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).
32. Kent and Medway

Population: 1.8 million

Lead: Glenn Douglas, Maidstone & Tunbridge Wells NHS Trust
Contact your regional coordinator about your STP: htownsend@bma.org.uk

Priorities are:
1. Prevention of ill-health
2. Local care – better access to care and support in people's own communities
3. Mental health – just as important as physical health
4. Hospital care – excellent wherever it is delivered

Key points:
– Merger of back office functions (finance, payroll, HR, legal). One of four back office merger "pathfinders''.
– Mentions development of a K&M medical school for undergrad and postgrad.
– Seems to favour scaling up primary care into clusters and hub based MCP models.
– Plan suggests consolidation of emergency and elective services achieving savings of £90m but does not identify where.
– Further consolidation and co-location of specialist services such as pPCI (primary percutaneous coronary intervention); vascular, renal, head and neck; urology; hyper-acute stroke; haemat-oncology and gynae-oncology inpatient services.
– Huge savings from moving care to the community but doesn’t specify how the ‘local care’ model will be funded or resourced.
– Partnership working between hospital sites and explore the creation in east Kent of:
  – one emergency hospital centre with specialist services, including planned care
  – one emergency hospital centre, including planned care
  – one planned care hospital centre focusing on planned inpatient orthopaedic surgery or treatment, supported by rehabilitation services, and a GP-led urgent care centre
  – Eight hubs are planned to provide more specialist and out of hours services.
– Site of Encompass Vanguard, comprising 16 practices (170,000 patients) in east Kent which is operating as an MCP.
– Assuming reducing activity, length-of-stay and sustainable occupancy, required bed capacity should be 10% smaller by 2020/21 (approx. 300 less beds).

Engagement:
– Contact: engagement.secsu@nhs.net
– In the New Year more detailed information about the STP will be published along with a timetable for engaging with the public in Kent and Medway from June 2017. Final decision on consultation + implementation December 2017. In the meantime a survey is available on the website but focused on patients rather than staff groups.
– Timetable of events available here 49

49 https://www.kmpt.nhs.uk/news-and-events/events-list.htm?postid=28400
– No involvement of LMC or LNCs (Local Negotiating Committees) up to November 2016. STP lead has now responded to contact from IRO (Industrial Relations Officers) (23/11) with details of the STP. LMC has been invited to attend Programme Board (from January 17).

**Finances:**

*Financial gap by 2020/21*

- Healthcare: £441 million
- Social care: £45 million
- Combined: £486 million

*Savings proposed:*

- QIPP: £50 million
- Specialised commissioning: £51 million
- Care transformation: £102 million
- Productivity enablers: £190 million
- System leadership: £12 million
- STF: £122 million

**Capital funding required: £75 million**