GREATERLONDON AUTHORITY

REQUEST FOR DIRECTOR DECISION - DD2211

Title: The King's Fund analysis of the NHS's Sustainability and Transformation Plans in London

Executive Summary:

This decision form seeks approval to commission The King's Fund to provide the Mayor with further analysis and advice on the NHS's London Sustainability and Transformation Plans ('STPs'). It also requests a related single source exemption from the GLA's Contracts and Funding Code.

This work follows on from the report on the NHS's STPs commissioned by the GLA (approved under cover of ADD2067) in late 2016 and which was published in September 2017. It will look at how each STP has developed since that last report, and in particular The King's Fund will be asked to assess the STPs against the six assurances the Mayor, when the original report was published, said he needed to be met before he could offer his support to them.

Decision:

That the Executive Director of Communities and Intelligence approves:

- expenditure of £50,000 on research and analysis services provided by The King's Fund in respect of the NHS's London Sustainability and Transformation Plans (noting this work follows on from earlier analysis work at a cost to the GLA of £45,000); and
- 2. a related single source exemption from the GLA's Contracts and Funding Code to commission the above services from The King's Fund without procuring competitively.

AUTHORISING DIRECTOR

I have reviewed the request and am satisfied it is correct and consistent with the Mayor's plans and priorities.

It has my approval.

Name: Jeff Jacobs

Position: Executive Director of Communities

and Intelligence

Signature:

Date: 16.02.18.

PART I - NON-CONFIDENTIAL FACTS AND ADVICE

Decision required - supporting report

1. Introduction and background

- 1.1 The NHS developed Sustainability and Transformation Plans (**'STPs'**) aimed at securing a sustainable health service in the longer term.
- 1.2 The STPs attracted considerable debate throughout the latter part of 2016 and 2017 and in the light of this the Mayor, in November 2016, commissioned The King's Fund and Nuffield Trust (two leading independent experts on these matters) to advise him on:
 - a) What the plans say and mean including an assessment of out of hospital changes and beds
 - b) The credibility of the assumptions made in each STP
 - c) Impact on social care
 - d) Impact on health inequality
 - e) How the plans can be improved
 - f) How this should be implemented
- 1.3 Their joint report was published on 12 September 2017. Please see Appendix A.
- 1.4 The commission of further analysis is aimed at assessing the progress each STP has made against the six assurances the Mayor, when the original report was published, said he needed to be met before he could offer his support to them.
- 1.5 For reference, those six assurances are:

Health inequalities and prevention of ill health

The impact of any proposed changes to health services in London must not widen health inequalities. Plans must set out how they will narrow the gap in health equality across the capital.

Hospital beds

Given that the need for hospital beds is forecast to increase due to population growth and an ageing population, any proposals to reduce the number of hospital beds will need to be independently reviewed to ensure all factors have been taken into account. Any plans to close beds must be an absolute last resort, and must meet at least one of the NHS' 'common sense' conditions.

Financial investment and savings

Sufficient funding is identified (both capital and revenue) and available to deliver all aspects of plans including moving resources from hospital to primary and community care and investing in prevention work. Proposals to close the projected funding gap, including planned efficiency savings, are credible.

Social care impact

Proposals must take into account the full financial impact any new models of healthcare, including social care, would have on local authority services, particularly in the broader context of the funding challenges councils are already facing.

Clinical support

Proposals demonstrate widespread clinical engagement and support, including from frontline staff.

• Patient and public engagement

Proposals demonstrate credible, widespread, ongoing, iterative patient and public engagement including with marginalised groups, in line with Healthwatch recommendations.

- 1.6 The GLA is seeking a single source exemption from the GLA's Contracts and Funding Code to commission The King's Fund without procuring competitively and a single source justification (SSJ) form is attached with this report at Appendix B. The original report was granted a single source exemption (Appendix C) to appoint The King's Fund. The GLA is seeking a further exemption to ensure that the Mayor has the best advice while ensuring continuity of approach and delivery. The King's Fund is also the market leader in this area and enjoy considerable credibility among health sector leaders.
- 1.7 ADD2067 (Appendix D) approved original expenditure of £45,000 to commission the joint analysis of the STPs as noted above. This decision seeks approval of a further £50,000 to assess the progress each STP has made.

2. Objectives and expected outcomes

- 2.1 The objective of the work is to follow up on the previous report that was undertaken with The King's Fund & the Nuffield Trust and to assess progress the STPs have made against what they set out to do. There have been developments in national policy with the introduction of the accountable care plans and London Health Care Devolution.
- 2.2 The King's Fund's report will include:
 - An update on the national policy context to outline how the thinking of NHS England and NHS
 Improvement about STPs has moved on and an update on the work of the eight accountable care
 systems in England, which are the most advanced form of STPs. The King's Fund would also outline
 developments in the government's policy on devolution as relevant to this work in Greater
 Manchester, Surrey Heartlands and London.
 - An update of progress in all five London STPs through interviews with leaders in all areas as well as
 key contributors from London as a whole. The objective of this aspect will be to assess the progress
 made in each area against the Mayor's six assurances as well as highlight the challenges that have
 occurred with examples of work done to address those.

3. Equality comments

- 3.1 The officers have given due regard to their duty in respect of section 149 of the Equality Act 2010.
- 3.2 All the work of the GLA Health Team is predicated around the need to address health inequalities, including leading the implementation of the Mayor's Health Inequalities Strategy. Health inequalities are experienced by Londoners with the protected characteristics of the Equalities Act and between other groups of Londoners.
- 3.3 The Health Team actively considers the impact of its work on health inequalities (including the protected characteristics) and works with a range of other teams within the GLA to help them do the same.
- 3.4 This work will enable the Mayor and GLA to better understand the impacts government policy in respect of the NHS has on those groups with protected characteristics, and so that the Mayor can "Champion and Challenge" the NHS (the Mayor's manifesto commitment).

4. Other considerations

None.

5. Financial comments

The cost of £50,000 for this proposal will be contained within the Health Programme budget for 2017-18.

6. Legal comments

- 6.1 The foregoing sections of this report indicate that:
 - the decisions requested of the director concern the exercise of the GLA's general powers, falling
 within the GLA's statutory powers to do such things considered to further or which are facilitative
 of, conducive or incidental to the promotion of economic development and wealth creation, social
 development or the promotion of the improvement of the environment in Greater London; and
 - in formulating the proposals in respect of which a decision is sought officers have complied with the Authority's related statutory duties to:
 - o pay due regard to the principle that there should be equality of opportunity for all people:
 - consider how the proposals will promote the improvement of health of persons, health inequalities between persons and to contribute towards the achievement of sustainable development in the United Kingdom; and
 - o consult with appropriate bodies.
- In taking the decisions requested, the director must have due regard to the Public Sector Equality Duty; namely the need to eliminate discrimination, harassment, victimisation and any other conduct prohibited by the Equality Act 2010, and to advance equality of opportunity between persons who share a relevant protected characteristic (race, disability, gender, age, sexual orientation, religion or belief, pregnancy and maternity and gender reassignment) and persons who do not share it and foster good relations between persons who share a relevant protected characteristic and persons who do not share it (section 149 of the Equality Act 2010). To this end, the director should have particular regard to section 3 (above) of this report.
- 6.3 Section 4.1 of the Contracts and Funding Code (the 'Code') requires the GLA to seek a call-off from a suitable framework, where possible, or if not, undertake a formal tender process which will be managed by TfL in respect of the services. However, the director may approve an exemption from this requirement under section 5 of the Code upon certain specified grounds. The officers have set out at paragraph 1.6 of this report the reasons why they believe this meets the exemption. On this basis the director may approve the proposed exemption if satisfied with the content of this report.
- 6.4 Officers must ensure that appropriate contract documentation is put in place with and executed by the GLA and The King's Fund before the commencement of the required services

7. Planned delivery approach and next steps

Activity	Timeline	
Execution of contract	February 2018	_
Delivery Start Date	15 February 2018	
Interim findings review	March 2018	

Delivery End Date	Receive final output (in form of a report) in July 2018	
Project Closure	Publication in September 2018. Project closure thereafter	

Appendices and supporting papers:

- a) Sustainability and Transformation Plans in London: An Independent Analysis of the October 2016 STPs
- b) Single Source Justification Form (Proposed)
- c) GLA80939 Single Source Justification (signed)
- d) ADD2067 (signed)

Public access to information

Information in this form (Part 1) is subject to the Freedom of Information Act 2000 (FOI Act) and will be made available on the GLA website within one working day of approval.

If immediate publication risks compromising the implementation of the decision (for example, to complete a procurement process), it can be deferred until a specific date. Deferral periods should be kept to the shortest length strictly necessary.

Note: This form (Part 1) will either be published within one working day after approval <u>or</u> on the defer date.

Part 1 Deferral:

Is the publication of Part 1 of this approval to be deferred? NO If YES, for what reason:

Until what date: (a date is required if deferring)

Part 2 Confidentiality: Only the facts or advice considered to be exempt from disclosure under the FOI Act should be in the separate Part 2 form, together with the legal rationale for non-publication.

Is there a part 2 form - NO

ORIGINATING OFFICER DECLARATION:

Drafting officer to confirm the following (✓)

Drafting officer:

Ethan Wheatley has drafted this report in accordance with GLA procedures and confirms that the Finance and –if relevant- Legal teams have commented on this proposal as required, and this decision reflects their comments.

√

Financial and Legal advice:

The Finance and Legal teams have commented on this proposal, and this decision reflects their comments.

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Corporate Investment Board:

The Corporate Investment Board reviewed this proposal on 12 February 2018.

EXECUTIVE DIRECTOR, RESOURCES:

I confirm that financial and legal implications have been appropriately considered in the preparation of this report.

Signature

M. D. Ella

Date

14.2.18