

WOLVERHAMPTON CCG

Public Governing Body
11th April 2017

TITLE OF REPORT:	Current update on the BC STP
AUTHOR(s) OF REPORT:	Steven Marshall
MANAGEMENT LEAD:	Helen Hibbs
PURPOSE OF REPORT:	To advise GM members of the current status of the BC STP
ACTION REQUIRED:	<input type="checkbox"/> Decision <input checked="" type="checkbox"/> Assurance
PUBLIC OR PRIVATE:	Public
KEY POINTS:	<ul style="list-style-type: none"> • The FYFV next steps has recently been published which lays out the next steps for the STP • The 4 CCGs in the STP have already begun their agreed trajectory of collaboration
RECOMMENDATION:	For consideration and discussion
LINK TO BOARD ASSURANCE FRAMEWORK AIMS & OBJECTIVES:	The STP has a key consideration in how services may be delivered in and underpin new models of care that support care closer to home and improve the management of Long Term Conditions
1. Improving the quality and safety of the services we commission	The intent is for the STP to improve the quality of the services delivered to patients
2. Reducing Health Inequalities in Wolverhampton	The intent is for the STP to reduce health inequalities both in Wolverhampton and across the Black Country
3. System effectiveness delivered within our financial envelope	The STP is designed to deliver collaborative systems working



1. BACKGROUND AND CURRENT SITUATION

- 1.1. The 5YFV (published October 14) laid out the challenge of how the health system might work in the future in order to address the quality and financial sustainability gap and proposed the creation of new delivery models of care – MCPs (Multi speciality Community Providers) and PACs (Primary and Acute Care system). The 5YFV operating plan, published in December of the same year, then laid out the creation of STPs which sought to consider place based commissioning at a more ‘strategic’ level i.e. a wider geographical footprint, in order to maximise economies of scope and scale and minimise clinical variation, for certain commissioned services.
- 1.2. On the 31st March the NHS issued “NEXT STEPS ON THE NHS FIVE YEAR FORWARD VIEW” in which on the chapter regarding STPs (pp.31-34) it is stated “*all STPs need a basic governance and implementation ‘support chassis’*”
- 1.3. Under this specifically STPs will:
 - 1.3.1. Form an STP board drawn from constituent organisations and including appropriate non-executive participation, partners from general practice, and in local government wherever appropriate
 - 1.3.2. Establish formal CCG Committees in Common or other appropriate decision making mechanisms where needed for strategic decisions between NHS organisations
 - 1.3.3. Where this has not already occurred, re/appoint an STP chair/leader
 - 1.3.4. Ensure the STP has the necessary programme management support by pooling expertise and people from across local trusts
 - 1.3.5. Be able to propose an adjustment to their geographical boundaries where that is thought appropriate by local bodies in agreement with NHS England
 - 1.3.6. The corollary to not being prescriptive about STP structures is that the way to judge the success of STPs - and their constituent organisations - is by the results they are able to achieve
 - 1.3.7. The full paper is attached as appendix 1



2. Current Status of BC STP and actions regarding these guidelines

- 2.1. The following actions have been undertaken at an STP level, following a joint leadership meeting on the 2nd March. This has been communicated to all members of staff
- 2.2. The formation of a Joint Committee
- 2.3. Establishment of Task and finish areas along with facilitators have been established as outlined below

Communications and engagement

- o AO sponsor: Helen Hibbs
- o Manager: Mike Hastings
- o Purpose: To establish both standard communications relating to this agenda and any shared requirements for public engagement and/or consultation

Governance

- o AO sponsor: Paul Maubach
- o Manager: Sara Saville
- o Purpose: To organise the governance of the joint committee, clinical board and the task and finish groups; and to evaluate the consequences of CCG statutory duties on any future arrangements

Finance

- o AO sponsor: Andy Williams
- o Manager: James Green
- o Purpose: To develop a shared approach to financial planning and identify key financial risks to the Black Country system and consequential actions / review

Infrastructure including IM&T

- o AO sponsor: Helen Hibbs
- o Manager: Claire Skidmore
- o Purpose: To determine the opportunities for joint working on the use of IM&T, estates and the Black County digital roadmap

Systems design and contractual frameworks

- o AO sponsor: Paul Maubach
- o Manager: Neill Bucktin



- o Purpose: To establish the scope of services between local place and system-wide services; and develop the methodology for enabling each CCG to implement their placed-based model(s) of care

CCG collaboration

- o AO sponsor: Andy Williams
- o Manager: Sharon Liggins
- o Purpose: To explore the opportunities for either the sharing of ‘back office functions’ and/or to collaborate of common systems and processes to improve the effectiveness of the four CCGs on current activities

- 2.4. The BC STP Sponsoring group also reiterated in principle the continuation of the major areas as identified within the original STP submission i.e. One ‘Acute’ system, One MH system, 4 local place based systems.
- 2.5. No formal appointment process or lead and/or programme support arrangements have been finalised as of yet

3. CLINICAL VIEW

- 3.1. N/A

4. PATIENT AND PUBLIC VIEW

- 4.1. Engagement and discussion will be necessary for the delivery of the STP

5. KEY RISKS AND MITIGATIONS

- 5.1. The paper is intended to prompt the discussion on risks

6. IMPACT ASSESSMENT

Financial and Resource Implications

- 6.1. There will be as yet not fully explored financial consequences of a change in the local system dynamics

Quality and Safety Implications

- 6.2. New Models of Care will need to fully consider the quality and safety implications

Equality Implications



6.3. Equality will need to be considered in light of any proposed changes

Legal and Policy Implications

6.4. Guidance is not proposing any change to current legislation

Name: Steven Marshall
Job Title: Director of Strategy and Transformation
Date: 31/03/17

ATTACHED:

Appendix 1

