STPs, in the Commons – 16 December 2016

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<https://www.theyworkforyou.com/debates/?id=2016-12-16a.1147.11&s=GP#g1153.1>

-- There has been justified criticism of the secrecy with which this process of producing so-called sustainability and transformation plans has been carried out.

-- These plans are not going to be subject to Parliamentary scrutiny.

--- The King’s Fund reported in November that the speed of development of these plans means that:

* “Patients and the public have been largely absent” from the process and that NHS England has instructed that freedom of information requests should be “actively rejected”. Locally, in north-east London, a Freedom of Information request for the financial and working detail of the STP, was rejected in November on the basis that:
* “Disclosure would be likely to inhibit the ability of public authority staff … to express themselves openly...and explore extreme options … Deliberation needs to be made in a ‘safe space’  **to** develop ideas and to reach decisions away from external interference which may occur if there is premature public or media involvement.”

-- Today, we have seen news about the reality we face in our NHS: large numbers of hospitals with dangerously high bed-occupancy levels and little or no flexibility. The CQC’s Chief Executive recently talked about hospitals being dangerously full. On 26 November, a leaked memo from NHS England revealed that hospitals were being banned from declaring so-called “black alerts” and told to prepare for the winter crisis by passing on scheduled surgery to private hospitals and discharging thousands of patients to get bed occupancy down from a national average of 89% to 85%.

-- An incredibly powerful case about why we must involve the public in some incredibly difficult decisions

---All local STPs are now published and, as the Hon. Gentleman said, local areas should be having conversations with local people and stakeholders - including Members of Parliament - to discuss and shape the proposals, understanding what matters to them and explaining how services might be improved.

--- It is good to hear the Minister say that she wants to see local people involved in these plans. Will she, therefore, commit not just to a conversation, but a consultation with teeth to give people confidence that the very difficult decisions that we all know have to be made about changing the NHS, can be done with their consent and not simply given to them as a fait accompli?

-- I share the view of the Hon. Gentleman and the Hon. Lady that the public, key stakeholders and elected representatives should be closely involved in the development of STPs. With the plans now published, preparation for STP implementation must begin in the New Year. Now is the time for STP leaders to reach out actively and engage patients and the wider public, and I expect nothing less. That means having frank, engaging and iterative conversations across areas, as well as some potentially difficult conversations about what the NHS could and should look like. Simon Stevens and Jim Mackey—the heads of NHS England and NHS Improvement—have written an open letter to STP leaders, making that expectation absolutely clear.

The letter reiterated that now is the time for local engagement to help develop the proposals and for those involved to make it clear that these plans must have a real benefit to patients.

--- I should also be clear that, nationally, all reconfigurations must meet the four tests mandated by the Government to NHS England in 2010, which require all local reconfiguration plans to demonstrate support from GP commissioners, strong public and patient engagement, clarity on the clinical evidence base, and support for patient choice. We would not expect any proposal to move forward that has not met all four tests. Patients must be at the heart of the NHS, and no plan can be successful unless they are fully engaged.