

STP Update for Public Board/Cabinet Meetings

July 2016



Transforming health and care for
Staffordshire & Stoke-on-Trent



What is Together We're Better?

- In December 2015, the NHS announced a new way of ensuring health and care services are built around the needs of local people.
- Every health and care system in England has produced a plan showing how it will deliver the NHS Five Year Forward View vision of:

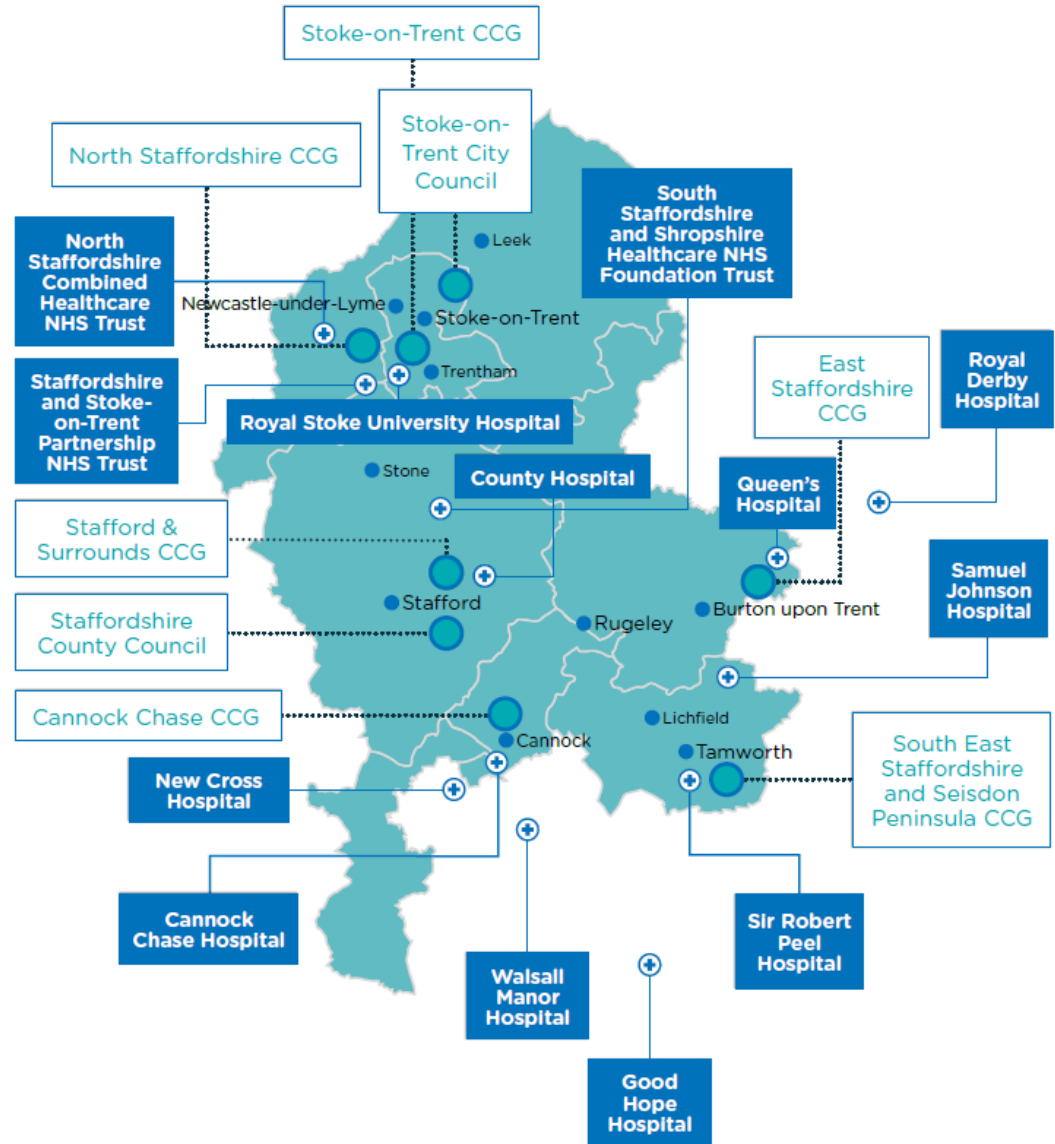
***better health, better patient care and improved efficiency
(e.g less duplication, more use of technology).***

- These plans are called Sustainability and Transformation Plans (STP).
- The plans are designed to help drive genuine, affordable improvements in both patient experience and people's health for the longer-term.
- Together We're Better is a commitment from all health and social care organisations that only by working together can we bring about the changes we need.
- At this stage, plans are in draft form and proposals could change.
- A Case for Change has been developed and this is available on the Together We're Better website.



Staffordshire and Stoke-on-Trent

The area covered by the plan



What do we know about our health economy?

- **What do we know?**

- *We know that for some of the services we provide, the quality and responsiveness is not good enough.*
- *Services are not joined up enough as part of a complete network.*
- *Organisational boundaries get in the way.*
- *Care is fragmented.*
- *Care is not built around what our citizens need now.*
- *Dedicated health and care professionals find the system hard to navigate.*
- *The system can be frustrating for everyone.*

- **What do we need to do?**

- *We want to rebuild trust and belief in health and care by working with local people to develop alternative ways that services work together and really focus on people's needs.*
- *Have a genuine conversation about the level of our ambition across organisations.*
- *Together We're Better is a fresh approach. We need to stop thinking about things separately and, instead, develop a clear vision and plan for all services.*



What are the challenges?

Population health challenges

- Between 2014 and 2019 the number of people aged 85 years and over will rise by 22%.
- Almost one in five people die from causes that are largely thought to be preventable – around 2,100 deaths every year.
- People living in the most deprived areas have a healthy life expectancy 12-13 years lower than those living in less deprived areas.
- Around one in 10 children aged four to five is obese, rising to one in five by the age of 11. Two out of three adults have excess weight problems and one in four is obese. These are higher than the national average rates.
- Cancer mortality is the primary reason for premature deaths and is higher than average for 4 out of 6 of our CCGs.
- Diabetes and Coronary Heart Disease prevalence exceeds the national average for England in 5 of 6 CCGs.
- Half the CCGs exceeded their peer average for injuries due to falls (in people aged 65+), Stoke-on-Trent was 30% above the national average.
- Suicide rates are 30% higher in Staffordshire and Stoke-on-Trent than the England national average.



What are the challenges?

Quality of care challenges

- A significant portion of health and care costs each year are spent on hospital inpatient care; approximately 20% for those aged under 65 years, and 30% for those aged over 65 years.
- Between 30-33% of people in a hospital bed at any one time don't need to be there.
- Every day in Staffordshire and Stoke-on-Trent over 800 patients are admitted to hospital, of which 330 are unplanned admissions and almost 60 are readmitted within 30 days of discharge.
- The number of people offered reablement services to help them fully recover and regain independence after illness or injury (1.4%) is lower than the national average across England (3.1%).
- The acute hospitals in Staffordshire and Stoke-on-Trent have consistently failed to meet the waiting time target between 2012/13 to 2015/16 (Q3). Both hospitals had higher attendances at A&E than their peer average.
- Half the CCGs were in the worst 30% performers against peers for emergency readmissions 30 days from discharge.
- Four CCGs exceed their peer averages on emergency admissions that should not require hospital admission.



What are the challenges?

Financial challenges

Well managed organisational budgets are inextricably linked to care, quality and ensuring everyone benefits from the services we provide. Locally we are already in significant deficit and we have a duty to create long term financial stability.

Current financial position – Staffordshire and Stoke-on-Trent's health deficit amounts to £157m (2015/16). This does not include social care.

Some of the drivers for this deficit include:

- high A&E attendances
- increased need for services to support an ageing population often with multiple long term conditions
- length of stay in hospital and high readmission rates

Forecast financial position for 2020/21 - If we do nothing to change the health and care system, the recurring deficit in 2020/21 is currently forecast to be £244 million. With the addition of the cost pressures in social care for both Staffordshire County Council and Stoke-on-Trent City Council this forecast currently increases to £347 million.



Why do we need to change?

There are some key messages that we hear again and again, including:

- I don't understand the services you provide and how to use them.
- I don't know where to get information, advice or guidance.
- I want to be able to see my GP more easily for advice on staying well and planning my care.
- I don't want to wait so long for appointments, and would like them to be more flexible.
- I want more help to live safely and independently, and to avoid becoming socially isolated.
- I want my family and friends who act as my carers to be offered more practical and emotional support.
- I want to be told more about what voluntary and community organisations can do to help me.
- When I have a mental health problem I want to be treated the same as those with physical health problems.
- I would like my discharge to go as safely and smoothly as possible, especially if I have long term conditions or mental health problems.
- I want professionals looking after me to talk to each other and I want to be in charge of my care plan.



Vision, aims and priorities



High priority areas for change

- Frail elderly and LTC
- Urgent and Emergency Care
- Enhanced Primary and Community Care
- Planned Care
- End of Life
- Mental Health
- Cancer
- Prevention and well-being
- Enabling work



What we need to do as a whole health and care system?

Deliver current plans

Speed up our plans to provide better and faster services by removing duplication and red tape. This will cut costs and help reduce our financial gap.

Deliver effective and cost efficient planned care service

Reorganise non-urgent hospital visits to fit with what patients tell us will be better, for example, cutting out unnecessary outpatient appointments.

Develop a better Urgent & Emergency Care System

Simplify urgent care services and how patients access these.

Enhance primary and community care

Bring GP and community services together, including district nursing, social care and mental health services.

We will also care for more people in their own homes, rather than in hospitals or residential homes.

Focus on Prevention and Wellbeing

Providing people with the advice and support to help them stay fit and healthy for as long as possible is not only the right thing to do, but will also help reduce costs



Next steps

- The draft Sustainability and Transformation Plans were submitted by 30 June 2016. This will be followed by face to face meetings with national leaders.
- Local plans are not being published at this stage because they subject a national conversation and assurance process. Updated versions of the plans will be published once this process has taken place which is expected to be Autumn/Winter 2016
- A number of workstreams are in place who meet regularly to work through plans and to identify the key projects that will be progressed.
- Meaningful engagement with the public, health and care professionals, voluntary sector, staff and other stakeholders will play a fundamental role at all stages of these plans.
- All organisations involved in the programme will identify people to act as ambassadors of the programme, to extend the reach of engagement across Staffordshire and Stoke-on-Trent.



Thank you for listening

Any questions?

