



| | | |
|-----------------------|--------------------------|-------------------------|
| SUMMARY REPORT | Meeting Date: | 24 November 2016 |
| | Agenda Item: | 9.2 |
| | Enclosure Number: | 8 |

| | | | |
|---|--|----------------------|--|
| Meeting: | Trust Board | | |
| Title: | Transformation Report | | |
| Author: | Mel Duffy, Director of Strategy Tricia Finch, Head of Business Development | | |
| Accountable Director: | Mel Duffy, Director of Strategy Steve Gregory, Director of Nursing and Operations | | |
| Other meetings presented to or previously agreed at: | Committee | Date Reviewed | Key Points/Recommendation from that Committee |
| | | | |

| Purpose of the report | | | |
|--|--|-----------------------------------|--|
| <ul style="list-style-type: none"> Provide details and an update on System-led Transformation and trust-led Transformation. Provide details on the development of our 2 year Operational Plan. | Consider for Action | ✓ | |
| | Approval | ✓ | |
| | Assurance | ✓ | |
| | Information | ✓ | |
| Strategic goals this report relates to: | | | |
| To deliver high quality care | To support people to live independently at home | To deliver integrated care | To develop sustainable community services |
| ✓ | ✓ | ✓ | ✓ |

| Summary of key points in report |
|---|
| <p>Part 1: System Transformation</p> <ul style="list-style-type: none"> The latest iteration of the Sustainability and Transformation Plan was submitted on 21st October deadline. Initial feedback has been received and is being considered by the partner organisations. Work continues on the development of the neighbourhood solutions, including the integrated care model to deliver more care closer to home. The scale of transformation is significant as is the pace of change required. Work continues of the development of the Outline Business Case for the reconfiguration of acute services to ensure their clinical and financial sustainability. During October, the West Midland Clinical Senate undertook an independent clinical review of the proposal. <p>Part 2: Internal Transformation Programme</p> <ul style="list-style-type: none"> The Business Development Group received and reviewed one new idea this month relating to Traded Services. The Group also discussed the future requirement for schemes for 2017/18 onwards. The report provides the current status of existing projects and the associated risks that the |

¹ Accountable Directors: Mel Duffy and Steve Gregory
Trust Board: 24 November 2016

Committee need to be aware of.

Part 3: Developing our Operational Plan

- We have agreed 3 Strategic Priorities for 2017/18 to 2018/19:
 - **Getting to 'Good' and Beyond:** Safe, Caring, Effective, Responsive, Well-Led
 - **Building our 5 Year Plan:** Sustainability and Transformation Plans (STP)
 - **Implementing Electronic Patient Record:** Optimising the use of technology
- On 3rd and 4th November representatives from the operational teams and representatives from the corporate teams came together for 2 half day planning workshops.
- The draft 2017/18 to 2018/19 operational plan is required by mid-day today [24 November]. The final submission will be submitted 23rd December.

Key Recommendations

The Board is asked to:

- Receive the update on the Sustainability and Transformation Plan and consider potential risks to the organisation.
- Receive the update on the existing projects status and consider the risks associated with the projects identified within the CIP Programme.
- Receive details of the Trust's priorities for 2017 to 2019 and the outline operational plan.
- Agree any further actions required.

| Is this report relevant to compliance with any key standards? YES OR NO | | State specific standard or BAF risk |
|---|-----------|--|
| CQC | No | |
| IG Governance Toolkit | No | |
| Board Assurance Framework | Yes | |
| Impacts and Implications? | YES or NO | If yes, what impact or implication |
| Patient safety & experience | Yes | Future transformation programmes are intended to have a favourable impact. |
| Financial (revenue & capital) | Yes | Variable according to value of individual development schemes. |
| OD/Workforce | Yes | New service models will result in new ways of working and new roles for the workforce. Efficiency programmes are likely to impact on the existing workforce. |
| Legal | Yes | Contractual arrangements with external suppliers are subject to legal review. |

| | |
|--------------|---|
| Title | Transformation Report October 2016 |
|--------------|---|

1. Introduction

This report provides an update to the Board on transformation programmes and strategic initiatives that are being progressed within the local health system:

- Part 1: System-led Transformation
- Part 2: Internal Transformation Programme and Progress Against our 2016/17 Plan
- Part 3: Developing our 2 Year Operational Plan for 2017/19

All information contained within the report is correct at time of writing, 17 November, updates and developments since that time will be provided verbally to the Board.

2. Part 1: System Transformation

2.1 Sustainability and Transformation Plan

2.1.1 Neighbourhood Workstream

2.1.2 Acute Services Reconfiguration – Future Fit

2.1 Sustainability and Transformation Plan (STP)

The latest iteration of the Sustainability and Transformation Plan was submitted as required by the 21st October deadline. Initial feedback has been received and is being considered by the partner organisations.

The STP presents a significant programme of transformation for the Trust that will require continued focus and drive to ensure that our contributions to the achievement of the Plan's ambitions are delivered as planned and on time. Building our 5 Year Plan is one of our Key Priorities within our Operational Plan. Further details of this are included in Part 3 of this paper.

Work also continues on the development of our 2 year Operational Plan through which we will deliver our contribution to the first 2 years of the Neighbourhood solutions and the STP. Further detail about our plan is provided in Part 2 of this report. It should be noted that, at time of writing, there was still a lack of detail about commissioner QIPP proposals. This presents a potential risk that commissioner plans may not support the neighbourhood solutions in development.

2.1.1 Neighbourhood Workstream

Work continues on the development of the neighbourhood solutions, including the integrated care model to deliver more care closer to home. Key activities for the next month include:

- Developing detailed Neighbourhood plans including implications for workforce, beds, technology and finance
- Reviewing current left shift activity assumptions
- Delivering the GP Forward View
- Managing demand and social capital

We are currently quantifying our support requirements to ensure we have the capacity to deliver to plan.

2.1.2 Acute Services Reconfiguration – Future Fit

Work continues of the development of the Outline Business Case for the reconfiguration of Shrewsbury and Telford Hospital NHS Trust's acute services to ensure their clinical and financial sustainability. It is proposed that there will be one Emergency Centre but both hospitals will continue to manage patients with urgent care needs and patients with on-going care needs who have been reviewed in the Emergency Centre will be managed at the site closest to their home, if clinically appropriate.

During October, the West Midland Clinical Senate undertook an independent clinical review of the acute services reconfiguration proposal as part of NHS England's assurance process to test the clinical quality and strategic fit of the plans including finance, workforce, activity, programme management, travel impact, resilience, communications and engagement and use of IT.

3. Part 2: Internal Transformation Programme

3.1 Transformation Framework

During the last month the Business Development Group has continued to focus on progressing schemes identified in the 2016/17 CIP Programme. Risks identified and recommendations from the Group are reported to the Transformation Programme Board, which in turn reports to this committee.

The Business Development Group received and reviewed one new idea this month relating to **Traded Services – Strengthening Families**. The Group also discussed the future requirement for schemes for 2017/18 onwards.

3.2 Project Status Dashboard

The PMO Project Status Dashboard has been developed to **provide assurance and ensure visibility** of key transformation projects and cost improvement programmes. The Dashboard provides details of progress against **2 key dimensions** of programme management; project development and financial benefits realisation.

A copy of the latest Dashboard is shown below:

| | | | | | | | | | | OCTOBER FIGURES | | | | | | | |
|--|---------------|---|-----------------------------------|------------------------|----------------------|----------------------|--------------------|----------------------------------|--------------------|-------------------------------------|---------------------|------------------------|--------------------------------|-----------------------------|-------------------------|---------------------------|----------------|
| MONTH | | October | | Updated as at 14/11/16 | | Development | | | | | | | | Financial Benefits Realised | | | |
| | | | | | | | | | | PMO | Finance Information | | | | | | |
| 2016/17 Ref | CIP Yes or NO | Scheme | Project Lead / Operational Lead | Contact for PMO | Original Target £000 | PID Value 16/17 £000 | PID Value FYE £000 | Month Benefit / Savings will Sta | Proforma Completed | PID Part A Status | PID Part B Status | PID/QE/A Part C Status | Delivery Plan / Actions Status | PID Value to Date | Original Target to Date | Benefits Realised to Date | Forecast Value |
| Schemes Identified in 2016/17 CIP Programme | | | | | | | | | | | | | | | | | |
| 1.00 | Yes | CAMHS (revised) | Paul Devlin / Mike O'Prey | Mike O'Prey | 500.00 | 494.00 | 774.00 | May | | A | A | G | A | 45.0 | 83.0 | 80.0 | 318.0 |
| 2.00 | Yes | Traded Services - Service Provision | Kirsten Eillmore /Kit Pool | TBC | 100.00 | 1.00 | 2.00 | December | | G | G | N/R | R | 0.0 | 58.0 | 0.0 | 51.0 |
| 2.02 | Yes | Traded Services Other - Oral Health Improvement in Care Homes | Alison Parkinson / Paul Zubkowski | Alison Parkinson | 0.00 | 10.00 | 20.00 | TBC | Y | G | G | N/R | R | 1.7 | 0.0 | 3.0 | 5.0 |
| 2.03 | Yes | Traded Services - Training and Time Limited Projects | Alison Parkinson / Nicola Greaves | TBC | 0.00 | 5.00 | 5.00 | TBC | | G | G | N/R | R | 0.0 | 0.0 | 0.0 | 0.0 |
| 2.04 | Yes | Traded Services - Immunisations and Vaccinations | Alison Parkinson | Alison Parkinson | 0.00 | | | | | G | G | N/R | R | 0.0 | 0.0 | 2.0 | 3.0 |
| 2.05 | Yes | Traded Services - Strengthening Families | Nicola Greaves | Alison Parkinson | 0.00 | 0.00 | | | | G | R | A | R | 0.0 | 0.0 | 0.0 | 0.0 |
| 3.00 | Yes | Managing Community Equipment Services within budget | Yvonne Gough / Carol Bayley | Yvonne Gough | 500.00 | 261.00 | 500.00 | October | | G | A | G | A | 53.0 | 273.0 | 159.0 | 300.0 |
| 4.00 | Yes | IDTs (see also 4.01 below) | Sam Townsend | Yvonne Gough | 800.00 | 800.00 | 1400.00 | July | | Awaiting External Review Output | | | | 217.0 | 217.0 | 0.0 | 80.0 |
| 5.00 | Yes | Community Hospitals | Andy Matthews | Andy Matthews | 600.00 | 600.00 | 600.00 | April | | G | G | G | G | 330.0 | 350.0 | 24.0 | 230.0 |
| 6.00 | Yes | Stoke Heath Prison Service Agency Spend | Andy Matthews / Wendy Sweeney | Mark Onions | 300.00 | 300.00 | 300.00 | April | | G | G | G | G | 159.0 | 139.0 | 37.0 | 163.0 |
| 7.00 | Yes | Centralised Booking physio and podiatry | Andy Matthews / Katie Turton | Mark Onions | 10.00 | 10.00 | 10.00 | October | | G | G | G | G | 5.0 | 1.0 | 1.0 | 10.0 |
| 7.01 | Yes | Physio Clinic Standardisation | Andy Matthews | Mark Onions | 45.00 | 45.00 | 91.00 | June | | G | G | G | G | 16.5 | 17.0 | 19.0 | 56.0 |
| 7.02 | Yes | Admin Review - Single Point of Access | Paul Devlin / Sally-Anne Osborne | TBC | 20.00 | 20.00 | 20.00 | October | | Awaiting Further Information | | | | 2.0 | 2.0 | 0.0 | 0.0 |
| 8.00 | Yes | CES / Wheelchairs Leadership | Yvonne Gough | n/a | 16.00 | 0.00 | 0.00 | October | | Not Progressing | | | | 0.0 | 2.0 | 0.0 | 0.0 |
| 9.00 | Yes | Procurement (see also non-recurring scheme below) | Rob Goodrich | Rob Goodrich | 150.00 | 0.00 | 0.00 | April | | G | G | N/R | G | 0.0 | 87.0 | 33.0 | 79.0 |
| 9.01 | Yes | Laundry Contract Renewal | Andy Matthews | n/a | 0.00 | 0.00 | 0.00 | April | | Included in 9.0 Procurement (above) | | | | 0.0 | 0.0 | 6.0 | 10.0 |
| 14.00 | Yes | Back Office / Hybrid Mail | Andrew Crookes | TBC | 15.00 | 0.00 | 0.00 | June | | Included in 9.0 Procurement (above) | | | | 0.0 | 7.0 | 0.0 | 0.0 |
| 10.00 | Yes | Corporate Agency | Sarah Lloyd | Mark Onions | 83.00 | 0.00 | 0.00 | June | | G | G | N/R | N/R | 0.0 | 41.0 | 38.0 | 88.0 |
| 11.00 | Yes | Facilities & Estates | Mel Duffy | Mark Onions | 350.00 | 350.00 | 350.00 | October | | G | A | N/R | A | 156.0 | 156.0 | 2.0 | 235.0 |
| 11.01 | Yes | Broseley Physio Clinic Move | Andy Matthews / Rachel Mole | Mark Onions | 0.00 | 0.00 | 0.00 | October | | G | G | G | G | 0.0 | 0.0 | 10.0 | 17.0 |
| 12.00 | Yes | Facilities & Estates | Mel Duffy | Mark Onions | 50.00 | 50.00 | 50.00 | July | | G | G | N/R | N/R | 8.0 | 8.0 | 63.0 | 147.0 |

| | | | | | | | | | | | | | | OCTOBER FIGURES | | | |
|---|---------------|---|---------------------------------|------------------------|----------------------|----------------------|--------------------|----------------------------------|--------------------|---|-------------------|--------------------------------|--------------------------------|-----------------------------|-------------------------|---------------------------|----------------|
| MONTH | | October | | Updated as at 14/11/16 | | Development | | | | | | | | Financial Benefits Realised | | | |
| | | | | | | | | | | | | | | PMO | | Finance Information | |
| 2016/17 Ref | CIP Yes or NO | Scheme | Project Lead / Operational Lead | Contact for PMO | Original Target £000 | PID Value 16/17 £000 | PID Value FYE £000 | Month Benefit / Savings will Sta | Proforma Completed | PID Part A Status | PID Part B Status | PID/QEIA Part C Status | Delivery Plan / Actions Status | PID Value to Date | Original Target to Date | Benefits Realised to Date | Forecast Value |
| Schemes Identified in 2016/17 CIP Programme | | | | | | | | | | | | | | | | | |
| 15.00 | Yes | Corporate Admin | Sarah Lloyd | Mark Onions | 10.00 | 0.00 | 0.00 | May | | see scheme 15.01 below | | | | 0.0 | 5.0 | 0.0 | 0.0 |
| 15.01 | Yes | Financial Accounting staffing reduction | Diana Owen | Mark Onions | 0.00 | 13.00 | 13.00 | April | | G | G | N/R | N/R | 7.7 | 0.0 | 8.0 | 13.0 |
| 17.00 | Yes | Community Paeds Premium Agency | Nicki Ballard / Narinder Kular | Mark Onions | 60.00 | 6.00 | 0.00 | July | | G | G | N/R | N/R | 4.5 | 26.0 | 6.0 | 14.0 |
| 20.00 | Yes | Medication Review | Rita O'Brien | TBC | 25.00 | 0.00 | 0.00 | April | | G | G | N/R | N/R | 0.0 | 14.0 | 31.0 | 44.0 |
| 21.00 | Yes | Transport review | Keith Edwards | TBC | 25.00 | 0.00 | 0.00 | April | | G | G | N/R | R | 0.0 | 14.0 | 2.0 | 2.0 |
| 24.00 | Yes | Well Company - Occ Health | Mark Onions / Clare Guerreiro | Mark Onions | 0.00 | 20.00 | 20.00 | October | Y | G | G | N/R | G | 0.0 | 0.0 | 0.0 | 0.0 |
| 27.00 | Yes | Ludlow Ultrasound | Andy Matthews | Mark Onions | 0.00 | 0.00 | 0.00 | | | G | G | N/R | N/R | 0.0 | 0.0 | 5.0 | 9.0 |
| SUB TOTAL | | | | | | | | | | | | | | 1005.4 | 1500.0 | 529.0 | 1874.0 |
| New Schemes Identified in 2016/17 | | | | | | | | | | | | | | | | | |
| P1.00 | No | Domiciliary Care | Sally-Anne Osborne | Trish Finch | - | - | - | - | Y | G | G | G | R | 0.0 | 0.0 | 0.0 | 0.0 |
| P2.00 | No | Drug Procurement | Rita O'Brien /David Young | Trish Finch | - | - | - | - | Y | A | G | G | G | 0.0 | 0.0 | 0.0 | 0.0 |
| P3.00 | No | ANP(Advanced Nurse Practitioner) for Palliative /End of Life Care | Cath Molineux | TBC | - | - | - | - | Y | G | G | N/R | R | 0.0 | 0.0 | 0.0 | 0.0 |
| SUB TOTAL | | | | | | | | | | | | | | 0.0 | 0.0 | 0.0 | 0.0 |
| Proposed Schemes included in 2016/17 CIP Programme and New Schemes in the pipeline | | | | | | | | | | | | | | | | | |
| 16.00 | Yes | Non-Pay | Andy Turnock | TBC | 10.00 | 0.00 | 0.00 | May | | A | R | R | N/R | 0.0 | 5.0 | 0.0 | 10.0 |
| 22.00 | Yes | Pool Cars | Keith Edwards | TBC | 8.00 | 0.00 | 0.00 | April | | R | R | R | N/R | 0.0 | 5.0 | 1.0 | 5.0 |
| 28.00 | Yes | Rebase of EBME SLA | Andy Matthews | | 0.00 | 0.00 | 0.00 | | | New Scheme Identified by Finance | | | | 0.0 | 0.0 | 7.0 | 12.0 |
| 30.00 | Yes | Reduction in Travel Expenses | Sally-Anne Osborne | | 0.00 | 300.00 | 0.00 | | | New Scheme Identified by Finance | | | | 0.0 | 0.0 | 200.0 | 300.0 |
| P4.00 | No | E- Rostering | Andy Matthews /Rachel Mole | TBC | - | - | - | - | Y | On Hold Until Oct (pending outcome of pilots) | | | | 0.0 | 0.0 | 0.0 | 0.0 |
| P5.00 | TBC | Review of In-house Laundry Services | Rachael Brown | Mark Onions | - | - | - | - | Y | Being Progressed through SDG | | | | 0.0 | 0.0 | 0.0 | 0.0 |
| P6.00 | TBC | FLO Telehealth | Cath Molineux | Sarah Edwards | - | - | - | - | Y | On Hold Until October (when Clinical Lead returns | | | | 0.0 | 0.0 | 0.0 | 0.0 |
| P7.00 | TBC | Delivery of Tissue Viability Service to Care Homes in Shropshire | Joy Tickle | TBC | - | - | - | - | Y | G | A | R | R | 0.0 | 0.0 | 0.0 | 0.0 |
| SUB TOTAL | | | | | | | | | | | | | | 0.0 | 10.0 | 208.0 | 327.0 |
| | | | | | 3677.00 | 3285.00 | | | | | | TOTAL RECURRING SCHEMES | | 1005.4 | 1510.0 | 737.0 | 2201.0 |

| | | | | | | | | | | OCTOBER FIGURES | | | | | | | |
|---|---------------|--|---------------------------------|------------------------|----------------------|----------------------|--------------------|----------------------------------|--------------------|-------------------|-----------------------------|------------------------|--------------------------------|-------------------|-------------------------|---------------------------|----------------|
| MONTH | | October | | Updated as at 14/11/16 | | Development | | | | | Financial Benefits Realised | | | | | | |
| | | | | | | | | | | PMO | | Finance Information | | | | | |
| 2016/17 Ref | CIP Yes or NO | Scheme | Project Lead / Operational Lead | Contact for PMO | Original Target £000 | PID Value 16/17 £000 | PID Value FYE £000 | Month Benefit / Savings will Sta | Proforma Completed | PID Part A Status | PID Part B Status | PID/QEIA Part C Status | Delivery Plan / Actions Status | PID Value to Date | Original Target to Date | Benefits Realised to Date | Forecast Value |
| Non-recurring schemes and mitigating actions to deliver 16/17 CIP target | | | | | | | | | | | | | | | | | |
| 2.01 | Yes | Traded Services | Alison Parkinson | | 0.00 | | | | | | | | | 0.0 | 0.0 | 3.0 | 4.0 |
| 2.03 | Yes | Traded Services | Alison Parkinson | | 0.00 | | | | | | | | | 0.0 | 0.0 | 2.0 | 4.0 |
| 2.04 | Yes | Traded Services - Immunisations and Vaccinations | Alison Parkinson | | 0.00 | | | | | | | | | 0.0 | 0.0 | 0.0 | 0.0 |
| 4.01 | Yes | IDTs slippage | Sam Townsend | Sarah Edwards | 0.00 | | | | | | | | | 0.0 | 0.00 | 200.00 | 200.00 |
| 9.00 | Yes | Procurement | | | 0.00 | | | | | | | | | 0.0 | 0.0 | 32.0 | 62.0 |
| 26.00 | Yes | Vacancies C&F | Paul Devlin | | 0.00 | | | | | | | | | 0.0 | 0.0 | 55.0 | 97.0 |
| 28.01 | Yes | Rebase of RRPPS SLA | Andy Matthews | | 0.00 | | | | | | | | | 0.0 | 0.0 | 1.0 | 2.0 |
| 29.00 | Yes | Reduction in PDC / Depreciation | | | 0.00 | | | | | | | | | 0.0 | 0.0 | 28.0 | 108.0 |
| TOTAL NON RECURRING SCHEMES | | | | | | | | | | | | | | 0.0 | 0.0 | 321.0 | 477.0 |
| Forecast CIP shortfall against 16/17 Target | | | | | | | | | | | | | | | | | 999.0 |
| 2016/17 TOTAL | | | | | | | | | | | | | | 1005.4 | 1510.0 | 1058.0 | 3677.0 |

KEY

| | | | | |
|-----|----------------------------|----------------------------|---------------------------------|----------------------------|
| R = | Not Started or In Progress | Not Started or In Progress | Not Started or In Progress | Not Started or In Progress |
| A = | Awaiting Review at BDG | Awaiting Approval by TPB | Awaiting review from QEIA Group | Awaiting Approval by TPB |
| G = | Reviewed by BDG | Approved by TPB | Approved by QEIA Group | Approved by TPB |

| |
|---|
| Shortfall against Original Target >£10k |
| Shortfall against Original Target <£10k |

0.0

3. Part 3: Developing our 2 Year Operational Plan

3.1 Developing our 2017/18 to 2018/19 Priorities

In September, as part of our mid-year review, we refreshed our 2016/17 priorities. This is an important requirement to ensure that our plans are responsive and reflect the developments and changes that have taken place since they were published.

Changes that have been considered include:

- Progress against our internal transformation and efficiency programme supporting the delivery of our existing priorities.
- Actions arising from the receipt of the CQC Quality Report
- Progress of the wider system plans and the developing workstreams
- Achievements during the last 6 months

Following this review we have agreed our priorities for 2017/18 to 2018/19 against 3 Strategic Priorities;

- **Getting to 'Good' and Beyond:** Safe, Caring, Effective, Responsive, Well-Led
- **Building our 5 Year Plan:** Sustainability and Transformation Plans (STP)
- **Implementing Electronic Patient Record:** Optimising the use of technology

These were presented at our Annual General Meeting on 13th October 2016. A copy of these is included in our Plan on a Page, see Appendix 1

On 3rd and 4th November representatives from the operational teams and representatives from the corporate teams came together for 2 half day planning workshops. The purpose of the sessions was to support the development of integrated plans that bring together key quality improvement plans and service transformation schemes. Outputs and priorities identified by the Service Delivery Group form part of our Trust wide Draft Outline Operational Plan.

3.2 Outline Operational Plan

Our Operational Plan for 2017/18 to 2018/19 builds upon our 2016/17 plan. The plan is informed by, and must deliver, both national requirements and local health authority system plans. Our plan also describes our compliance requirements as identified by the CQC inspection and the priorities and developments identified by our operational teams.

The draft Outline Operational Plan is being submitted to NHSI today [24th November]. The final submission will be submitted by 23rd December. A summary of the remaining deadlines is shown below:

| Item | Date |
|---|---|
| Submission of full draft 2017/18 to 2018/19 operational plans | 24 November 2016 (noon) |
| Weekly contract tracker to be submitted by CCGs, direct commissioners and providers | Weekly from w/c 21/22 November 2016 to 30/31 January 2017 |
| National Tariff section 118 consultation closes | 28 November 2016 |
| Where CCG or direct commissioning contracts not signed and contract signature deadline of 23 December at risk, local decisions to enter mediation | 5 December 2016 |
| Contract mediation | 5 – 23 December 2016 |
| National Tariff section 118 consultation results announced | w/c 12 December 2016 |

Trust Board Meeting: 24 November 2016

| | |
|--|--|
| Publish National Tariff | 20 December 2016 |
| National deadline for signing of contracts | 23 December 2016 |
| Final contract signature date for CCG and direct commissioners for avoiding arbitration | 23 December 2016 |
| Submission of final 2017/18 to 2018/19 operational plans, aligned with contracts | 23 December 2016 |
| Final plans approved by Boards or governing bodies of providers and commissioners | By 23 December 2016 |
| Submission of joint arbitration paperwork by CCGs, direct commissioners and providers where contracts not signed | By 9 January 2017 |
| Arbitration outcomes notified to CCGs, direct commissioners and providers | Within two working days after panel date |
| Contract and schedule revisions reflecting arbitration findings completed and signed by both parties | By 31 January 2017 |

4. Board Action

The Board is asked to:

- Receive the update of the STP's development and consider potential risks to the organisation presented by the STP.
- Receive the update on the existing projects status and consider the risks associated with the projects identified within the CIP Programme.
- Agree any further actions required.

Vision "We will work closely with our health and social care partners to give patients more control over their own care and find necessary treatments more readily available.
 We will support people with multiple health conditions, not just single diseases, and deliver care as locally and conveniently as possible for our patients. We will develop our current and future workforce and introduce innovative ways to use technology."

