

NHS transformation plans will have to deliver billions in cuts

 [bma.org.uk/news/media-centre/press-releases/2016/november/nhs-transformation-plans-will-have-to-deliver-billions-in-cuts](https://www.bma.org.uk/news/media-centre/press-releases/2016/november/nhs-transformation-plans-will-have-to-deliver-billions-in-cuts)

BMA analysis has found that NHS sustainability and transformation plans (STPs) will have to deliver £22bn in cuts by 2020/2021 in order to balance health and social care spending across 44 'footprint' areas, raising serious concerns about cuts to services and the impact on patient care¹.

Officials in each area have been asked by NHS England to predict in their STPs the financial hole they face in their budgets and set out how they can close it. The savings figures were found in papers from 42 of the 44 areas across England.

This comes as a new BMA survey has revealed that over two thirds of doctors say they have not been consulted on STPs². The survey also shows that a third of doctors have never heard of STPs and a fifth do not support the introduction of the plans.

The BMA believes that sustainability and transformation plans could help develop health policies more suited to local needs and help integrate services across health and social care. However, it has serious concerns about the ways in which some of these plans have been put together and that they will be used as a cover for delivering cuts.

The BMA is calling for:

- The plans to be published as soon as possible;
- Genuine public and professional consultation on any proposed changes;
- All proposals within the plans to be realistic and evidenced based;
- All STPs to be funded appropriately to ensure they can deliver what has been promised;
- Improving patient care to be the priority for each and every plan, rather than STPs being used to cut back budgets and services.

This comes ahead of next week's autumn statement in which it has been reported that much needed additional investment for the NHS has been ruled out³.

Dr Mark Porter, BMA council chair said:

"Improving patient care must be the number one priority for these plans. Given the scale of the savings required in each area, there is a real risk that these transformation plans will be used as a cover for delivering cuts, starving services of resource and patients of vital care.

"It is extremely concerning that the majority of doctors have not been consulted on the plans, particularly as ministers have been so keen to insist that all stakeholders would be involved.

"STPs have the potential to generate more collaboration and the longer-term planning of services based on local need but it is crucial that any plans about the future of the NHS must be drawn up in an open and transparent way, and have the support and involvement of clinicians, patients and the public from the outset. At this stage nobody can be confident that this has happened."

Notes to editors

The British Medical Association (BMA) is the voice of doctors and medical students in the UK. It is an apolitical professional organisation and independent trade union, representing doctors and medical students from all branches of medicine across the UK and supporting them to deliver the highest standards of care.

1. The savings figures in the attached document were found in papers from 42 of the 44 footprint areas across England – see attached document.

2. The findings of a BMA Survey of 310 doctors in England are below:

Has there been any clinical or public engagement for the STP in your area?

Yes	No	Total
36%	64%	100.0%

Do you support the introduction of STPs?

StronglySupport	Support	NotSure	Do notSupport	StronglyDo notSupport	Total
1%	13%	64%	13%	9%	100.0%

Prior to this survey, had you heard of Sustainability and Transformation Plans (STPs)?

Yes	No	Total
67%	33%	100.0%

- It was [reported](#) in October that the NHS would not receive additional funding in the autumn statement. The BMA's response is [available here](#).
- More information on the BMA's position on STPs is available [here](#).
- For press queries please email mediaoffice@bma.org.uk or call 0207 383 6448 .

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Health policy

No extra money for NHS, Theresa May tells health chief

Exclusive: PM says service should focus on efficiencies to fill £22bn hole despite warnings hospitals close to breaking point



Performance figures for waiting time targets for A&E care are the worst ever. Photograph: Alicia Canter for the Guardian

Denis Campbell

Friday 14 October 2016 20.00 BST

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[Theresa May](#) has told the head of the NHS that it will get no extra money despite rapidly escalating problems that led to warnings this week that hospitals are close to breaking point.

The prime minister dashed any hopes of a cash boost in next month's autumn statement when she met Simon Stevens, the chief executive of NHS England, senior NHS sources have told the Guardian. Instead she told him last month that the NHS should urgently focus on making efficiencies to fill the £22bn hole in its finances and not publicly seek more than the ["£10bn extra" that ministers insist they have already pledged to provide during this parliament](#).

She told him the NHS could learn from the painful cuts to the Home Office and Ministry of Defence budgets that she and Philip Hammond, the chancellor, had overseen when they were in charge of those departments, according to senior figures in the [NHS](#) who were given an account of the discussion.

Senior Whitehall sources have confirmed that Hammond's statement on 23 November will contain no new money for the NHS, despite increasingly vocal pleas from key NHS organisations and the public's expectation of extra health spending if Britain voted to leave the EU.

NHS Providers, which represents 238 NHS trusts, last week accused ministers of perpetuating "a bit of a fantasy world" on how well the NHS is doing after the worst-ever performance figures for key waiting time targets for A&E care, planned hospital operations and cancer treatments led to warnings that it was starting to buckle under the strain of unprecedented demand.

[Health](#) experts warned that the NHS would have to ration treatment, shut hospital units and cut staff if it gets no extra money soon.

Nigel Edwards, chief executive of the Nuffield Trust health thinktank, said: "If the government has firmly decided not to revisit NHS funding, this underlines that the

health service faces four very difficult years. In particular, balancing the books in 2018 and 2019 when funding will flatline looks all but impossible with the current level of services.

“If more money from tax or borrowing is ruled out, the only choices left may be even less attractive, including reducing access and services, closures and reductions in staff,” he said.

Jeremy Hunt, the health secretary, and Jim Mackey, the chief executive of the health service’s financial regulator, NHS Improvement, also attended the 8 September meeting, which was Stevens’ and Mackey’s first encounter with the prime minister.

“No 10’s message at the meeting was quite blunt and stark, that there will be no more money. Theresa May and Philip Hammond say that they presided over big efficiency programmes at the Home Office and MoD and didn’t whinge about it. Their view is that the NHS is already doing very well, but that’s head in the sand stuff,” said one NHS insider who was among those briefed on the meeting.

NHS leaders privately fear that May’s remarks indicate that she will be much tougher on the service’s pleas for more cash than David Cameron and does not appear to appreciate the extent of its deepening problems. She is said to be sympathetic to the view of many senior Treasury officials that, as one NHS source put it, “always giving the NHS more money is throwing good money after bad, like pouring water on to sand”.

May’s stance raises questions over the future of Stevens, who is preparing to give evidence on the NHS’s finances to the Commons health select committee on Tuesday. The NHS boss, who had a close relationship with Cameron and George Osborne, has recently irritated No 10 by publicly questioning the accuracy of the government’s claim – which May repeated at prime minister’s questions on Wednesday – that the NHS will receive £10bn extra by 2020.

He told the public accounts committee last month: “The government would record it as £10bn. The health committee recorded it a little differently. There is an apples and pears issue there.”

Stevens has welcomed the fact that the £8bn boost Osborne pledged during last year’s general election campaign was “frontloaded” to give the NHS £3.8bn more this year, a rise of 1.7%, as he had requested. But he highlighted that the service had not got the sums it needed for 2017-18, 2018-19 and 2019-20. On current plans, it is due to receive increases of just 0.6%, 0.2% and 0.1% respectively, even though demand for core NHS services such as A&E care is rising at 3% or 4% a year.

Chris Ham, chief executive of The King’s Fund thinktank, said that any policy of

providing no more money was unwise, “simply not credible” and would threaten standards of NHS care. “If these accounts are true, then it is clear that Downing Street does not yet fully understand the impact on patients of the huge pressures facing the NHS.

“The view from the top of government appears to be that the NHS has been given the extra money it asked for and should deliver what is expected of it. But this misses the point that demand for services is rising rapidly and the NHS is managing with the lowest funding increases in its history,” he said.

A Downing Street spokesman said he could not comment on what May, Stevens and Mackey had discussed because it had been a private meeting .

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Last updated: 15 October 2016

BMA response to plans by PM for no extra NHS funding

Responding to a report that Theresa May has told NHS chief, Simon Stevens, there are no plans for extra NHS funding, Dr Anthea Mowat, BMA representative body chair, said:

“If these reports are true, the prime minister needs to explain how exactly the NHS will keep up with rising demand without the necessary investment. Theresa May talks about injecting £10bn into the NHS, yet in reality the increase in health spending is less than half of that.

“The NHS is already the most efficient health care system in the world. The notion that the funding crisis can be solved with further efficiency savings is a myth, and these are not savings, they are year-on-year cuts that have driven almost every acute trust in England into deficit, led to a crisis in general practice and a community and social care system on the brink of collapse.

“The NHS needs urgent action to put it on sustainable financial footing, meaning these reports, if correct, underscore a lack of understanding from the prime minister about just how serious the situation is. Failure to invest now will result in a disaster in the future, both financially and in terms of patient health and care.”

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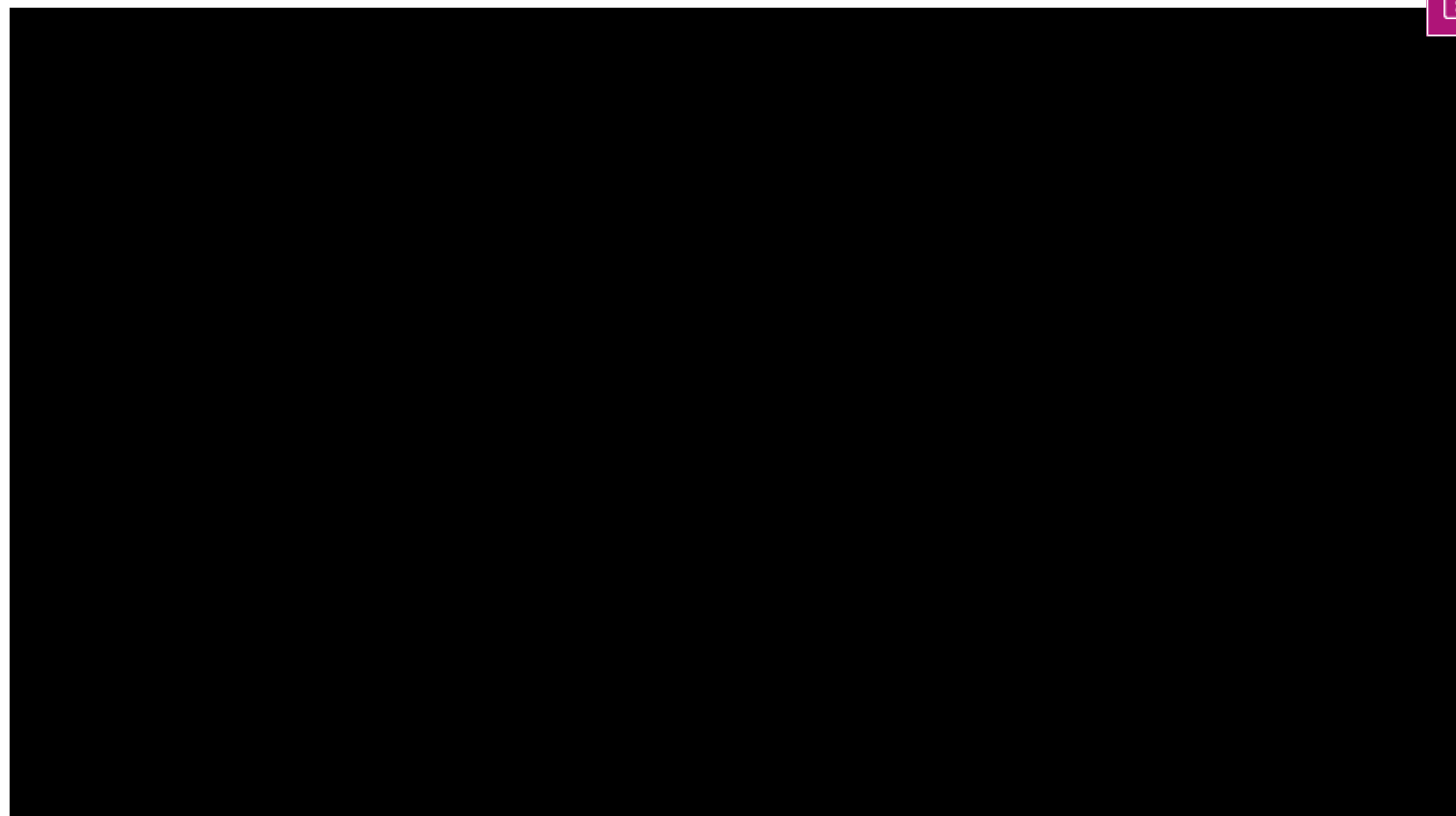
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England

Last updated: 15 December 2016

Sustainability and transformation plans (STPs)

Feedback



Dr Mark Porter, BMA council chair

Watch our STP webinar

Our recent webinar explains more about STPs and what you can expect from them.

Watch now

As part of the Five Year Forward View, every health and care system in England has been asked to create their own local place-based plan for the next five years.

These are referred to as Sustainability and Transformation Plans or more commonly as STPs.

Key facts about STPs

- They are place-based plans, which cover an entire health and care system rather than a single organisation
- They are multi-year, which cover the period from October 2016 to March 2021
- Each footprint has been asked to identify 3-5 critical decisions to prioritise
- They are umbrella plans that cover a range of delivery plans, different geographies and types of services
- The plans must show how they will achieve sustainable financial balance by 2021
- The plans are expected to set out how the local area will implement a number of national priorities, such as seven day services, improving cancer outcomes and a paperless NHS.

STPs are expected to diagnose themselves against the three gaps identified in the 5YFV and use this data to determine their priorities.

The three gaps are:

1. **The health and well-being gap**
 - the need to start prioritising prevention to address health inequalities and reduce avoidable illness.
2. **The care and quality gap**
 - to use technology effectively and reshape care delivery to reduce the variations in quality and outcomes of care.
3. **The funding and efficiency gap**
 - to ensure that additional funding for the NHS is used to make it more efficient and eventually financially sustainable.

To understand more about STPs, read:

- [our recent briefing paper](#)
- [our news stories](#)
- [our FAQs](#)
- [about the Five Year Forward View](#)

Our 5 key asks

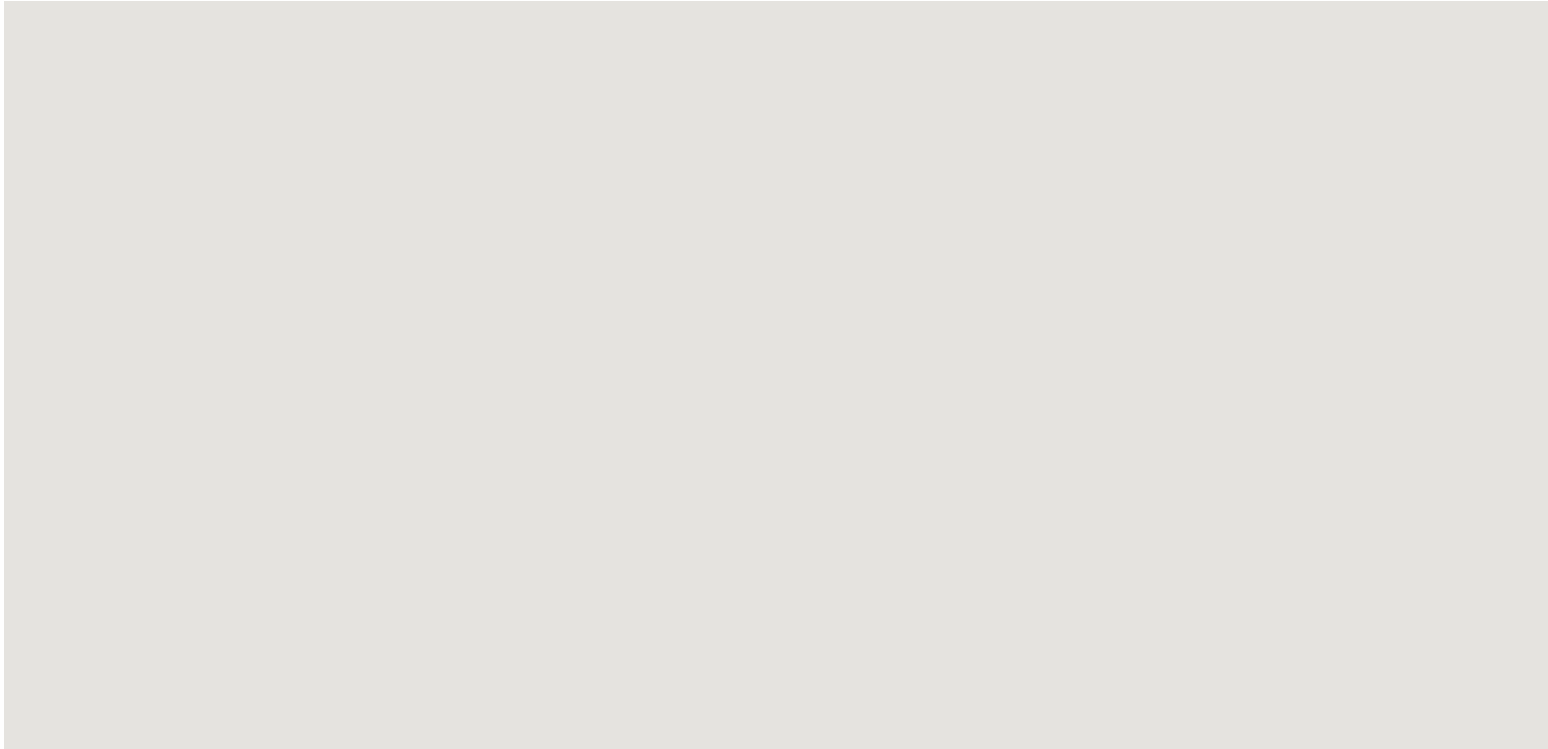
We have serious concerns about the way in which some of these STPs have been put together.

For us to support STPs, we want assurances on these five key asks.

Read our blog

STP footprint future deficits

Each STP footprint is required to publish their plans and the costs involved. Do you know what the future deficit might be in your area? Check our map.



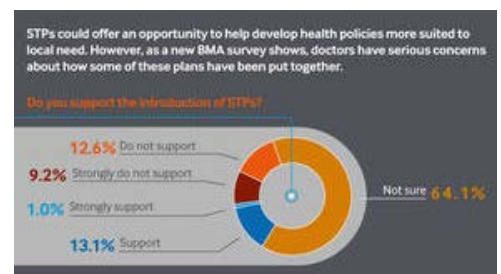
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Survey results

STPs could offer an opportunity to help develop health policies more suited to local need.

However, our recent survey shows that doctors have serious concerns about how some of these plans have been put together.

[View the infographic to see the results](#)



FAQs on sustainability and transformation plans

What are STPs?

What are STP footprints?

What is the timeline?

What's happening locally and nationally?

How can I get involved?

Results from London STP survey

England

Created: 15 August 2016

What the BMA is doing

[Does your MP know about STPs?](#)

We've written to all MPs in England asking them if they know the impact of the NHS STPs on services in their

[Watch our STP webinar](#)

Our recent webinar focused on STPs and what you can expect from them.

[Media coverage](#)

Read the nationwide media coverage about our concerns on STPs and our press release to the media.

local area.

Learn more about STPs and see which questions were directed to our expert panel.

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