

Title:	Transformation Funding Update	
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London Health and Care Strategic Partnership Board 18 May 2018

1. Purpose and action required by Board members

1.1. The Board are asked to note the updated allocations for FY18/19 and the update on the Transformation Funding Oversight Group.

2. Allocations

- 2.1. At the extraordinary meeting on 16th April, the Board were presented with transformation funding allocations for FY18/19 totalling £119.6m. The London allocations for FY18/19 now total £128.4m. The Board are asked to note the following updates to the allocations:
 - Mental health: The updated figure is £5.184m (previously £1.3m). This
 updated figure includes £3.868m for perinatal community services, to be split
 between NCL STP, South London and the Maudsley Foundation Trust and
 Central and North West London Foundation Trust. The split of funding is
 contained within the Annex.
 - Cancer: The updated figure is £25.511m (previously £24.021m). This updated figure includes the funding for the pan-London bid, *Living with and beyond cancer* (£2.832m), in addition to the alliance funding. Transformation funding allocations for the cancer alliances in Q1 and Q2 have also now been confirmed (see Annex for detail).
 - Maternity: The updated figure is £3.497m (previously £1.465m). The updated figure includes £2.032m 'implementation funding' for the Local Maternity Systems (LMSs). The split of funding is contained within the Annex.
 - **Primary care:** The updated figure for ETTF is £26.899m (previously 25.35m).
 - Elective care: The updated figure is £1.136m (previously 1m).

- **STP infrastructure:** The updated figure is £1.210m (previously £1.5m). Final allocations per STP are contained within the Annex.
- 2.2. The updated Annex contains a full overview of the position, including any updates to individual line items.

3. Transformation Funding Oversight Group (TFOG) update

- 3.1. Board members have been asked to nominate representatives to join the TFOG, and membership has been confirmed as follows:
 - NHS England (London region): David Slegg (Regional Finance Director) and Khadir Meer (Regional Director of Delivery)
 - NHS Improvement (London region): Jeff Buggle (Regional Finance Director)
 - GLA: Amanda Coyle (Assistant Director, Health, Education and Youth)
 - London CCGs: Andrew Eyres (Accountable Officer)
 - STPs: NEL: Henry Black (NEL STP finance lead), Helen Pettersen (NCL STP CCG lead), Ged Curran (SWL STP Borough lead), Julie Lowe (SEL STP Chief Operating Officer), Lesley Watts, (NWL Provider lead)
 - London Boroughs: Dick Sorabji (London Councils, Corporate Director Policy and Public Affairs)
 - PHE: Yvonne Doyle (Regional Director)
 - HLP: Shaun Danielli (Director)
- 3.2. The first meeting of the TFOG is being scheduled and will take place before the next SPB meeting. Terms of Reference are being drafted, will be agreed at the first meeting of the TFOG and subsequently brought to the Board for ratification at the next meeting on 6th July. Initially the focus of the group will be on ensuring transparency across all partners on the application of transformation funding in FY18/19, and intended benefits for Londoners. Early meetings will therefore likely focus on a series of deep dives into the programmes receiving transformation funding in this financial year.

Annex: Allocations and commitments (position as of 3 May 2018)

(A) Programme/ Priority and description	(B) FY18/19 transformation funding total	(C) Existing commitments	(D) Discussions underway	(E) FY17/18 London Governance
Transforming care for people with learning disabilities The programme aims to achieve: • A substantial reduction in the number of people placed in inpatient settings. • Reduction in the length of stay for all people in inpatient settings. • Better quality of care for people who are in inpatient and community settings. • Better quality of life for people who are in inpatient and community settings.	£694K	E455K has been committed to three Transforming Care Partnerships (TCPs), in accordance with successful 2-year bids. Funds were awarded to: Reduce reliance on inpatient care amongst people of any age with a learning disability and/or autism who display behaviour that challenges; and/or Reduce challenging behaviour amongst children with a learning disability and/or autism. This money is due to be distributed as follows: North Central London TCP: 230K Inner North East London TCP: 65K South East London TCP: 160K	The remaining £239K is ring-fenced for learning disability patients being discharged for long-term care. Discussions are ongoing; however, the funds will be applied by the regional programme team to support transformation initiatives (likely to include development of community services across London).	Decisions have gone through the programme SROs (Jo Ohlson and Jane Clegg).
Urgent and Emergency Care (UEC) The UEC programme focusses on three key areas: Establishment of UEC networks to oversee the planning and delivery of the urgent and emergency care system Designation of urgent and emergency care facilities to ensure London quality standards are met, seven days a week Improvement and expansion of the NHS 111 system to direct patients to the most appropriate care setting to receive the right care, first time Within London, this money helps fund both the UEC programme and the Care Closer to Home programme.	£3.91m	Indicative allocations ¹ : NCL STP: £315k SEL STP: £390k NWL STP: £450k NEL STP: £410k SWL STP: £300k Pan-London STP support: £390k Improvement architecture: £1.5m London delivery assurance PMO: £180k	Decisions going through UEC governance.	The London governance in place is: The London Urgent and Emergency Care Transformation and Delivery Board. BBM (NHSE London region Operations and Performance group)

¹ Allocations calculated with reference to 17/18 allocations.

Mental health There is a wider mental health programme in London, but the money in scope aims to enable achievement of mental health liaison standards. Where the hospital has a 24/7 Emergency Department, then it should have a 'core 24' service level as a minimum to ensure 24/7 mental health cover (this includes consultant psychiatrists being available 24/7).	£5.184m	£1.316m² committed to fund mental health liaison, in accordance with 2-year bids. Funds due to be distributed as follows: • Kingston & Richmond: £115K • Epsom & St Helier: £443K • Wandsworth & Merton: £395,340 • Haringey: £363K £3.868m is committed to perinatal community services. Funds are due to be distributed as follows: • North Central London STP: £648,987 • South London and Maudsley NHS FT: £1,792,429 • Central and North West London NHS FT: £1,426,193	N/A	Money is allocated centrally but the regional UEC programme team have been engaged in the process for mental health liaison.
The programme aims to enable:		£2.832m is allocated for the pan-London Living With and Beyond Cancer bid. It has been confirmed that the total funding available across London for or Q1 and Q2 18/19 is £1.416m £21.439m is allocated to early diagnosis programmes within the 3 cancer alliances. Q1 and Q2 funding has been confirmed as follows: RM partners: £5,082,000 UCLH: £5,335,000 SEL: £303,000 £1.240m is allocated to alliance running costs for FY18/19. Funding has been confirmed as follows: RM partners: £504,292 UCLH: £460,423 SEL: £275,000	N/A	Decisions around funding and associated deliverables have been made by the national team and agreed through the national performance and delivery group on which all regions are represented. The decisions have been reported to the London Cancer Commissioning Board.
Primary care This programme aims to:	£53.5m on GPFV	 £53.5m is committed as follows: (i) £45.190m is allocated to support access. In London, this will go to fund both extended 	N/A	The London governance in place is: The Primary Care Delivery

Note that the figure may sometimes appear as £1.436m for FY18/19. This figure includes £130K of transformation funding, which North Middlesex received in FY17/18 (earlier than initially planned).

 Boost GP numbers Expand multidisciplinary primary care and increase other staff working in in general practice Support GPs to manage demand, unnecessary work, bureaucracy and integration with the wider system Enable extended access to GP appointments at evenings and weekends and provide more convenient patient access to GP services³ Modernise primary care premises 		access and primary care at scale. Of this funding, the latest update is that: (a) £34.18m will be allocated to STPs for extended access (b) £10m will be allocated to STPs, on a capitated basis, to support primary care at scale. (c) £3.3m is allocated to support online consultations. (d) £1.7m is allocated to support training care navigators. (e) £1.991m is allocated to support clinical pharmacy. (f) £1.3m is allocated to support practice resilience.		Oversight Group The Clinical Cabinet
	£26.899m on ETTF	£26.899m to be spent in accordance with the ETTF pipeline. Funding going to support projects within STPs.	N/A	The London governance in place is: The London Estates Primary Care Capital Panel The London Capital Committee
 Diabetes⁴ There are 3 workstreams within the NHS Diabetes Programme which is a partnership between NHS England, Public Health England, and Diabetes UK. These are: The Healthier You: NHS Diabetes Prevention Programme identifies those at high risk of Type 2 diabetes and provides a tailored, personalised behaviour change programme to help to reduce risk. The Treatment and Care Programme which focusses on improving the outcomes for those people with all forms of diabetes and reducing variation in treatment and care. The Digital Workstream aims to explore how digital options can provide more flexibility and potentially improve access to education and information to support behaviour change and manage diabetes. 	£6.854m	E6.854m attached to 2-year bids ⁵ within the treatment and care programme, to fund one or more of the following: (i) Increase the uptake of structured education; (ii) Improve achievement of the three NICE recommended treatment targets around blood pressure, cholesterol and blood sugar levels; (iii) Reduce the number of diabetes related amputations by improving access to multi-disciplinary footcare teams; and (iv) Lower the length of hospital stays for people with diabetes by improving access to specialist diabetes nurses in hospitals. Lead CCGs for bids are: Hackney & the City, Newham, Bexley, Southwark, Lewisham, Westminster/Central London, Kingston, Islington	 18/19 funding for treatment and care programme bids still to be approved by NHS England Investment Committee. Regional decisions will need to be taken on final funding allocations to CCGs (within the £6.85m envelope). 	The London governance in place is the London Diabetes Board

 ³ 100% of Londoners now have access to GP appointments 8am – 8pm, 7 days a week
 ⁴ Excluding DPP - this is centrally commissioned by NHS England through existing contracts with external providers

		and Wandsworth.		
Maternity The programme aims to implement the recommendations of 'Better Births' across England, and specifically to: • Meet the ambition to reduce stillbirths, neonatal and maternal deaths and intrapartum brain injury by 20% by 2020 • Increase choice, personalisation and experience for women and their families • Improve access to perinatal mental health services • Improve prevention	£3.497m	 £3.497m committed as follows: (g) £565.3K committed to NWL and NCL local maternity systems (LMS) Early Adopter (EA) sites. This breaks down as: £186,555 for NCL and £303,750 for NWL, for agreed deliverables by December 2018. £75K for each NCL (£37.5K) and NWL (£37.5K) to continue their EA programme staffing for the benefit of the wider implementation of maternity transformation programme in that area for Q4 18/19, once the EA programme has completed. (h) £450K committed to NEL, SWL and SEL LMS ('non-early adopters') to fund admin support, project management support and clinical backfill to support local maternity transformation in 18/19. (i) £300K committed to London Maternity Strategic Clinical Network. (j) £150K committed to the London regional Maternity Programme Board. (k) £2.032m 'implementation funding' for LMSs. This will be split as follows: £480,106 for NWL £344,913 for NCL £442,699 for NEL £436,480 for SEL £327,413 for SWL 	N/A	The London governance in place is the London regional Maternity Programme Board
This programme is supporting local clinicians and commissioners to change how patients are referred into services. This will help local NHS commissioners and providers meet the national priority that at least 92% of patients on non-emergency pathways wait no more than 18 weeks from referral to treatment.	£1.136m	(i) £1.136m committed to programme staffing costs, expert analytics support and support for bespoke elective care /demand management initiatives in each STP.	N/A	The London governance in place is the Elective Care Steering Group.
STP infrastructure	£1.210m	£1.210m will be committed to STP leadership. Split as follows:	N/A	Not attached to a programme

In the 2018/19 Planning Guidance, NHS England confirmed that it will be making a further non-recurrent allocation to each STP to support its leadership in 2018/19. This funding will help support STP leadership teams to take further steps to enhance the capability of the system including stronger governance and aligned decision-making, and greater engagement with communities and other partners.	 NWL: 226.7K NCL: 222.9K SEL: 283.8K NEL: 258.2K SWL: 218.7K 	
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