

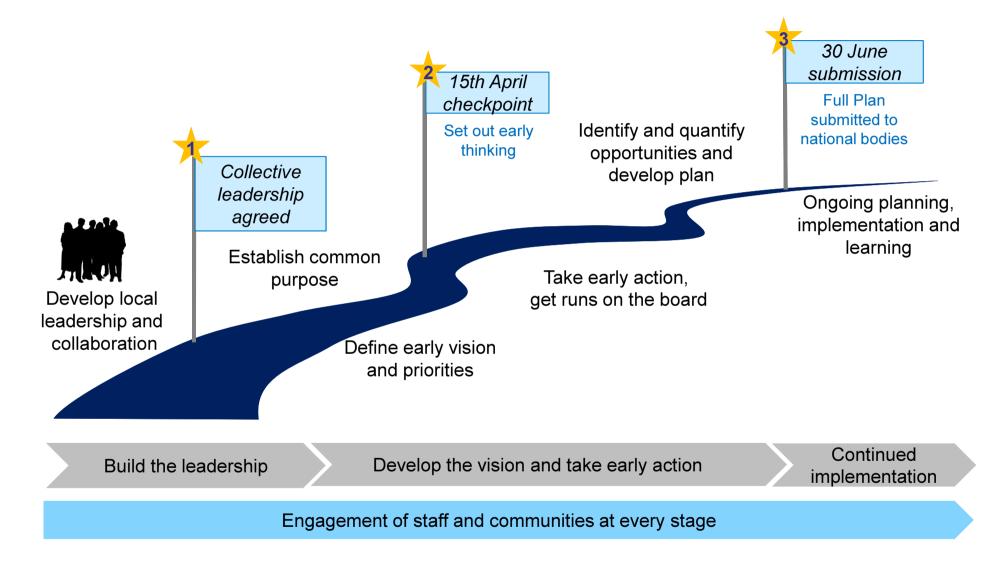
Developing a Sustainability and Transformation Plan

Health & Well-being Board 23rd March 2016



Healthier. Stronger. Together.

Overview of the process



Sustainability and Transformation Footprint



Leadership & Governance

 James Scott, Chief Executive, Royal United Hospitals Bath, confirmed as Senior Responsible Officer for the STP footprint

 SRO role is to oversee the delivery and coordination of the development of the STP with support of all partner organisations

Draft Governance Structure

- Bath & North East Somerset CCG
- Swindon CCG
- Wiltshire CCG
- Bath & North East Somerset Council
- Swindon Council
- Wiltshire Council
- Great Western Hospital
- Royal United Hospitals' Bath
- Salisbury Foundation Trust
- Avon & Wiltshire Partnership Trust
- Sirona Care and Health
- SEQOL
- Wiltshire Health & Care
- South West Ambulance Service

The April 15th checkpoint: Summary

Each STP area is asked to make a submission by **15 April** focusing on the following **two questions**:

- a. What leadership, decision-making processes and supporting resources you have put in place to make progress?
- b. What are the major areas of focus and big decisions you will need to make as a system to drive transformation?

Next Steps

- 1st Governance meeting takes place on 31st March 2016
- Work has began to quantity and describe the 3 gaps:-
 - in terms of the health and well-being gap
 - the care and quality gap
 - finance and efficiency gap
- Specifying project resource and support to help deliver STP

Areas STPs will need to cover:-

- Local cross partner <u>prevention plan</u> –particular action on national priorities of obesity and diabetes and locally identified priorities to reduce demand and improve the health of local people
- Increased investment in <u>out of hospital sector</u>, including how to deliver primary care at scale
- Set out local ambitions to deliver <u>seven day services</u>, in particular improving access and better integrating 111, Minor injuries, urgent care and OOHs GP services ii) improving access to primary care at weekends iii)implementing the four priority clinical standards for hospital services every days of the week
- Set out plans for implementing <u>new models of care</u> with partners
- Set out collective action on **quality improvement**, where services are rated inadequate or are in special measures
- Set out collective action on <u>national priorities:</u> improving cancer outcomes, parity of esteem for mental health patients, transforming learning disabilities services and improving maternity services
- Return systems to <u>financial balance</u>
- Underpinned by a strategic commitment to **engagement at all levels** informed by the "six principles"

Linkages to B&NES current H&WBD Strategy?

Theme 1

Preventing III Health by Helping People to Stay Healthy

Priority 1

Helping children to be a healthy weight

Priority 2

Improved support for families with complex needs

Priority 3

Reduced rates of alcohol

misuse

Priority 4

Create healthy and sustainable places

Theme 2

Improving the Quality of People's Lives

Priority 5

Improved support for people with long term conditions

Priority 6

Promoting mental wellbeing and supporting recovery

Priority 7

Enhanced quality of life for people with dementia

Priority 8

Improved services for older people

Theme 3

Tackling Health Inequality by Creating Fairer Life Chances

Priority 9

Improved skills and employment

Priority 10

Reduce the health and wellbeing consequences of domestic abuse

Priority 11

Take action on loneliness