

## WYHSTP Deputation statement

I'm Jenny Shepherd, Chair of Calderdale 999 Call for the NHS and I'm speaking on behalf of various protect the NHS campaign groups in West Yorks.

We're here today to ask you to:

- refuse to scrutinise isolated bits of the WY&H STP,
- send back the STP proposals that you are to consider today and
- postpone your scrutiny until you have been provided with the full information about the STP that Rob Webster is withholding on the grounds that you can't be trusted to scrutinise it and the public can't be trusted to understand it.

It makes no sense to scrutinise bits of the WYH STP, you need to look at the big picture. This is clearly to reduce the NHS to a funding stream and a logo, as a UK version of US Medicare, run largely by global American health companies.

The whole set of changes laid out in the 5Year Forward View and the STPs which are intended to implement this plan at speed, across the board, is clearly modelled on systems used in the USA by the global American Health insurance company, United Health - NHSE Chief Exec Simon Stevens' former employer.

There are many docs that bear this out. eg <https://www.uhc.com/content/dam/uhc.com/en/ValueBasedCare/PDFs/White-Paper-Patient-Centered-Care-Model.pdf>

If the implementation the STPs goes ahead, the NHS will be transformed into a reduced service that consists largely of a funding stream and a logo, wide open to United Health, its subsidiary Optum and some UK companies.

Optum already has many NHS contracts both for commissioning support <http://www.optum.co.uk/healthcare/commissioning-services/supporting-clinical-commissioning.html> and frontline services - an invidious position that means it can advise clinical commissioning groups to award it contracts for NHS frontline services. This is clearly an unacceptable conflict of interest.

With new trade deals coming up between UK and the USA, we could well see an effective [takeover](#) of the NHS by the American health industry - the most expensive and ineffective system in the world.

We would also like you to take account of the FOI [letter](#), sent in response to our request to Rob Webster to make good his statement to Kirklees HWB, that he was all in favour of transparency and would check with NHS England about releasing additional STP documents such as the STP appendices, STP template, full STP footprint financial returns in Sept and Oct 2016, detail of years one and two expected to be in the 2017-19 operational plans for CCHs and NHS Providers.

Without this, it is basically impossible to find out what the STP actually proposes to do, beyond the very broad, big picture I've just outlined.

The FOI response says that they have the information we asked for, but they are not going to release it - even though they admit that it would be in the public interest to disclose the information.

They claim exemption under free and frank exchange of views for the purposes of deliberation.

Translating into non-bureaucratese: the letter says that if the STP team and external partners knew that what they discussed and planned was going to be made public, they would not feel free say what they think.

So what are the unspeakable things that they are thinking?

The FOI reply says that publishing the information we asked for:

“would also lead to unnecessary public alarm or confusion as premature disclosure would likely to prejudice scrutiny or release sensitive issues still on the internal agenda or that are evolving.”

They think we are too stupid to understand that they are still working things out and would take work in progress as the finished article.

But withholding information is more prejudicial to scrutiny than providing information.

So, the STP as it stands means next to nothing - because it's based on hidden documents that are works in progress, and the people who have come up with these works in progress have been saying things that they wouldn't say if they knew the public would hear them.

This bears out what North Midlands Director of Commissioning Operations, Wendy Saviour, told meeting of Shropshire Clinical Commissioning Group in the summer of 2016:

“STPs are not meant to be published at all...Some of them contain very radical things...They are highly political and highly contentious.”

This shows the West Yorkshire & Harrogate STP Leader thinks Scrutiny Committees cannot be trusted with the full information that he sent to NHS England.

We ask you to demand of NHS England, NHS Improvement and the STP Leader that they provide this full information to the Joint Scrutiny Committee, because scrutiny is impossible without access to the evolving STP plans and proposals, and the absence of information is far more prejudicial to scrutiny than the provision of information.

Send back the STP proposals that you are considering today, and postpone your scrutiny until they have been provided with the full information that Rob Webster is withholding on the grounds that they can't be trusted to scrutinise it.

We ask you to be aware that Rob Webster says that:

“some of the financial material between commissioners and providers in the STP was provisional and has been superseded by information from NHS Improvement and NHS England on financial allocations and transformation.”

So you need to get the new NHSI/NHSE info on financial allocations and transformation.

We also ask you to be aware that on 19th Jan Devon County Council Scrutiny Committee joint Health & People's Scrutiny Committee meeting County Councillor Brian Greenslade's successful resolution stopped the STP from being supported. and he will be writing to all Devon MP's to call on them to back the County Council in calling for the Success Regime/ STP process to be halted. He is sending us his resolution and we will forward it to you.

**Devon County Cllr Brian Greenslade's resolution - passed at Devon County Council's HEALTH AND WELLBEING SCRUTINY COMMITTEE 19 January 2017**

(from the Minutes of that meeting):

Having regard also to the representations referred to at Minute 38 above

Councillor Greenslade having first given notice of a Motion, which was duly seconded, to be considered at the meeting and thereafter subsequently having also indicated his willingness to accept subsequent

amendment proposed by Councillors Wright it was then **MOVED** by Councillor Greenslade **SECONDED** by Councillor Westlake and

## **RESOLVED**

(a) that the Report by the STP Team be noted;

(b) that the decision to call for a 'pause' in the work of the Success Regime/STP process taken by the County Council on an all-party basis be also noted and that the County Council continue to press for this to happen;

(c) that as long as the Success Regime /STP process continues the County Council continues to consider and scrutinise the work being done;

(d) that the Success Regime/STP organisation publish a clear Statement of its proposed next steps, including a timetable as soon as possible;

(e) that Devon MPs be lobbied to act upon the Notices of Motions passed by Devon County Council and urge them to tackle NHS England and Government to halt the Success Regime/STP process and press for fair funding for Devon;

(f) that Devon MPs be also urged to back all party calls for a holistic review of NHS/Social care funding processes;

(g) that NHS England representatives be invited to a further meeting of Health and Wellbeing and People's Scrutiny Committees with a view to seeking an undertaking that surplus assets would be given back to the community.

*[NB: In accordance with Standing Order 32(4) Councillors Clarence, Colthorpe, Greenslade, Gribble, Morse, Julian, Sellis, Westlake, Wragg and Wright voted for the Motion and Councillors Brook and Colthorpe voted against and Councillors Biederman, Channon, Dewhirst, Hannan, Hannaford, Hosking, Randall Johnson and Squires attending in accordance with Standing Order 25(2), also expressed their support for the recommendation now before the Committee and that their vote be recorded].*