



Shaping Future Care

A Sustainability and Transformation Plan (STP) for Devon



Purpose

To provide Devon Health and Wellbeing Board with an update on the wider Devon Sustainability and Transformation Plan and Sustainability and Transformation Partnership

To set out the intentions, progress and next steps of each of the seven priority areas within the Sustainability and Transformation Plan, which is one of 44 such plans in England:

1. Prevention
2. Integrated care model
3. Primary care
4. Mental health and learning disability
5. Acute care
6. Children and young people
7. Productivity

The Devon Health and Wellbeing Board is asked to note the update on progress of the Sustainability and Transformation Plan and suggest opportunities for increased alignment to support delivery of the Health and Wellbeing Strategy

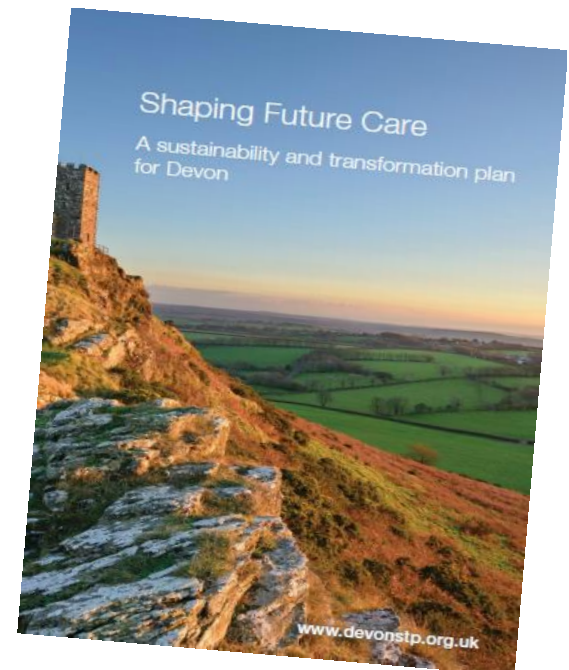
Context

The NHS and social care are facing unprecedented challenges:

- Huge growth in the use of NHS and social care services.
- Demand has risen by 50% in a decade
- An ageing population who are more and more reliant on support
- New medicines and treatments, which increases demand and costs
- Challenges in recruiting to core roles in the NHS and social care
- An annual funding envelope that is fairly stable

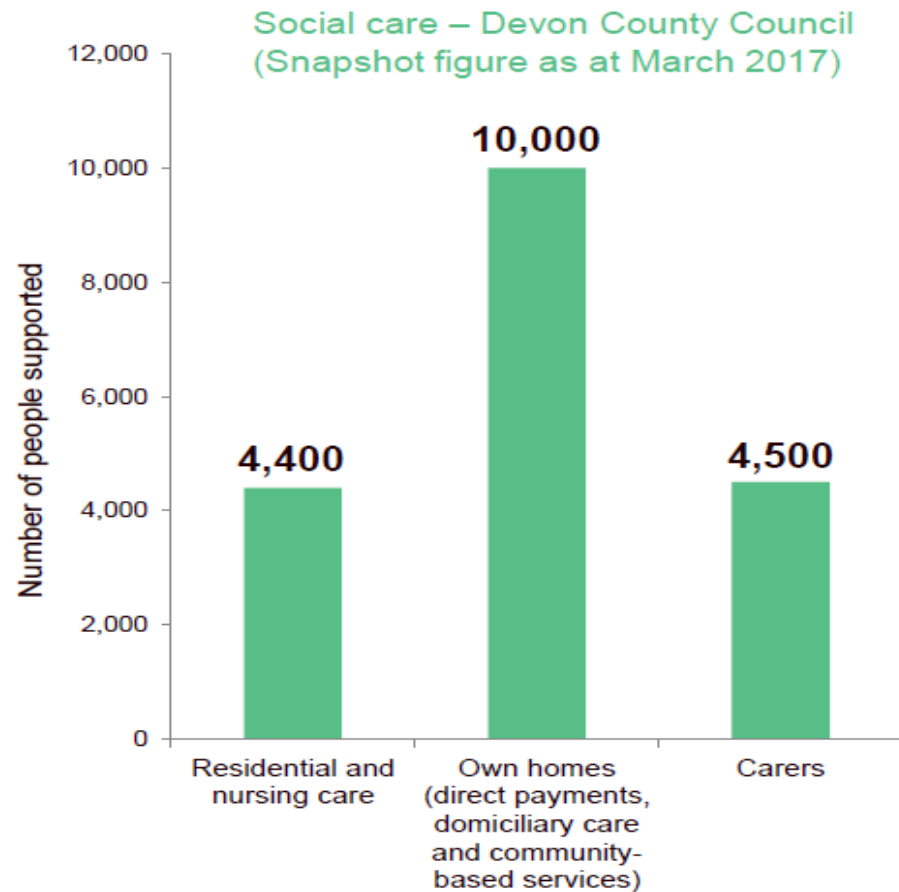
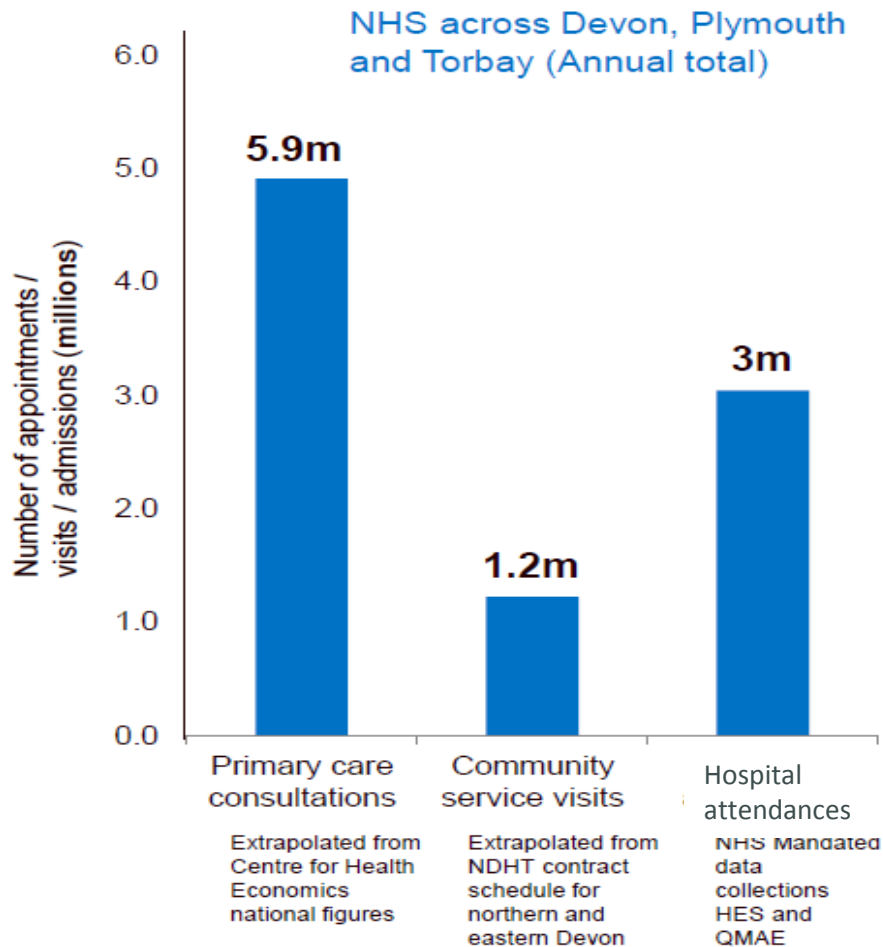
The NHS and social care need to change or will not address the challenges

The Sustainability and Transformation Plan aims to ensure fitness for the future



Where we are now

Number of people seen in Devon in 2016/17



Our health challenges include:

101,889 individuals with 2 long-term conditions (LTC),

40,583 with 3 LTC

162,048 hazardous and harmful drinkers

138,720 smokers (18+), 1268 mothers smoking at time of delivery and 33,967 smokers in routine and manual occupations

262,990 inactive adults

618,787 overweight or obese adults

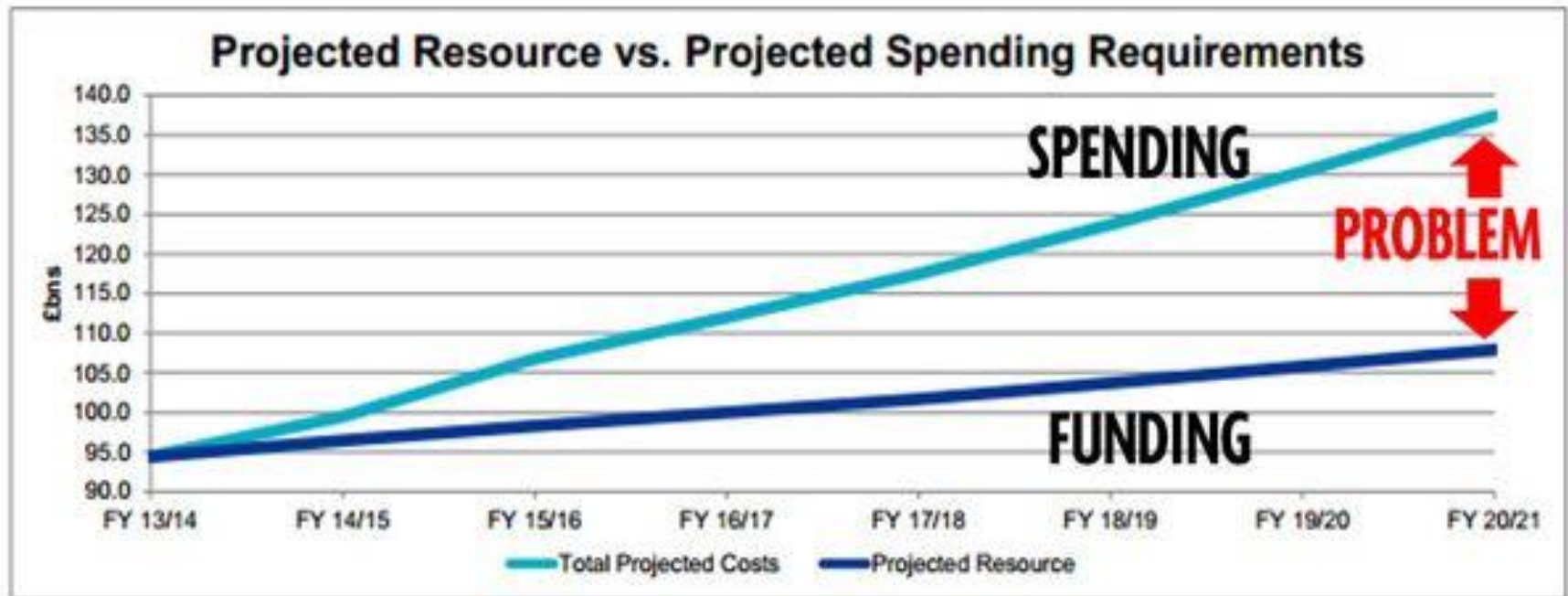
3411 deaths under the age of 75



The financial challenge

HEALTH FUNDING VS HEALTH SPENDING IN THE NEXT 10 YEARS

The funding gap is projected to be around £30bn by 2020/21.



Aims of the Sustainability and Transformation Plan

We will focus everything we do on: _____



Improving **health**
and **wellbeing**



Delivering **safe** and
high-quality care



Providing
cost-effective care

Health and wellbeing

Needs of ageing and growing population

Rising demands on the care system

Health inequalities across Devon

Care quality

Variability of quality in different areas

Mental health as important as physical health

The best bed is your own bed

Financial sustainability

We have to live within our means

Doing so, will not be popular

Huge impact across our services

Fair resource allocation

Whatever we do, we have to live within our means

- ❑ The NHS has to live within the budget that parliament allocates
- ❑ *“A small number of areas take more than their fair share at the expense of other people's hospital services, GP care and mental health clinics elsewhere in the country”*
- ❑ Our STP moves Devon system to financial balance over a 3 year period
- ❑ Will mean some tough choices



Prevention and promoting health

Key connecting priority between Sustainability and Transformation Plan and Health and Wellbeing Strategies

- ❑ Will address major health issues in Devon, such as smoking, obesity, physical inactivity, drinking at harmful levels
- ❑ Aim of this priority is to take action to tackle the top five causes of death in the under-75s: Coronary heart disease; Trachea, bronchus and lung cancers; accidents; Bronchitis, emphysema and other chronic diseases; and stroke by
 - Tackling environmental and social conditions to promote good health
 - Encouraging healthy behaviour
 - Managing early illness to prevent progression
 - Addressing loss of independence
 - Promoting well-being and self-care
- ❑ It will develop plans to help people lead healthy lives
- ❑ *Making Every Contact Count* will be key campaign

Integrated care model

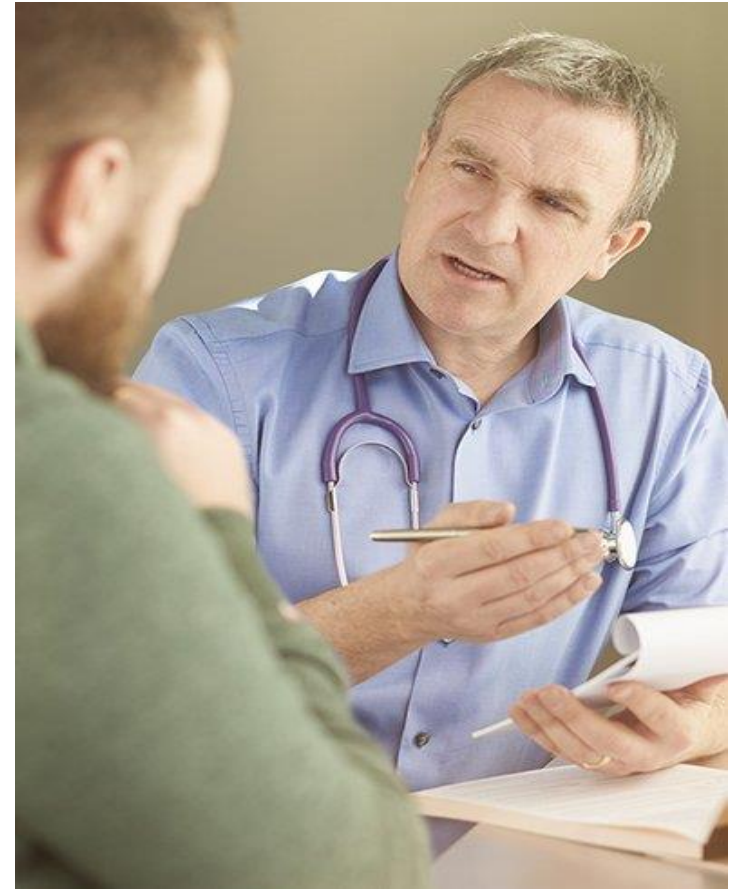
Key connecting priority between Sustainability and Transformation Plan and Health and Wellbeing Strategies

- Focus is understanding needs in a broader way, and working with public health, primary care, mental health, community health and social care, and communities themselves to strengthen integration and community resilience.
- The model of care is setting out to simplify and co-ordinate care and treatment based around individuals and with a shift of the balance to improved wellbeing and independence and pro-active care.
 - We reduce the number of different staff involved in looking after someone
 - We co-ordinate care and treatment appointments better
 - We ensure we don't duplicate work or miss things through poor co-ordination

Primary Care

GPs are and will continue to be at the heart of people's care

- ❑ We already have very good primary care in Devon, but these services are under pressure
- ❑ GP practices are facing a number of immediate challenges that need to be addressed in order to be fit for the future
- ❑ A new strategy has been developed and addresses some key issues including:
 - The GP workforce is ageing
 - Recruitment and retention of GPs and other clinicians
 - Need to plan to move towards 7-day working



Mental Health

Mental health was given prominence in the recent *NHS Five Year Forward View Delivery Plan*

- The agreed local priorities for developing mental health are:
 - Crisis and urgent care to make this more resilient 24 hours a day, 7 days a week
 - Dementia support in recognition of the growing numbers of people with dementia
 - Primary and secondary care interface for people with mental health needs for more co-ordinated and joined up support
 - Children and young people to increase access to mental health support and services

Key enablers are workforce and strategy development

Learning Disabilities

Our STP priority has identified four areas for improving services for individuals with a learning disability across Devon.

□ These are:

- Tackling health inequalities
- Promoting citizenship and optimising the independence of people
- Transforming Care Programme
- Improving support for people with autism



Acute hospital and specialist services

- ❑ Acute Services review designed to address:
 - Growth in demand
 - Significant workforce issues
 - Difficulty meeting national service quality standards
- ❑ Over 25 clinical workshops
- ❑ 100+ clinicians, managers and patients involved
- ❑ Unprecedented level of partnership working



The recommendations

- ❑ Clinicians recommended new ways to enhance how they work
- ❑ This includes adopting best practice models of care, improved resilience by partnering between hospitals, new workforce solutions to solve recruitment challenges, and use of technology
- ❑ This ensures that most of our acute services can be strengthened and made sustainable
- ❑ **This clinical work is the first stage in the review**
- ❑ As part of the second stage, the recommendations will be tested in more detail to ensure they can be delivered with safe, cost-effective and reliable staffing solutions

The recommendations in detail

Urgent and emergency care

- ❑ Proposal to keep 24/7 ED services at all 4 Devon hospitals
- ❑ This ensures that key emergency services for the population of Devon continue to operate at our four main hospital locations
- ❑ The four sites will be better networked with workforce solutions required to ensure that we have enough nurses, other clinical staff and doctors at junior, middle grade and consultant levels to provide safe, reliable care 24 hours a day, 7 days a week

Stroke


- ❑ We will continue to provide first-line emergency response for people experiencing symptoms of a stroke at all four hospitals
- ❑ Services will be supported by 'Acute Stroke Units' (ASUs) at all four sites to ensure rapid intervention and aftercare
- ❑ Work towards clinical best practice to improve outcomes for stroke patients by developing two specialist 'Hyperacute Stroke Units' (HASUs) in Exeter and Plymouth

The recommendations in detail

Maternity, paediatrics and neonatal

- ❑ Retain consultant-led maternity services at all four main hospital sites
- ❑ Clinicians have recommended that we adopt the strong evidence base for midwifery-led units co-located with consultant-led units
- ❑ Retain neonatal services at all four main hospital sites, with strong networking arrangements across Devon
- ❑ Propose to expand ambulatory paediatric assessment units, supported by inpatient beds on all four hospital sites

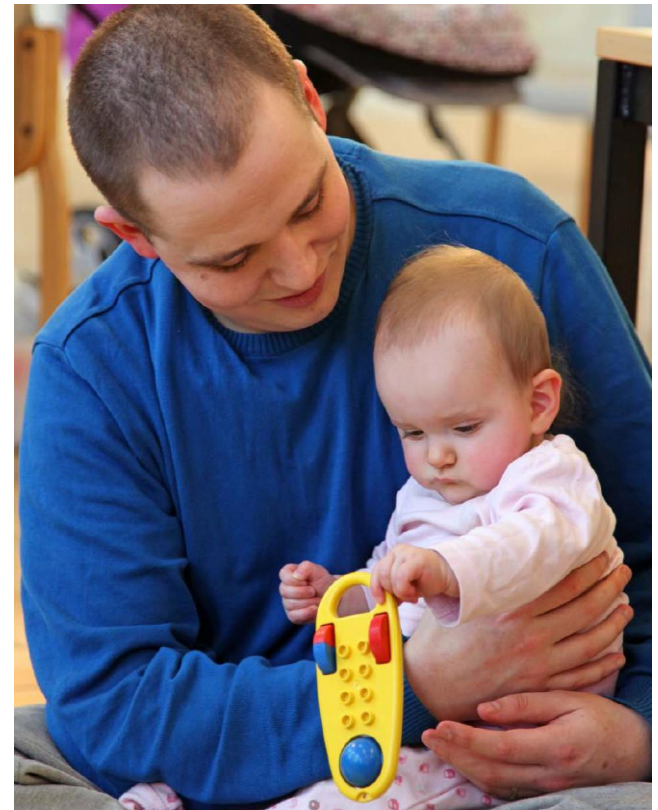
Other services

- ❑ Histopathology: accessed through local hospital, reported through 2 or 3 new specialist digital labs
 - ❑ ENT: Services will be delivered in all 4 acute hospitals in Devon with comprehensive services being retained in Torbay, Exeter and Plymouth hospitals and a satellite service in North Devon
 - ❑ Neurology: Devon-wide referrals and networked delivery
- 

Children and families

An analysis of the data from all partners and a review of the evidence base is being completed by Public Health to be considered by the programme leadership group:

- ❑ This will inform the actions to be taken in the four priority areas:
 - Prevention and health promotion for children to give them the **best start in life possible**
 - **Emotional Health and Well Being** from prevention / early intervention to specialist (tier 3 & 4) mental health services
 - **Safeguarding including a focus on** adult behaviours that can compromise the wellbeing of children
 - **Children with additional needs** (children with long term and/or life limiting illnesses of conditions)



Productivity

- ❑ It is vital that we ensure as much money as is possible is spent on frontline patient care
- ❑ This priority, therefore, focuses on:
 - Making savings in 'back office' services
 - Improving how we buy goods and services more efficiently
 - Using our buildings and sites in the most cost-effective and efficient way
- ❑ The review into corporate support services (such as IT, HR, communications, finance and governance) will look into how we can develop a 'shared service' model and make up to £12 million in savings

Progress and next steps

The first year as STP has seen steady progress

- ❑ System working has led to:
 - Real progress in tackling the finances
 - Improvements to service performance, notably urgent referrals for cancer treatment within two-weeks, psychological therapies for mental health, and improvements to A&E despite huge pressures
 - Stronger integration between health and care services
 - Two major public consultations on new models of care
- ❑ Huge challenges and changes to come and we need to step up the pace and pro-actively redesign care
- ❑ Next steps are further work on the priority programmes as a basis for an Accountable Care System and future place based plans and developments