

Sustainability and Transformation Plans: making STPs work for diabetes

At its November meeting the Diabetes Think Tank discussed the Sustainability and Transformation Plan (STP) agenda, including the impact that STPs might have on local diabetes services and how the Diabetes Think Tank might best ensure that the STP process supports the delivery of improved diabetes care and outcomes across the country.

STPs were first announced in December 2015 as a way for health systems to draw up place-based blueprints for delivering the Five Year Forward View locally, including how areas will deliver financial “sustainability” and service “transformation.” Since then, all health and care commissioners and providers across the NHS in England have come together to form one of 44 ‘STP footprints’.

The publication in July 2016 of a diabetes aide-mémoire made clear that each STP should outline an approach for improving outcomes for people with Type 1 and Type 2 diabetes ‘across the clinical pathway by tackling unwarranted variation’. STP footprint leads were asked to submit their full draft plans to NHS England on 21 October 2016. At the time of the Diabetes Think Tank meeting, a number of draft STPs had been published.

44
STPs

STP aide-mémoire for diabetes: 2020 goals

1. Reduction in the projected growth in the incidence of diabetes
2. Support more people to manage their own care effectively
3. Improve treatment and care received, particularly within general practice, including an increase in the number of people meeting their NICE-recommended targets,¹ and an increase in GP participation in the National Diabetes Audit (NDA).



December 2015
STPs were first announced

March 2016

44 STP footprints announced
The footprint boundaries are shown on the map



July 2016
Diabetes aide-mémoire published

October 2016

STP footprint leads to submit full draft plans to NHS England



Recommendations

During the discussion, the Diabetes Think Tank agreed to the following key recommendations:

STPs should ensure that there is robust engagement with service users and healthcare professionals.

Members agreed that the STP development process has been marked by a lack of clarity and engagement. Some members indicated they had been blocked from feeding into their local plan, or were not able to view the draft plan. Thus, the Diabetes Think Tank and its members agreed that individual and organisations involved in developing and implementing STPs should ensure that there is robust engagement with service users and health care professionals.

Final STPs should be clear how they will implement the recommendations outlined in the diabetes aide-mémoire.

Final STPs should be clear how they will implement the treatment recommendations outlined in the diabetes aide-mémoire. The group agreed that the inclusion of treatment targets in the diabetes aide-mémoire sends an important message to STP footprints that treatment – not just prevention – must be prioritised. Members also agreed that STP footprints should use the diabetes aide-mémoire as framework to follow.

Increasing GP participation in the NDA should continue to be a priority.

Members agreed that NHS England, local commissioners and the diabetes community should continue to strive for high participation levels in the NDA. Members also agreed that GPs should be better supported and financed to deliver improved care and outcomes for people with diabetes.