NHS Hambleton, Richmondshire and Whitby Clinical Commissioning Group

NHS Vale of York Clinical Commissioning Group

NHS Harrogate and Rural District Clinical Commissioning Group

NHS Airedale, Wharfedale and Craven Clinical Commissioning Group

NHS Scarborough and Ryedale Clinical Commissioning Group

North Yorkshire Sustainability and Transformation Planning Footprints

Summary Document
March 2016

Context

Under the leadership of the North Yorkshire Health and Wellbeing Board in recent years there has been significant progress on integrating all aspects of care across the county.

In the NHS England planning cycle for 2016/17 the health economy has been asked to develop Five year Sustainability and Transformation Plans (STP's) – October 2016 – March 2021, which are place-based, umbrella plans designed to accelerate the implementation of NHS 5 year Forward View.

The STP's will be used to drive a genuine and sustainable transformation in patient experience and health outcomes over the longer-term through building and strengthening local relationships and to that end they will be aligned with our existing ethos of integration and collaboration.

However, due to the complexity of the commissioning landscape the boundaries used for STP's will not cover all planning eventualities. As with the current arrangements for planning and delivery, there will be layers of plans which sit above and below STP's, with shared links and dependencies.

Each of our organisations will continue to have a multitude of relationships with other organisations including primary, secondary and tertiary care providers of both physical and mental health services, specialist and other commissioners, local authorities, government, and the third sector. There are no easy footprints for any of our CCG's but we remain united in our commitment to keep care as integrated and close to home as possible for the patients in our areas.

Due to the patient flows for acute, tertiary and specialist services, the five North Yorkshire CCG's fall into three out-of-county facing STP's which provides some challenge to the system and to the continuation of the integration work which has already progressed and needs to continue to do so in the NYCC area.

Risks & Mitigation

As system leaders we understand that a more collaborative and system wide approach is required to provide solutions to these challenges. The STP's being developed on a whole

system basis – commissioners, providers and local authorities working together to develop the right plans for their populations, irrespective of current organisation boundaries.

We intend to promote, protect and continue the work already underway in North Yorkshire and to mitigate these 'out of area' risks by collective agreement on the core characteristics of our STP's in order to ensure:

- Enabling and maintaining a close working relationship with NYCC
- A great patient experience and making services easier for patients to understand and use
- The best clinical outcomes and reduce variation through single service models
- More care closer to home
- Integrated services across health and social care
- Highly developed voluntary, third and community sector
- North Yorkshire as a great place to work attracting a high quality workforce
- Value for money for the taxpayer
- Based on systems not structures
- Maintaining focus on Reducing Health Inequalities to improve longevity and quality of life
- Continuing to progress MH and LD transformation
- Implementation of Primary Care 'at scale'.

STP's also raise some significant challenges around governance. To achieve our goals we will ensure that strong, robust governance arrangements are in place around each of our STP's.
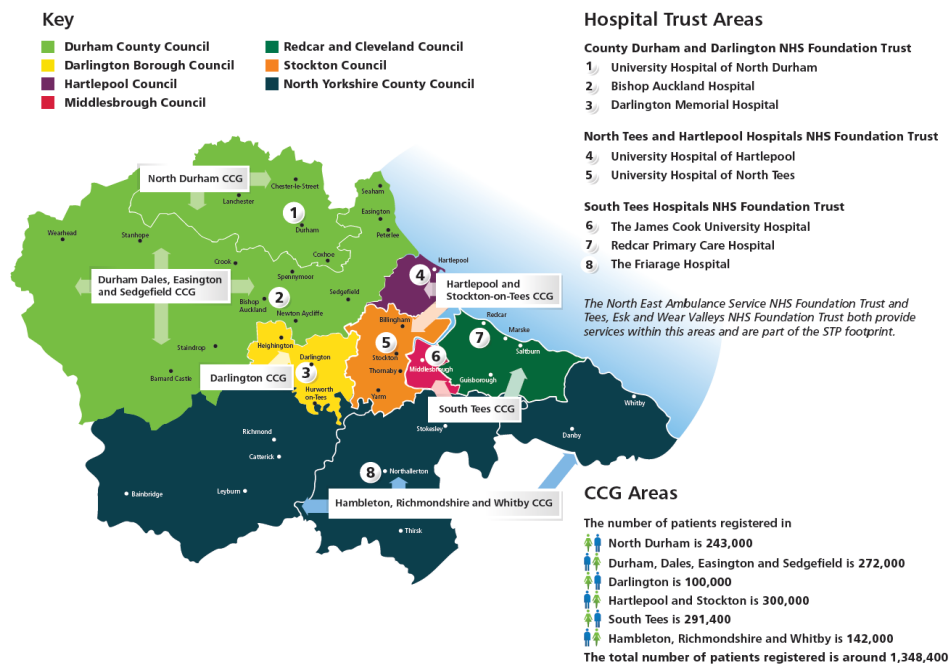
We will also have arrangements that make certain that we engage across neighbouring STP footprints for larger scale requirements linking to centres of excellence for services such as trauma, cancers, specialised services etc.

We see the governance required to develop the STP as part of a continuing new way of working across the North Yorkshire footprint and beyond which enables both change at scale while also supporting local ownership and delivery in a way which is sustained in our local communities.

We will also monitor these issues collectively by continuing to work closely with our NYCC, HWBB and OSC colleagues to ensure that the very best health and care services are available to the people of North Yorkshire.
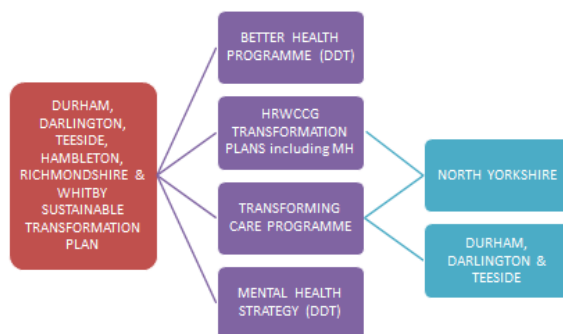
Hambleton, Richmondshire and Whitby CCG: Durham, Darlington, Tees, Hambleton, Richmondshire and Whitby STP Area

Our STP footprint, whilst resolutely keeping us within North Yorkshire as our county council area, for social care links, for mental health and learning disability provision and for third sector provision, as well as supporting the local model of care based at the Friarage Hospital as the hub for the rural population and renewed services in Whitby, recognises that for acute services patients flow northwards to STHFT and CDDFT.

Key

- Durham County Council
- Darlington Borough Council
- Hartlepool Council
- Middlesbrough Council
- Redcar and Cleveland Council
- Stockton Council
- North Yorkshire County Council

Hospital Trust Areas

County Durham and Darlington NHS Foundation Trust
1. University Hospital of North Durham
2. Bishop Auckland Hospital
3. Darlington Memorial Hospital

North Tees and Hartlepool Hospitals NHS Foundation Trust
4. University Hospital of Hartlepool
5. University Hospital of North Tees

South Tees Hospitals NHS Foundation Trust
6. The James Cook University Hospital
7. Redcar Primary Care Hospital
8. The Friarage Hospital

The North East Ambulance Service NHS Foundation Trust and Tees, Esk and Wear Valleys NHS Foundation Trust both provide services within this areas and are part of the STP footprint.

CCG Areas

The number of patients registered in
- North Durham is 243,000
- Durham, Dales, Easington and Sedgefield is 272,000
- Darlington is 100,000
- Hartlepool and Stockton is 300,000
- South Tees is 291,400
- Hambleton, Richmondshire and Whitby is 142,000

The total number of patients registered is around 1,348,400

Our governance arrangements will make sure there is appropriate representation across the STP and that the needs of our populations are considered equally. The governance arrangements will facilitate joint decision making and the principle of subsidiarity, including making sure there is maximum operational devolution. The focus of the governance structure will be to propose recommendations back to the boards, governing bodies and committees of the individual statutory organisations to allow them to take informed decisions. We will also address any potential conflicts of interest around federations of GP's and CCG Governing Bodies; and manage the potential competition for work between GP federations through the following proposed governance structure:

DURHAM, DARLINGTON, TEESIDE, HAMBLETON, RICHMONDSHIRE & WHITBY SUSTAINABLE TRANSFORMATION PLAN ACCOUNTABILITY FRAMEWORK
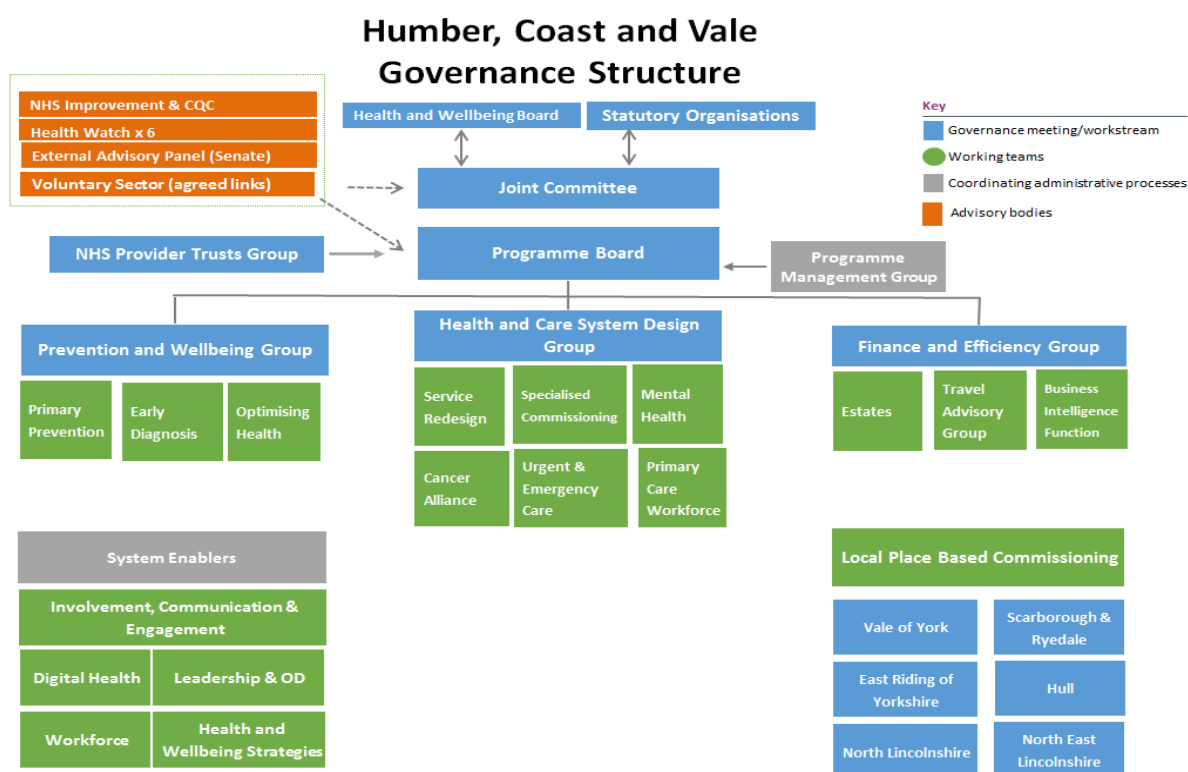
Scarborough and Ryedale CCG and the Vale of York CCG: Humber Coast and Vale STP Area

Footprint

Our STP footprint, Humber, Coast and Vale, reflects the patient flow from Easingwold, Selby and Scarborough to York Teaching Hospital Foundation Trust sites (major sites in York, Scarborough, Easingwold and Bridlington), and onwards to Hull for certain specialities. The footprint covers the boundaries of NHS Vale of York CCG, NHS Scarborough and Ryedale CCG, NHS East Riding CCG, NHS North East Lincolnshire CCG, NHS North Lincolnshire CCG and NHS Hull CCG. The organisations involved have a history working together across this geography on managing flow to specialist health services and reviewing healthcare pathways including Urgent Care, Cancer pathways and specialities such as Cardio-vascular disease and stroke The footprint works closely with surrounding STP areas, to recognise the flow to Leeds for patients in Selby, York and Tadcaster.

Within the footprint, the CCG's have already embarked on local system transformation and have three 'system' boards established. The Vale York and Scarborough and Ryedale localities have established the 'Systems Leaders Board' and supporting Transformation Executive with representation from North Yorkshire County Council, City of York Council and health services, including primary care. The governance arrangements for the STP footprint recognise the importance of locality based working and delivery will be led through the local boards and specific task-and finish groups. A stakeholder event to help shape and inform the work of the Humber, Coast and Vale STP is planned for 29 April 2016.

Harrogate and Rural District CCG and Airedale, Wharfedale and Craven CCG: West Yorkshire STP Area 'Healthy Futures'

Footprint

The West Yorkshire Sustainability and Transformation Plan will be an 'umbrella' plan, covering the ten West Yorkshire and Harrogate and Rural District Clinical Commissioning Group, and will be led by Rob Webster, the new Chief Executive at South West Yorkshire Mental Health Foundation Trust.
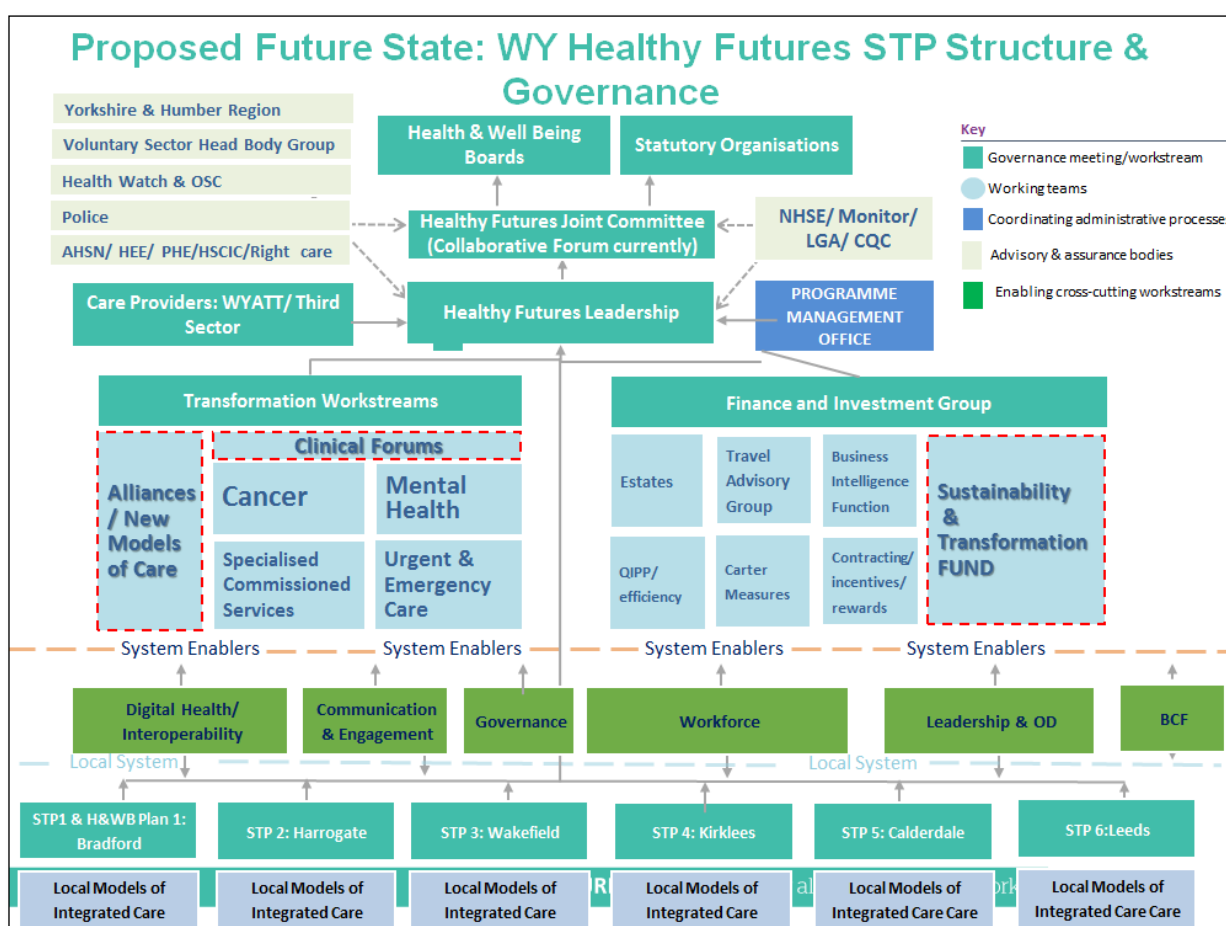
The emerging priorities at a West Yorkshire level build on the foundations of the Healthy Futures programme for 2015/16 and the West Yorkshire Urgent and Emergency Care Vanguard and include Urgent and Emergency Care, Cancer, Mental Health and Specialist Commissioning. Proposals have been developed to make the Healthy Futures Collaborative a constituted board.

The Harrogate Sustainability and Transformation Plan will cover the Harrogate and Rural District CCG area which, for partners, mirrors the New Care Model geography.

Governance structure

The West Yorkshire Sustainability and Transformation Plan will be underpinned by six constituent parts or 'primary' STPs to ensure that planning is undertaken at different levels within the principle of subsidiarity: Bradford (including Airedale, Wharfedale and Craven CCG), Calderdale, Harrogate, and Rural District, Kirklees, Leeds, and Wakefield.

It is expected to provide a clear and powerful shared vision across the local NHS system, local government and local communities, underpinned by an open, engaging and iterative process of development and consultation.

Proposed Future State: WY Healthy Futures STP Structure & Governance

The Harrogate Health Transformation Board (HHTB) has been established to design, develop and deliver an integrated, holistic and high quality out of hospital model of care that is clinically and financially sustainable to support the local community in their health and care needs. It comprises the Accountable Officers from the following organisations: Harrogate and Rural District Clinical Commissioning Group, North Yorkshire County Council, Harrogate Borough Council, Harrogate and District NHS Foundation Trust, Tees Esk and Wear Valley Foundation Trust, and the Yorkshire Health Network.

The HHTB will oversee and coordinate decisions required by partner organisations in order to ensure delivery of the STP and its Terms of Reference have been amended to reflect this new work-stream. The Senior Responsible Officer for this STP is Amanda Bloor, CCG Chief Officer.

The HHTB operates within the governance arrangements of each participating organisation and the wider partnership system: North Yorkshire Health and Well-being Board and Delivery Board and Harrogate District Public Services Leadership Board, as reflected in the governance chart below.

A Steering Group and Task and Finish Groups have been established to undertake the detailed work required.