The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Board of Directors (Public)		
Meeting Date:	3 November 2020	**Agenda item:**	17
Report Title:	STP Update		
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Executive Sponsor:	Laura Skaife-Knight, Deputy CEO		

Implications

Link to key strategic objectives
[highlight which KSO(s) this recommendation aims to support]

KSO1	KSO2	KSO3	KSO4	KSO5	KSO6
Safe and compassionate care	*Modernise hospital and estate*	*Staff engagement*	***Partnership working, clinical and financial sustainability***	*Healthy lives staff and patients*	*Investing in our staff*

Board assurance framework	Partnership working is set out in KS04. The BAF updates are received and reviewed within Finance and Activity Committee and Senior Leadership team.	
Significant risk register	No significant risks aligned	
	Y/N	If Yes state impact/ implications and mitigation
Quality		
Legal and regulatory		
Financial		

Assurance route

Previously considered by:	Chief Executive Leadership Team Senior Leadership Team Board of Directors (in Private)

Executive summary

Action required: *[highlight **one** only]*	Approval	**Information**	Discussion	Assurance	Review

Purpose of the report:	The purpose of this paper is to provide the Board of Directors with an update on key areas of work within the Sustainability and Transformation Partnership (STP).
Summary of key issues:	The Board of Directors are asked to note the following; <u>Hospital Services Strategy (HSS)</u> • Note the current position of the HSS workstreams and reprioritisation of work to April 2021.

	<u>Norfolk and Waveney Hospitals Group Committee</u> • Note the positive discussions held at the 12 October meeting of the Norfolk and Waveney Hospitals Group Committees. <u>Integrated Care System/Place-Based Care</u> • Note the work which is ongoing in relation to the application for an Integrated Care System within Norfolk and Waveney and the development of Place-Based Care.
Recommendation:	The Board of Directors is asked to note the update.
Acronyms	HSS – Hospital Services Strategy ICS – Integrated Care System STP – Sustainability and Transformation Partnership

Hospital Services Strategy

Against the backdrop of COVID-19 system recovery and restoration, preparations for a second wave and winter planning, there are multiple system wide priorities which are all competing for limited resources.

Over recent weeks there have been discussions at a senior level across the system to assess the volume of work and to identify the key system priorities and the allocation of appropriate resources to drive them forward.

As a result of this, there has been a significant change to the Hospital Services Strategy Programme with a reconsideration of what the programme should focus upon as a priority to the end of the financial year.

The outputs of the discussions are as below (aligned to the discussion which took place at the N&W Hospitals Group Committees on 12 October 2020):

- COVID-19 restoration and recovery/wave 2 EU exit
- Flu vaccination
- Norfolk and Waveney clinical strategy development
- Diagnostic Assessment Centre Outline Business Case
- Digital (Electronic Patient Record)
- Acute Services Integration – Urology/Ear Nose and Throat (ENT)
- Palliative Care/End of Life integration – Norfolk and Norwich Hospital/QEH
- Progression to a single Patient Tracking List (PTL)
- Dermatology – system-wide development

In light of this, it has been agreed that the Hospital Services Strategy work will prioritise the following key areas of work:

- Specialty review and redesign – ENT and Urology
- Policy convergence and alignment – now under 'business as usual' delivery

System Clinical Strategy development

As a system we are committed to the development of an over-arching clinical strategy.

This work is being developed in the context of the system Integrated Care System application and the James Paget Hospital Health Infrastructure Plan 2 Strategic Outline Case development.

The Director of Strategy and Major Projects from Norfolk and Norwich Hospital and the Director of Strategic Commissioning from Norfolk and Waveney Clinical Commissioning Group are leading on driving this work forward and are developing a framework for delivery of the clinical strategy which will articulate the design principles and required actions.

It is anticipated that there will be an initial focus on the requirements of the acute hospitals to give a clear sense of the givens and the overall direction of travel of which services are likely to be delivered where in the future.

The work will then be expanded to incorporate wider system partners with wider engagement built into the delivery framework.

Norfolk and Waveney Hospitals Group Committees

The Norfolk and Waveney Hospitals Group Committees meeting was held on 12 October 2020.

At the meeting, positive conversations took place in relation to key areas.

A key area of action relates to communications. Following the meeting, clear communications outlining the positive work which has been done to date and the closer working which is being undertaken by the Trust/Norfolk and Norwich Hospital and James Paget Hospital have been sent out to staff at all three Trusts and external stakeholders. The communications articulate the benefits for patients and staff of the work which has been done to date.

The date of the next meeting is 9 November and will be chaired by Norfolk and Norwich Hospital.

Integrated Care System development

The Trust recognises that we need to ensure that we have a robust voice within the Norfolk and Waveney conversations in relation to development of an Integrated Care System and Place-based care.

The Director of Strategy is part of the system wide ICS development working group – the initial meeting of this group is planned for early November – and the ICS Partnership Board.

Locally work is underway to define the emerging functions and purpose of 'Place' with the development of a framework. Design principles have been agreed to guide the work along with the actions required and timescales for delivery.

The Trust has a plan to proactively engage with the Clinical Directors of the four local Primary Care Networks (PCN) to ensure that there is clarity around how we can align to and support delivery of the key PCN priorities.

Recommendations

The Board of Directors is asked to note the updates included within the report.