

EXECUTIVE 7 FEBRUARY 2017

ITEM 8: RESPONSE TO THE SUSTAINABILITY AND TRANSFORMATION PLAN (Statement from Sustainability and Transformation Plan Working Group)

Introduction

As reported on pages 135 and 139, the Sustainability and Transformation Plan (STP) Working Group has the following remit in accordance with the County Council's decision of 16 December 2016: -

- (1) *To consider the likely financial and other impacts of the Lincolnshire Sustainability and Transformation Plan (STP) on Lincolnshire County Council.*
- (2) *To reports its recommendations directly to the Executive.*

The County Council decision of 16 December 2016 also acknowledged the role of the Health Scrutiny Committee in scrutinising the impact of the Lincolnshire STP on NHS services provided to Lincolnshire residents. With the role of the Health Scrutiny Committee in mind, the STP Working Group met on 30 January 2017¹ and forwards the following comments to the Executive: -

A. THE LIKELY FINANCIAL AND OTHER IMPACT OF THE STP ON THE COUNTY COUNCIL

Public Sector Funding in Lincolnshire

The overall level of public sector funding underscores much of the national drive for STPs, and the emphasis on meeting funding shortfalls within the NHS by 2021. There are also particular public sector funding concerns for a county such as Lincolnshire, with its unique rural nature of Lincolnshire.

Main Areas of Impact

Within this context, the Working Group highlights that there are three main County Council functions likely to be affected by the Lincolnshire STP:

- Public Health
- Adult Care
- Children's Services

Public Health

A reduction in the level of public health funding granted to the Council, which is reducing by 6% per annum until 2020. This does not assist the County Council's

¹ Councillors Jackie Brockway (appointed Chairman of the Working Group), Chris Brewis, Sarah Dodds, Steve Palmer and Reg Shore were present at the STP Working Group meeting on 30 January 2017. Apologies for absence were received from Councillors Charmaine Morgan, Mrs Marianne Overton OBE, and Mark Whittington.

ability to support the growing emphasis on prevention in the STP. The STP's intentions for Smoking Cessation (pages 47 of the STP) and Adult Obesity (page 50) are cited as examples, where the STP is likely to impact on Council Services.

Adult Care

The Lincolnshire STP emphasises the importance of increased activity in primary and community settings and a reduction in acute care. As such and with references to reducing the length of stay in acute hospitals² and to the closure of Long Leys Court³, there are likely to lead to greater demands on adult care.

Children's Services

There is likely to be a financial impact on the prevention services commissioned by Children's Services. For example, there are references to reducing child obesity⁴ in the STP.

Better Care Fund

As reported to the Executive on 4 January 2017, the Better Care Fund is expected to grow by £25 million by the end of the decade. There is potential for aspects of the STP to impact on the level of the Better Care Fund available to the County Council for the protection of Adult Care, if the national guidance places a priority on NHS out-of-hours hospital services.

Capital Expenditure

The Working Group would like to draw the Executive's attention to page 85 of the Lincolnshire STP, where there is a reference to other sources of capital funding such as funding from the County Council. Given the constraints on the Council's capital resources, this might be something to be explored further with the local NHS.

Neighbouring STPs

The Working Group would also like to highlight the potential impact of neighbouring STPs on the County Council's resources. For example, changes to in-patient provision at Peterborough City Hospital or Diana Princess of Wales Hospital in Grimsby could lead to greater impacts on community services in Lincolnshire Adult Care. Given that a significant element of NHS funding is used to buy services outside the county, the impacts of neighbouring STPs, in particular the Humber, Vale and Coast STP (which covers northern Lincolnshire) and the Cambridgeshire and Peterborough STP, should be considered.

Further Work

The Working Group is planning a further meeting to look at the detailed implications of the Lincolnshire STP on the County Council's finances.

² References to reducing length of stay in acute hospitals are found pages 21, 41, 44 and 59 of the Lincolnshire STP.

³ Pages 45, 65, 66 and 109 of the Lincolnshire STP

⁴ Page 49 of the Lincolnshire STP

B. OTHER COMMENTS

In addition to the above comments within the Working Group's remit, the Working Group has asked for the following other comments to be forwarded to the Executive:

- Clarity of STP Documentation – Whilst the Lincolnshire STP is detailed, there is a need to highlight the implications for members of the public, and the communities throughout Lincolnshire. The intended outcomes could be better defined in the Lincolnshire STP to assist with the understanding of members of the public.
- Primary Care and Community Services – Many of the aspirations in the Lincolnshire STP for primary care and community, effectively moving as many services as possible out of acute hospitals, can be supported. Models such as those in Northumberland, where the maximum length of stay in an acute hospital is three days, are cited as an aspiration. Accessing safe and high-quality health care services as close to home as possible will always be supported.
- Specialisation within the NHS and the Discontinuation of Services – Whilst the arguments for specialisation within the NHS can be demonstrated, the loss of service in one area can lead to impacts in other areas and on other services. The 'leg club' which previously operated in Woodhall Spa is an example of a service discontinued a few years ago, which had a local impact.
- Maternity Services – Proposals for changes to maternity services remain a concern, in particular the proposed changes to consultant-led services. This applies not only to Lincoln County Hospital and Pilgrim Hospital, Boston, but also to maternity units outside Lincolnshire, for example at Diana Princess of Wales Hospital, Grimsby, where any proposal to move all consultant-led maternity services to Scunthorpe General Hospital would seriously affect the population of Louth and the surrounding area.
- The STP Process – The 44 STP footprints across England were created at the instigation of NHS England, and other national entities, and these boundaries do not necessarily recognise patient flows – to an extent they represent an artificial construct. There needs to be more convincing arguments presented on the synergies between the STPs. Lincolnshire is a net exporter of NHS patients, and is likely to be affected by changes elsewhere.
- The Financial Imperative – The overall financial position of the NHS remains a concern, in the overall context of the public sector. The deliverability of the Lincolnshire STP process against the financial imperative is open to doubt. The financial imperative of the Lincolnshire STP process appears to be paramount and the lead driver for this process.
- Capital Funding – NHS capital funding to deliver many aspects of the Lincolnshire STP remains a concern.
- Views of District Councils – The district councils in Lincolnshire are considering the Lincolnshire STP in various ways, and are likely to put forward their own views on its content, to the extent that it impacts on the district council areas.
- Views of Lincolnshire Local Medical Committee – The views of the Lincolnshire Local Medical Committee, which represents GPs, would be a relevant consideration, in the development and delivery of the Lincolnshire

STP. There should be some assurance that the medical community within Lincolnshire are fully supportive of the Lincolnshire STP.

- Recruitment of Staff – So much of the delivery of the STP relies on the recruitment of the appropriate medical staff. The difficulties attracting GPs and specialist registrars and consultants (for example for A&E departments) into Lincolnshire are well-documented. There are similar challenges on the recruitment of nursing staff. However, the intention to reduce the overall NHS staffing level in Lincolnshire by 549 full time equivalents is also noted.
- Stroke Services – Any proposals for changes to stroke services would have to be considered in detail.
- End of Life Care – End of life care and palliative care is a topic which needs to be highlighted in the STP process.
- Overall Funding for the NHS – The overall funding for the NHS in England is a concern. The level of funding in future years will impact on the delivery of services.