

Westminster Health & Wellbeing Board

Date: 14 September 2017

Classification: General Release

Title: Update on the delivery of the North West London

Sustainability and Transformation Plan

Report of: Central and West London Clinical Commissioning

Groups

Wards Involved: All

Policy Context: City for all; North West London Sustainability and

Transformation Plan

Financial Summary: The Sustainability and Transformation Plan (STP)

sets out in high level terms how the £4bn health and care system will change over the next five years. It is a partnership plan, delivered with Westminster City Council endorsement and the active engagement of

the Cabinet Member

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Contact Details: Transformation

1. Executive Summary

1.1 The paper updates on priorities and programmes being taken forward by the NW London health and care partnership following publication of the NW London Sustainability and Transformation Plan in October 2016.

2. Key Matters for the Board

2.1 The Board is asked to consider the update and its presentation.

3. Background

3.1 Work has continued over the summer to progress the implementation of the North West London STP Plan. A programme delivery infrastructure has now become well embedded based around 5 STP Delivery Areas, which are aligned with Health and Wellbeing Priority Areas.

The diagram below provides an overview. From the City Council perspective, officers are involved and participate in each key STP Delivery Area and the Cabinet Member for Adult Social Care & Public Health, the Chief Executive and other senior officers continue to represent the Tri-Borough on the North West London Health and Social Care Transformation Board, which acts as the Programme Board for the delivery of the overall STP.
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- 3.3 It is anticipated that during the autumn some changes will be made to the governance arrangements for delivering the plan.
- 3.4 Sustainable Transformational Funding (STF) is not available in this and the next financial year. A prudent view has been taken to assume that funding may not be available in the near future. This makes the delivery of STP objectives of improving wellbeing, improve quality of care and achieving finance efficiencies significantly more challenging.
- 3.5 In these circumstances various meetings have taken place between finance colleagues from NHS and Local Authorities on how to take STP business cases forward. There are a number of different business cases which are at different stages of their project life cycle. There are currently 5 business cases which the joint finance community are focusing on due to the business cases being more developed and with no direct dependence on STF funding. The business cases are: Discharge to Assess, Alcohol Prevention, Time of Crisis, Work & Health and Enhanced Care in Care Homes.

Discharge to Assess (D2A)

3.6 The aim of D2A is to reduce the length of stay in hospitals with a focus on elderly patients that are 65 or above. In May 2017, a pilot was set up in Hillingdon. The evaluation of the Hillingdon pilot will inform how we progress with D2A in other boroughs. This will have an impact on local authorities and as such a clear understanding is needed on how activity levels and the finances are going to be impacted. Currently data continues to be gathered to understand the impact on length of stay in hospitals and social care cost implications from early discharge.

Alcohol Prevention

3.7 This business case looks to identify and intervene in the cohort of patients with repeat attendances to A&E through alcohol related incidents. The aim is to reduce A&E attendance as well as head-off more serious alcohol conditions developing in the future. It is anticipated that pilots in Ealing & Northwick Park hospitals will be undertaken, which cover the boroughs of Ealing, Harrow and Brent. The aim will be to review the effectiveness of the pilots, to determine if they should become business as usual and gather evidence to roll out the initiative in other CCG areas. The pilot will also look to assess the impact on both Adult Social Care and Public Health's Substance Misuse service.

Response at time of crisis (ToC)

3.8 The aim of this business case is to reduce the number of elderly patients 65 or above that attend A&E from being admitted into an acute ward, by arranging care administered at home with specialist staff placed in A&E departments. A pilot has begun in Ealing Hospital and the next step is to develop a full finance model.

Work & Health

This project is to get Substance Misuse Patients into meaningful employment through Individual Placement Support (IPS). A business case has been developed by Social Finance Limited, which is being reviewed by NHS and local authority finance teams. The total budgeted cost for this project over 3 years is £2.600m. The funding is expected to come from the Life Chances Fund £1.200m, Jobseeker Plus £0.100m and the remainder being provided by LAs and CCGs

Enhanced Care in Care Homes

3.10 The aim is to reduce admission into hospital of patients that are currently placed in a care home setting. This will be achieved by training staff to identify and deal with minor health issues early to avoid them becoming more serious. An initial requirement of £0.250m has been set and the funding is being sought from within the NHS.

- 4. Legal Implications
- 4.1 None at this stage.
- 5. Financial Implications
- 5.1 None specific at this stage.

If you have any queries about this Report or wish to inspect any of the Background Papers please contact:

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BACKGROUND PAPERS:

None.