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).
22. Norfolk and Waveney

**Population:** 1.0 million

**Link to plan:**

**Lead:** Dr Wendy Thomson, Norfolk County Council

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

**Priorities are:**
1. We want more care closer to home
2. We need a thriving and sustainable acute (hospital) sector
3. We must focus on preventing illness and promoting wellbeing
4. We can do more by closer and integrated working
5. We have got to provide services in the budget we have – affordability is vital

**Key points:**
- The annual NHS allocation in 2016/17 is £1.168 billion, in 2020/21 it’s £1.327 billion.
- Whilst the emphasis is on a shift from acute care to primary care, there is a lack of specific and clear detail as to how this translates into a model for provision.
- All STP partners to commit to developing a STP workforce strategy which envisages significantly more highly trained staff.
- There will be a review to determine whether there is a need to redesign A&E to relieve pressure on the three acute providers and examine a potential ACAD (Ambulatory Care and Diagnostics centre) based in the Greater Norwich area.
- Planned land disposal will be reappraised to ensure it fits with STP objectives.
- Significant predicted savings from reducing A&E attendances and non-elective admissions, as well as acute bed days.
- One acute provider has a waiting list of 40,000 patients – NHS Improvement estimate that this is 10,000 patients above the point of sustainability. A service reconfiguration is therefore required.
- 45% of patients currently in acute beds could be treated elsewhere.
- One of the poorest performing footprints regarding IT connectivity.
- Potential targets include a 20% reduction in A&E attendances and non-elective admissions, a 20% reduction of acute bed days delivered by growth of out of hospital activity, a 15% reduction in acute bed days delivered by improving hospital processes, and the achievement of national cancer waiting time and RTT standards.
- There is also a projected 20% reduction in mental health related A&E attendances, and a 10% reduction in frequent attendances by people with mental health conditions.

**Engagement:**
- Contact: no email address available.
- Commitment to public consultation as plan is further developed but no specific proposals. Further commitment to consult with doctors.
- A key risk of the plan is identified as the issue of shortfalls in workforce and/or staff being insufficiently trained to deliver quality service during the transformation. Proposed solution entails ‘engagement and co-production with staff via Clinical and Professional Design Authority’.

31 [http://www.healthwatchnorfolk.co.uk/ingoodhealth](http://www.healthwatchnorfolk.co.uk/ingoodhealth)
**Finances:**

*Financial gap by 2020/21*

- Healthcare: £317 million
- Social care: £99 million
- Combined: £415.6 million

Savings proposed by STP reduce deficit to £50.1 million by 2021.

*Savings proposed include:*

- Prevention & wellbeing: £12.7 million
- Primary, community and social care: £56.5 million
- Acute care: £25.8 million

The STP envisages increased investment in primary care (£15 million).