Sustainability and transformation plans are five year plans detailing how local areas will work together to modernise health and care and achieve financial balance by 2020. In March 2016, England was divided into 44 geographic 'footprints' to create plans based on the local health needs. These plans were submitted to NHS England and NHS Improvement in October 2016 and have since all been published. The plans are still in development and areas will simultaneously start to implement the sections of the plan furthest ahead whilst continuing to work on other sections.

NHS England’s ‘Next steps for the Five Year Forward View’, published in April 2017, changes the language around STPs – referring to them as Sustainability and Transformation Partnerships.

This summary gives an overview of the key points in your STP based on the plans submitted in October 2016. It is not exhaustive and there will have been developments since this point. The level of detail in the summary is reflective of the level of detail within the plan. It does not reflect the BMA position in any way. To stay up to date with what is going on and to read the BMA’s analysis of the plans, please see our website: www.bma.org.uk/stp

If you would like to send comments on the STP process nationally then please email Holly Higgs (hhiggs@bma.org.uk).
21. Cambridgeshire and Peterborough

**Population:** 930,000

**Link to plan**

**Lead:** Tracy Dowling, Cambridgeshire & Peterborough CCG

Contact your regional coordinator about your STP: nmason@bma.org.uk

**Priorities are:**

1. At home is best
   - a. People powered health and wellbeing
   - b. Neighbourhood care hubs

2. Safe and effective hospital care, when needed
   - a. Responsive urgent and expert emergency care
   - b. Systematic and standardised care
   - c. Continued world-famous research and services

3. We're only sustainable together
   - a. Partnership working

4. Supported delivery
   - a. A culture of learning as a system
   - b. Workforce: growing our own
   - c. Using our land and buildings better
   - d. Using technology to modernise health

**Key points:**

- Changes appear to be less controversial than other areas but still lack detail. Much is about progressing previous plans.
- The plan details three rural urgent primary care hubs, which will focus on integrating local primary, MIU (Minor Injury Units) and community services and will move on to include developing point-of-care testing and consultant support via telemedicine link.
- Centralising specialised orthopaedic trauma services (such as fragility fractures from falls) at Peterborough City Hospital and Addenbrooke's Hospital. MIUs won’t close but community hubs will be developed.
- Hinchingbrooke Community MIU could relocate to Peterborough.
- There will be a move to rehabilitate in homes so as to free up community inpatient beds.
- The STP involves taking forward the Uniting Care older persons project and the Urgent Care Vanguard.
- The express intention to move to becoming a fully-fledged ACO.
- The community model will start by working with three ‘testbeds’ (groups of seven to 10 practices, supporting populations of 30,000-50,000 patients) to improve efficiency by implementation of the 10 High Impact Actions set out in the GP Forward View.
- Papworth is relocating to the Cambridge Biomedical Campus.
- Hinchingbrooke and Peterborough Trusts are merging. Proposed savings from this may be optimistic. There is a risk that Hinchingbrooke A&E will be downgraded at some point.
- There is a huge general practice shortage, despite this they are expected to play a key part in savings.
- The aim is to reduce current total community bed stock by 2018 and instead support care at home.
- Success relies on reducing demand, reducing hospital length of stay and improving workforce utilisation.

30 [http://www.fitforfuture.org.uk/what-were-doing/publications/](http://www.fitforfuture.org.uk/what-were-doing/publications/)
Engagement:
- contact@fitforfuture.org.uk
- STP lead has been active in offering to speak to BMA members and spoke to local Divisions.

Finances:
*Financial gap by 2020/21*
- Combined health and social care: £504 million

**Capital funding required: 800 million (including the relocation of Papworth Hospital)**

Cambridgeshire CCG is the most financially challenged CCG in England and the footprint is more financially challenged considering the size of its population than any other footprint.