South Yorkshire and Bassetlaw Sustainability and Transformation Plan

Collaborative Partnership Board

11 November 2016, Birch/Elm Room, Oak House, Rotherham

Decision Summary

Item	Lead
South Yorkshire and Bassetlaw Plan	
(a) that the South Yorkshire and Bassetlaw Sustainability and Transformation Plan Collaborative Partnership Board (STP CPB) published the plan, supporting the principles, ambition, vision and priorities and to work with the STP partners, noting this would also be discussed by each organisation for a considered response.	ALL
Communications approach and publishing the plan	
(a) that The STP CPB approved the communications and engagement approach to publishing the South Yorkshire and Bassetlaw Sustainability and Transformation Plan.	ALL
Independent review of hospital services	
(a) that Doncaster and Bassetlaw NHS Foundation Trust would share learning and information with WCG from work done to date on sustainability of services	DAWN JARVIS
(b) GF agreed to lead on PH intelligence regarding the independent review of hospital services with support. Further detail to be discussed with WCG	GREG FELL
(c) that the Yorkshire Ambulance Service would be included within the terms of reference and further comments be received by the STP CPB by 25 November on the terms of reference	WILL CLEAY- GRAY, ALL
(d) that the STP CPB supported the next steps, including the proposal for a summary scope to be developed to be used to invite proposals from external consultant. An update on progress to be delivered at the next meeting.	ALL
Terms of reference	
(a) that JS would provide comments on scope of the sustainability funding key responsibilities bullet point.	JOHN SOMERS
(b) that the terms of reference be brought back to the next meeting as a holding position of governance and that these be kept live to be amended as required.	WILL CLEARY- GRAY
	South Yorkshire and Bassetlaw Plan (a) that the South Yorkshire and Bassetlaw Sustainability and Transformation Plan Collaborative Partnership Board (STP CPB) published the plan, supporting the principles, ambition, vision and priorities and to work with the STP partners, noting this would also be discussed by each organisation for a considered response. Communications approach and publishing the plan (a) that The STP CPB approved the communications and engagement approach to publishing the South Yorkshire and Bassetlaw Sustainability and Transformation Plan. Independent review of hospital services (a) that Doncaster and Bassetlaw NHS Foundation Trust would share learning and information with WCG from work done to date on sustainability of services (b) GF agreed to lead on PH intelligence regarding the independent review of hospital services with support. Further detail to be discussed with WCG (c) that the Yorkshire Ambulance Service would be included within the terms of reference and further comments be received by the STP CPB by 25 November on the terms of reference (d) that the STP CPB supported the next steps, including the proposal for a summary scope to be developed to be used to invite proposals from external consultant. An update on progress to be delivered at the next meeting. Terms of reference (a) that JS would provide comments on scope of the sustainability funding key responsibilities bullet point. (b) that the terms of reference be brought back to the next meeting as a holding position of governance and that these be kept live to

Summary Version of the STP	
(a) that all comments on the summary STP document be received by 15 th November to be published on that date to accompany the main plan.	ALL
Strategic Commissioning Intentions	
(a) that the STP CPB approved the STP Strategic Commissioning Intentions to the shared with the SYB System.	RACHEL GILLOTT
Implementation plan and resourcing the approach proposals	
(a) that the STP CPB noted the immediate resource requirements and capacity gaps and agreed the principle of a fair share approach across SYB providers, commissioners and local authorities to resourcing the STP.	ALL
(b) that the STP CPB supported delegating the working up of proposals to the Finance Oversight Committee.	STP PMO
(c) that the potential risk to delivery as a result of the resource gap was noted.	ALL
(d) that a fair shares approach to resourcing be brought back to the next meeting	STP PMO
Governance review	
(a) that the STP CPB noted the interim governance proposals and supported the approach to establish a Governance Review Group, Chaired by the STP Lead and supported by Jayne Brown, Chair of SHSC.	ALL, STP PMO
	(a) that all comments on the summary STP document be received by 15 th November to be published on that date to accompany the main plan. Strategic Commissioning Intentions (a) that the STP CPB approved the STP Strategic Commissioning Intentions to the shared with the SYB System. Implementation plan and resourcing the approach proposals (a) that the STP CPB noted the immediate resource requirements and capacity gaps and agreed the principle of a fair share approach across SYB providers, commissioners and local authorities to resourcing the STP. (b) that the STP CPB supported delegating the working up of proposals to the Finance Oversight Committee. (c) that the potential risk to delivery as a result of the resource gap was noted. (d) that a fair shares approach to resourcing be brought back to the next meeting Governance review (a) that the STP CPB noted the interim governance proposals and supported the approach to establish a Governance Review Group, Chaired by the STP Lead and supported by Jayne Brown, Chair of

South Yorkshire and Bassetlaw Sustainability and Transformation Plan

Collaborative Partnership Board

Minutes of the meeting of 11 November 2016, Birch/Elm Room, Oak House, Rotherham

Present:

Andrew Cash, South Yorkshire and Bassetlaw STP Lead/Chief Executive, Sheffield Teaching Hospitals NHS Foundation Trust (CHAIR)

Louise Barnett, Chief Executive, The Rotherham NHS Foundation Trust

Adrian Berry, Medical Director, South West Yorkshire Partnership NHS Foundation Trust

Patrick Birch, Director of Improvement, Doncaster Metropolitan Borough Council

Des Breen, Medical Director, Providers Working Together Programme

Sandra Crawford, Associate Director of Transformation, Nottinghamshire Healthcare NHS Foundation Trust

Will Cleary-Gray, Director of Sustainability and Transformation, South Yorkshire and Bassetlaw STP Chris Edwards, Accountable Officer, NHS Rotherham Clinical Commissioning Group Adrian England, Chair, Healthwatch Barnsley

Cros Foll Director of Public Health Shoffield City Co

Greg Fell, Director of Public Health, Sheffield City Council

Idris Griffiths, Interim Accountable Officer, NHS Bassetlaw Clinical Commissioning Group Steve Hackett, Director of Finance, Chesterfield Royal Hospital NHS Foundation Trust Dawn Jarvis, Director of Strategy and Improvement, Doncaster and Bassetlaw Hospitals NHS

Foundation Trust

Alison Knowles, Locality Director North of England, NHS England

Wendy Lowder, Acting Executive Director of Communities, Barnsley Metropolitan Borough Council Ainsley Macdonnell, Service Director – North Nottinghamshire & Direct Services, Adult Social Care, Health and Public Protection, Nottinghamshire County Council

John Mothersole, Chief Executive, Sheffield City Council

Jackie Pederson, Accountable Officer, NHS Doncaster Clinical Commissioning Group

Matthew Powls, Interim Director of Commissioning, NHS Sheffield Clinical Commissioning Group Matthew Sandord, Associate Director of Planning and Development, Yorkshire Ambulance Service NHS Trust

Kathryn Singh, Chief Executive, Rotherham, Doncaster and South Humber NHS Foundation Trust Steve Shore, Chair, Healthwatch Doncaster

John Somers, Chief Executive, Sheffield Children's Hospital NHS Foundation Trust

Helen Stevens, Associate Director of Communications and Engagment, Commissioners Working Together

Lesley Smith, Accountable Officer, NHS Barnsley CCG

Kevan Taylor, Chief Executive, Sheffield Health and Social Care NHS Foundation Trust

Neil Taylor, Chief Executive, Bassetlaw District Council

Diane Wake, Chief Executive, Barnsley Hospital NHS Foundation Trust

Janette Watkins, Programme Director, Providers Working Together Programme

Janet Wheatley, Chief Executive, Voluntary Action Rotherham

Kate Woods, Programme Office Manager, South Yorkshire and Bassetlaw STP

Apologies:

Julia Newton, Chief Finance Officer, NHS Sheffield Clinical Commissioning Group
Jo Miller, Chief Executive, Doncaster Metropolitan Borough Council
Diana Terris, Chief Executive, Barnsley Metropolitan Borough Council
Simon Morritt, Chief Executive, Chesterfield Royal Hospital NHS Foundation Trust
Anthony May, Chief Executive, Nottinghamshire County Council
Frances Cunning, Deputy Director of Health and Wellbeing, Public Health England
Mike Pinkerton, Chief Executive, Doncaster and Bassetlaw Hospitals NHS Foundation Trust
Ruth Hawkins, Chief Executive, Nottinghamshire Healthcare NHS Foundation Trust
Richard Stubbs, Acting Chief Executive, Yorkshire and Humber Academic Health Science Network

Maddy Ruff, Accountable Officer, NHS Sheffield Clinical Commissioning Group Tim Moorhead, Clinical Chair, NHS Sheffield Clinical Commissioning Group Mike Curtis, Chief Executive, Health Education England Leaf Mobbs, Director of Planning and Development, Yorkshire Ambulance Service NHS Trust Richard Henderson, Chief Executive, East Midlands Ambulance Service NHS Trust Richard Jenkins, Medical Director, Barnsley Hospital NHS Foundation Trust Andy Hilton, GP, NHS Sheffield Clinical Commissioning Group Neil Priestley, Director of Finance, Sheffield Teaching Hospitals NHS Foundation Trust

Minute reference	Item	ACTION
01/16	Welcome and introductions	
	AC welcomed all to the inaugural meeting of the Sustainability and Transformation Plan Collaborative Partnership Board meeting (STP CPB)	
02/16	Apologies for absence	
	Apologies were noted and recorded as above.	
03/16	Reflections on past 9 months STP development	
	AC outlined the intentions of the first STP CPB; to support the vision, ambition and priorities of the SYB STP.	
	It was advised that following the meeting, the SYB STP would be published in public.	
	All interim governance arrangements would be discussed at the meeting.	
	Reflections were noted by AC as follows:	
	An SYB plan had been compiled in a very short space of time with clear ambition, vision and priories which was an achievement. The plan was high level and would be followed up with detailed work.	
	Place plans, serving neighborhoods and keeping people close to home with care were fundamental to the SYB STP, connecting centres of health and social care, sectors of choice, opportunity, employment and education with a wider public sector reform programme.	
	The high level ambitions developed to date would lead on to delivery.	
	Some challenges were noted around moving from the current situation to realise the development of the strategic agenda. To achieve this, all leaders must hold their organisations to the plan to serve local neighbourhoods.	
	Reflections were welcomed from the STP CPB.	
	A comment was made around the political sensitives of the STP process to date, noting that all must be mindful of openness and transparency while engaging stakeholders as the STP developed. The publication of the STP should be viewed as a starting point for politicians. It was felt	

that it should also be emphasised that the detail of any changes that followed the STP CPB meeting would go through all usual processes for engagement, service change and decision making. It was requested that local councils and politicians be given the time and space required to react to the document.

A comment was made that the language being used to date had been helpful that the role of the leaders was clear in supporting the ambitions, visions and priorities of the STP.

A comments was made that the STP being centered around place based design would be key moving forward.

Chief executives would lead this through individual organisations. AC would also be meeting with key stakeholders after publication.

04/16 National update from the STP lead

The STP CPB noted that all 44 STPs were submitted on 21 October 2016.

The SYB STP had been advised that work could commence.

Nationally there were 4 cohorts that an STP could be placed within. The SYB STP was in cohort 1 alongside other well established collaborations such as Manchester.

All STPs were now beginning to publish.

AC reported on a meeting with the Arms Length Bodies (ALB), stating that work would take place with SYB STP on finances, the transformation themes relating to demand and flow, and the interface with social care.

Discussions had also taken place nationally around reconfigurations and assistance would be given by the ALBs on this in due course if this was needed. Discussions had also taken place around capital and the need to be realistic on priorities. The STP would align with the contracting and planning round.

05/16 SYB Plan

The STP CPB received the plan that was submitted on 21 October 2016 noting that it had been well received. This would allow the SYB STP to have transparent conversations with wider stakeholders and the approach for this would be outlined further on the STP CPB agenda.

The Board noted that initial testing of the plan had taken place with Health and Wellbeing Board Chairs and the feedback had been positive.

Work would also take place with associate partnerships outside the SYB STP, noting that the vision, ambition and priorities linked well with other areas, especially supporting people to stay well within communities which was consistent in all the STPs.

All noted the need to consider how to use the plan and subsequent supporting documentation around communications and engagement and incorporating existing collaborative work undertaken to date.

Place feedback was requested from the group.

Barnsley

It was reported that the STP was built upon place based plans that had been developed with colleagues across the system and were in the process of being signed off. The principles of co design and coproduction would result in the right solutions for local people. The group was asked to consider the involvement of the police force in the STP particularly in relation to Mental Health.

Bassetlaw

The group noted that an accountable care partnership was in place and therefore place based plans fitted well with the STP. All local systems were sighted on the ambition and priories and supportive of it. Some local issues were noted around how to engage the public on this. A good correlation between the SYB STP and the Nottinghamshire STP was noted. IG would be presenting the place based plan to Nottinghamshire Health and Well Being Board in December. It was noted that meetings with the MPs would be a key component of the consultation process. Language being used in the STP was also important as part of the communication with the public.

Doncaster

Integrated commissioning with an accountable care partnership approach had been agreed in Doncaster. This had been codesigned across the system and had been a positive experience. Place plans had been discussed across the system, and the STP would be taken to Doncaster GB.

Rotherham

A joint plan, designed by the whole system was well established. A briefing session had taken place for councilors, MPs and stakeholders. Next steps would be to move to an accountable care system and work was taking place with Capsticks to design this.

Sheffield

A joint plan had been produced with a collaborative approach across the system. Two large stakeholder events had taken place in Sheffield. The local system was signed up to the plan. Governance arrangements were being worked through. Useful and robust sessions had taken place with scrutiny committee. Detailed work on clinical systems would be the next step.

LS highlighted to all that there may be some local interest in Barnsley when the STP was taken public with some potential opposition to the changes which would need careful management.

The SYB CPB agreed to publish the plan, supporting the principles, ambition, vision and priorities and to work with STP partners, noting this would also be discussed by each organisation for a considered response.

06/16	Communications approach and publishing the plan	
	All noted that a supporting pack had been circulated for all to use locally, including a Board level paper to amend as required. This was to ensure a planned and consistent approach to publishing the SYB STP across the footprint.	
	An email had been circulated to all MPs in SYB alerting them to the fact that the STP was being published. Joint OSC Chairs and local Healthwatch and Health and Wellbeing Board Chairs had also been contacted.	
	The STP would be published on 11 November 2016 at 3pm. This would be placed on the website alongside videos from stakeholder events.	
	Each organisation would be handling the management of the information on a local level.	
	All communications leads from Local Authorities, Providers and Commissioners would input into the communication and engagment of the STP and all were asked to note a resource implication for individual organisations on this.	
	Wider engagement with staff and public would take place December to March 2017.	
	The dates for publication of other STPs was outlined to the group as well as the timeline for publication across the SYB STP. Any inaccuracies in the dates circulated should be highlighted to HS or KW.	ALL
	A reactive approach to handling the media until the plan had been discussed at boards would be adopted. A media protocol was in place and all enquiries should be directed to the STP PMO.	
	A comment was raised around the decision to take a reactive approach to media enquiries, rather than proactive. It was highlighted that discussions should take place across all originations initially and then a proactive approach would take place with key partners.	
	A query was raised around circulating the plan to regional unions and it was agreed that this would be a positive step, and the plan would be circulated when live with accompanying correspondance from AC.	
	In response to a query around publication of place plans, it was noted that the STP been developed using local place plans and were therefore integrated. The communications and engagement around the STP would articulate this.	
	The STP CPB approved the communications and engagement approach to publishing the South Yorkshire and Bassetlaw Sustainability and Transformation Plan.	
07/16	Independent review of hospital services	
	The STP CPB noted the work to date, that trusts had collectively identified undertaking a review of hospital services to be able to plan and mitigate and identify sustainable models of provision, supported by	

commissioners. It was proposed that the SYB STP with wider partners undertake a review of hospital services:

- To define and agree a set of criteria for what constituted "sustainable hospital services" for each place and for SYB, ND and MY in the contract of the SYB STP
- To identify any services that are unsustainable, short, medium and long-term including tertiary services
- To put forward future services delivered within and beyond the STP
- To consider the role of the District General Hospital in the context of the aspirations outlined in the SYB STP and emergent models of sustainable service provision.

Draft terms of reference (ToR) were circulated to the STP CPB to enable providers to have a discussion around what a review might look like and to engage discussions around next steps. The ToR would remain draft until objectives had been developed.

The timeframe identified for this work was ambitious, noted as December 2016 to September 2017, however this work would enable and develop a better understanding and new thinking about acute services for a number of key areas of the STP.

The resource implications were highlighted as well as the benefits of this review in terms of developing an understanding and improving equity and access and quality for all.

The STP CPB was invited to comment.

AC highlighted that this had been discussed at a meeting of the CEOs and chairs of provider organisations and was supportive.

A comment was made around the current drivers for providing hospital services. With a tier 1, 2, 3 service approach, the tiers would need to be agreed and to then agree how to deliver in a safe and sustainable way to a local population. This work would address the whole range of services.

A comment was made that supporting services in the context of a wider plan will be beneficial. Services provided outside of hospitals must be considered as part of this work.

It was suggested that calls for additional resources were not sustainable for CCGs and therefore must look ways of working together to support the STP in terms of resourcing.

It was noted that Doncaster and Bassetlaw Hospital NHS Foundation Trust had undertaken work around sustainability of services and findings of the work done to date would be shared with WCG.

Some concerns were noted around the timescales for this work and that scrutiny must be involved.

GF agreed to lead on PH intelligence regarding the independent review of hospital services with support. Further detail to be discussed with WCG

A request was made for YAS to be included within the ToR and this was

DAWN JARVIS

GREG FELL

WILL CLEARY-

	agreed.	GRAY
	All were asked to note that this was a large and important piece of work that would have implications on key work streams within the STP. The date of September 2017 would be important to shape commissioning for 17/18. It was requested that community services, currently outside of scope, be given careful consideration. These fed into place based discussions around developments of intermediate care and this should be cross referenced with this work. All further comments on the draft terms of reference were requested by 25 November to WCG. The STP CPB supported the next steps including the proposal for a summary scope to be developed to be used to invite proposals. An update on progress would be delivered at the next meeting.	ALL TO NOTE
08/16	Terms of reference	
	The STP CPB received draft terms of reference noting the proposal that these would remain live. All were reminded that the partnership board had committed to looking at governance and that the current set up was interim. Governance would be reviewed around how to work collaboratively at a SYB level and the terms of reference should be viewed in this context. The following feedback was noted:	
	 The scope of the sustainability funding under key responsibilities of the CPB was unclear. JS agreed to help redraft this bullet point. That further consideration be given to inclusion of chairs for CCGs only under membership That as the CPB was a collection of individuals on behalf of sovereign organisations, and would not be making decisions but to develop and recommend, a point on quoracy was not required for the ToR. That comms briefings would need to clearly stipulate that the CPB was a guiding coalition and that responsibilities would remain within statutory organisations. That Healthwatch be added to the membership list That the STP finance lead be added to the membership list CFO to be added to the list All further comments were welcomed to WCG. The ToR would be brought back to the next meeting as holding position of governance.	JOHN SOMERS
	The Terms of Reference would be kept live to be amended as required.	
09/16	Summary Version of the STP The STP summary plan was circulated. The document had been developed taking comments from all communications links across the footprint. It was anticipated that the summary version of STP would be used to support stakeholder discussions and would be placed on the website alongside the main version.	

	LS highlighted some comments and agreed to pick up with HS outside the meeting.	LESLEY SMITH
	All were asked to comment on the document and this would be published Tuesday 15 th November.	ALL
10/16	NHS E arm's length bodies feedback on SYB plan	
	It was reported that each ALB in Yorkshire and the Humber had been asked to assess the plans independently and agree the assessment collectively. There had been consensus around how well the plan was presented with a clear level of ambition and clear strategic priorities.	
	The overall rating was that the SYB STP was ready to progress.	
	Medium confidence was noted in delivery of the plan. This was due to the work still to be undertaken to develop business cases and strategic priorities.	
	The STP CPB noted the formal feedback from NHS England and the ALBS and the feedback on the plan which had been shared with the centre.	
11/16	NHS planning round	
	An update was delivered on the operational planning round which would be the first step in moving from the plan to implementation.	
	Key messages and must be dones were outlined to the group; milestones and metrics, finance including control totals, demand management, financial balance and other efficiencies including Right Care and carter, primary care with a GP Forward View emphasis, urgent and emergency care, referral to treatment times and elective care, cancer with a 62 day standard, mental health with a mental health forward view emphasis, people with learning disabilities and improving quality in organisations	
	STPs would provide the basis for operational plans with a 2 year timeline for activity, workforce, finance and performance assumptions. The timetable had been brought forward so that all plans and contracts would be completed by 23 December 2016. The plans offered the opportunity for financial control totals for each STP.	
	Local principles were being developed for how operational plans would be tested:	
	 Each CCG and provider need to plan for level of growth articulated in the STPs 	
	- Operational plans must reflect milestones for the next two years	
	- The figures from the STP must follow through into contracts	
	Activity growth was outlined for the STP with big ambitions in terms of activity reductions. Local systems must work together to deliver.	
	The timetable was outlined to all.	

	The STP CPB noted the contents of the NHS England presentation.	
12/16	Strategic Commissioning Intentions	
	The purpose of the Commissioning Intentions was to provide a commissioning dimension of the STP ambition, to signal strategic intent to providers and stakeholders and to inform 17 – 19 contract discussions (in-year change). The CPB noted that there was a gap between scale of ambition and current business as usual, that this work was at a transitionary stage of planning timeline and was evolutionary and that change would be implemented within the contract period. Alignment of CCG operational plans to the STP and inclusions in contract agreements would be required.	
	In response to a query, it was confirmed that with an SYB control total, each organisation would still retain its own control total. The CPB noted the recommendation of the Finance Oversight Committee in response to NHS England that flexibility on control totals would not be required at this point in time, however the SYB STP would wish to reserve the right to revisit this at a later date.	
	The STP CPB approved the STP Strategic Commissioning Intentions to be shared with the SYB system.	
13/16	Implementation plan and resourcing the approach proposals	
	A draft implementation plan had been circulated, addressing moving into implementation of the STP, highlighting that to date, work had been undertaking by the WTP teams as additional work and a robust mechanism to undertake the STP would be required.	
	An immediate resource issue around senior finance capacity into the STP was noted and the roll forward of additional support to ensure the work continued to progress.	
	A query was raised around involvement in the Finance Oversight Committee and it was noted that there was representation from each group at those meetings as per the terms of reference.	
	The STP CPB noted the immediate resource requirements and capacity gaps and agreed the principle of a fair share approach across SYB providers, commissioners and local authorities to resourcing the STP. The STP CPB supported delegating the working up of proposals to the Finance Oversight Committee. The potential risk to delivery as a result of the resource gap was noted. The fair shares approach to resourcing would be brought back to the next meeting.	
14/16	Governance review	
	The STP CPB noted a summary of the agreed interim governance for SYB STP, confirming the STP's commitment to undertake a review of governance between the point of reporting and the end of March 2017.	
	It was noted that reshaped governance arrangements would run in parallel with partner's organisational statutory governance to help make decisions to deliver the STP ambitions at SYB level.	

	LS advised that an aspect of the interim governance would be an Oversight Group of members and chairs that would sit above the STP CPB and be in place by January 2017. The establishment of a governance review group would also take place, involving Jayne Brown, Chair of Sheffield Health and Social Care who had offered to assist with work around longer term governance. The STP CPB noted the interim governance proposals and supported the approach to establish a Governance Review Group, Chaired by the STP Lead and supported by Jayne Brown, Chair of SHSC.	
15/16	STP work in progress	
	Item for noting	
16/16	Unadopted minutes of the STP finance oversight committee meeting 31 October	
	Item for noting.	