STP summary paper

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).
41. Dorset

Population: 800,000

Lead: Tim Goodson, Dorset CCG

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

Priorities are:
1. Prevention at scale
2. Integrated community services
3. One acute network of services
4. These are supported by two enabling programmes:
   a. Leading and working differently
   b. Digitally-enabled Dorset

Key points:
- Likely candidate to become an ACS (Accountable Care System).
- The plan mentioned a reduction in the number of GP sites and the development of community hubs. The plan states that the RCGP Ambassador and local medical committee have indicated their support for the approach and continue to be involved in the consultation.
- Royal Bournemouth Hospital could become ‘major emergency hospital’. The accident and emergency unit at Poole Hospital would be replaced by an urgent care centre. Obstetric led maternity and inpatient paediatrics would also be removed from Poole, and provided for at Royal Bournemouth. Poole Hospital would become a “hospital for major planned care...away from the disruption that urgent and emergency care can create”. Dorset County Hospital would retain its A&E though some major emergencies would be transferred to Bournemouth. There will also be potential networking or downgrading of maternity and children’s services at Dorset County Hospital.
- Substantial changes to preventative and community based services. These include removing beds (1570) from several community hospitals, and the potential closure altogether of a small number of community hospital sites. The consultation says “community hubs” will be developed which will "provide a joint health and social care approach to caring for patients, particularly the elderly and frail" allowing outpatient appointments outside of acute hospitals with an extended multidisciplinary team with health and care staff working from a single location. This will help meet the 25% reduction in unplanned medical admissions and the 20% reduction in unplanned surgical admissions required for proposals for improving acute hospital care.
- The STP will develop a shared service contract for ‘back office’ functions of HR, finance, procurement and estates.

Engagement:
- Contact: feedback@dorsetccg.nhs.uk
- Formal consultation taken place on changes that make up major part of the STP. The consultation ran until 28th February. Consultation can be found here.

Finances:
Financial gap by 2020/21
- Healthcare: £299 million
- Social care: £70 million
- Combined: £299 million

Capital funding required: £148 million

62 http://www.dorsetccg.nhs.uk/aboutus/sustainability.htm
64 https://www.csr.dorsetvision.nhs.uk/2016/12/01/csr-public-consultation-launch/