community if the right support was in place. There are growing waiting times for many services and access to primary care needs to be improved.

In some areas, there is a national shortage of clinical staff. Indeed, we are already consulting on proposed changes to hyper acute stroke services, where people are treated for up to the first 72 hours after having a stroke, and some children's surgery services in the region because such shortages are already having an impact.

Furthermore, there are high levels of deprivation, unhealthy lifestyles and too many people dying prematurely from preventable diseases and there are significant inequalities across the region.

There are also significant financial pressures on health and care services – with an estimated gap of £571 million in the next four years.



Working together

Our plan is built on a history of strong relationships between our local organisations and being able to quickly develop a strong partnership, where we can all see the opportunities and are motivated to deliver significant improvements for our 1.5 million population. It is about working together even better, and in new ways.

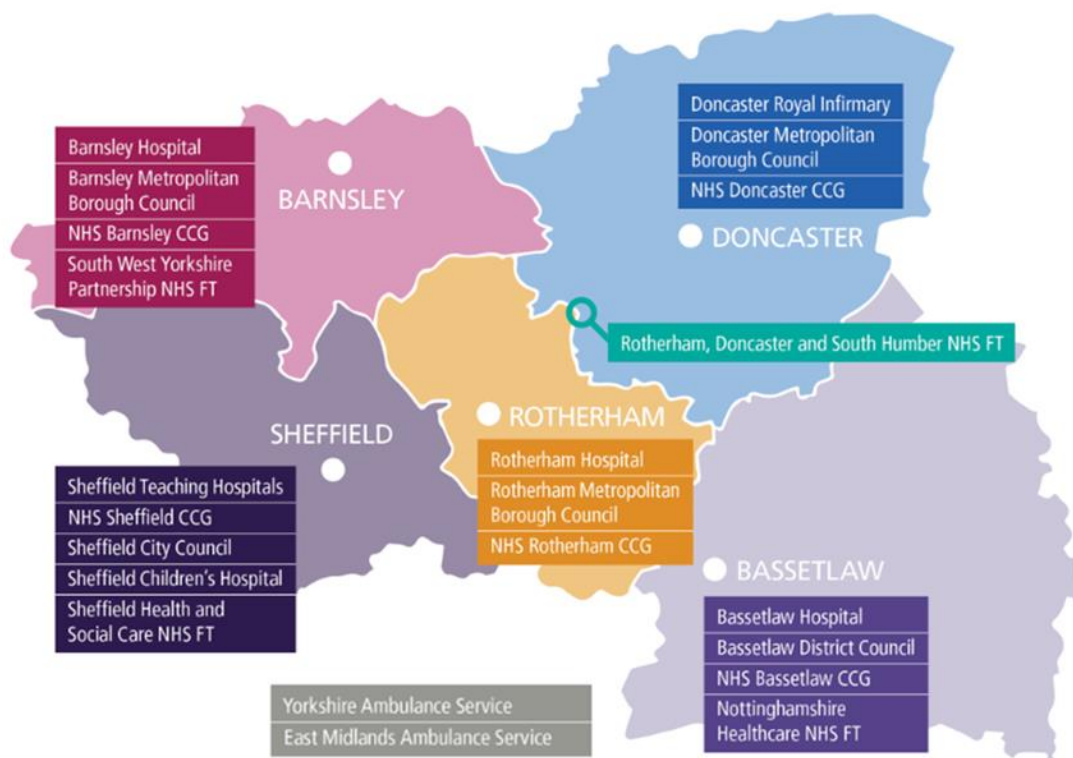
It is based on the five 'places' within South Yorkshire and Bassetlaw – Barnsley, Bassetlaw, Doncaster, Rotherham and Sheffield.

Our 'place' plans are the foundation of what will be delivered in each area and they set out how the improvements from the new ways of working and prevention will be made. These five 'place' plans focus on investing in primary and community care, putting the greatest emphasis on helping people in their neighbourhoods and managing demand on services. They also hone in on improving

health and wellbeing and the other factors that affect health, such as employment, housing, education and access to green spaces.

Work on 'place' plans alone won't address the challenges, and so there are also eight priority areas of focus for the whole STP area:

- Healthy lives, living well and prevention
- Primary and community care
- Mental health and learning disabilities
- Urgent and emergency care
- Elective and diagnostic services
- Children's and maternity services
- Cancer
- Spreading best practice and collaborating on support services



Taking decisions together

To deliver the change that we need in South Yorkshire and Bassetlaw, the statutory organisations involved in health and social care have formally agreed to work together under new arrangements to help them to start to work and take decisions together.

An Oversight and Assurance Group will provide oversight governance, a Collaborative Partnership Board (CPB) will set the vision, direction and strategy and an Executive Partnership Board will support the CPB and develop policy and make recommendations to the Board. Already in place are a Joint Committee of NHS Clinical Commissioning Groups (JCCCGS) and an NHS Provider Trust Federation Board.

All these will run in parallel with how partners are structured and help make decisions. This interim arrangement will remain in place until April 2017 during which time a review will take place to establish the right governance.

The members of these groups come from all statutory South Yorkshire and Bassetlaw health and social care organisations plus national bodies as appropriate (NHS England, NHS Improvement, Health Education England and others), as well as other providers and representatives from primary care, the voluntary sector and patients, including Healthwatch.

A key principle of the arrangements is that local commissioning will remain a local responsibility. The JCCCG will only take precedent over local decisions where it agrees that it would be more efficient and effective for decisions to be made at a South Yorkshire and Bassetlaw level.

Rethinking and reshaping health and care

In rethinking and shaping how we currently work, we want to focus on:

- Putting prevention at the heart of what we do
- Reshaping primary and community based care
- Standardising hospital services

We want to radically upgrade prevention and self-care, to help people to manage their health and look after themselves and each other. This will require improvements in how health and care services connect with people to help them stay well and also in how illness is detected and diagnosed.



Investment in health at community levels will be transformed. Focusing more on helping people where they live will also have an impact on people's employment and employability. Primary care services will be improved through the transformation of community based care and support and with GPs coming together at the forefront of new ways of working. Through wider GP collaborations, it will be possible to introduce new services, improve co-ordination between those that exist, support people who are most at risk and adapt the workforce to better meet people's health and care needs.

At the same time, everyone should have better access to high quality care in specialist centres and units and, no matter where people live, they get the same standards, experience, and outcomes for their care and treatment. We will do this by standardising hospital care and developing a networked approach to services.

We also think that exploring how we can spread best practice and collaboration across our support services, such as our estates, procurement and pharmacy management, will enable us to meet the challenges. Technology and digital integration will also play a major role in helping shape the future of health and care services.

Developing and supporting our staff is the only way we will achieve these ambitions. We need the right people, with the right skills in the right place and the right time – whether this is in general practice, the community and neighbourhoods or in hospitals.

We will need to support our workforce, developing ways of working that help people live healthy lives in their homes and communities and supporting GPs to be as effective as possible.

We envisage a flexible workforce that comes together to offer people the best and most appropriate care.

Finance

We currently invest £3.9 billion on health and social care for the 1.5 million population of South Yorkshire and Bassetlaw. This includes hospital services, mental health, GP services, specialist services and prescribed drugs, as well as public health and social care services.

After taking into account the resources that are likely to be available and the likely demand for health and social care services over the next four years, we estimate that there will be a financial shortfall of £571 million by 2020/21.

If we do nothing to address this, £464 million will be the health service gap, while £107 million will be the social care and public health gap. If we are to achieve our ambitions, we need the £3.9 billion investment to work differently.

Our high level planning assumes a significant reduction in demand for hospital services and potential changes to services which, if fully developed into cases for change, would require public consultation.



Early implementation

We are already progressing a number of priorities, led by NHS Commissioners Working Together and the NHS Providers' Working Together Partnership Vanguard. We agree we want to take these forward using the governance we have put in place.

The areas are:

- Spreading best practice and collaborating on support services
- Children's surgery and anaesthesia
- Hyper acute stroke services
- Acute gastrointestinal bleeds
- Radiology
- Smaller medical and surgical specialties

Priorities in 2017/18

At the same time, we will focus on the following in the coming year from our priority list:

- Take the thinking further in our priority areas, involving staff and the public in discussions
- Develop primary care, with more care in the community and closer to home
- Improve cancer care, including chemotherapy and pancreatic cancer services and working as part of an alliance across our region and North Derbyshire
- Develop specialised services, such as vascular, children's, orthopaedics, neonatal and mental health services
- Finance, such as how we can be more flexible and accountable with our budget and getting the most out of our spend
- Governance, moving from the interim to longer term arrangements





Listening to our staff and communities

Between December 2016 and March 2017, we will connect and talk with the staff in each of our partner organisations and local communities about the plan. We will also be working with Healthwatch and our voluntary sector partners to ensure we have input and views from a wide range of communities.

We will take account of all views and feed these back into our plans.

For more information, and to download the full plan, go to: www.smybndccgs.nhs.uk or email: helloworkingtogether@nhs.net



Who is involved?

There are 25 partners involved in the STP; 18 NHS organisations, six local authorities and one children's services trust involved in the STP. The plan has been developed in consultation with them. They are:

NHS Barnsley Clinical Commissioning Group
Barnsley Hospital NHS Foundation Trust
Barnsley Metropolitan Borough Council
NHS Bassetlaw Clinical Commissioning Group
Bassetlaw District Council
Chesterfield Royal Hospital NHS Foundation Trust
Doncaster and Bassetlaw Hospitals NHS Foundation Trust
Doncaster Children's Services Trust
NHS Doncaster Clinical Commissioning Group
Doncaster Metropolitan Borough Council
East Midlands Ambulance Service NHS Trust
NHS England
Nottinghamshire County Council
Nottinghamshire Healthcare NHS Foundation Trust
NHS Rotherham Clinical Commissioning Group
Rotherham, Doncaster and South Humber NHS Foundation Trust

The Rotherham NHS Foundation Trust
Rotherham Metropolitan Borough Council
Sheffield Children's Hospital NHS Foundation Trust
Sheffield City Council
Sheffield Health and Social Care NHS Foundation Trust
NHS Sheffield Clinical Commissioning Group
Sheffield Teaching Hospitals NHS Foundation Trust
South West Yorkshire Partnership NHS Foundation Trust
Yorkshire Ambulance Service NHS Trust

It has also been developed in partnership with:

Healthwatch Barnsley
Healthwatch Doncaster
Healthwatch Nottinghamshire
Healthwatch Rotherham
Healthwatch Sheffield
Voluntary Action Barnsley
Bassetlaw Community and Voluntary Service
Doncaster Community and Voluntary Service
Voluntary Action Rotherham
Voluntary Action Sheffield



