

# HEALTH AND WELLBEING BOARD

11 FEBRUARY 2014

<b>Title:</b>	<b>CCG Commissioning Plans</b>
<b>Report of the Barking and Dagenham Clinical Commissioning Group</b>	
<b>Open Report</b>	<b>For Decision</b>
<b>Wards Affected: ALL</b>	<b>Key Decision: NO</b>
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<b>Sponsor:</b> Conor Burke, Accountable Officer, Barking and Dagenham CCG	
<b>Summary:</b> This reports provides the Health and Wellbeing Board with: <ul style="list-style-type: none"><li>• An overview of the NHS strategic and operational planning process following the release by NHS England on 20 December 2013 of <i>Everyone Counts: Planning for Patients 2014/15 to 2018/19</i></li><li>• A summary of the approach to strategic planning across the BHR system, building on existing collaborative arrangements</li><li>• An overview of the issues that Barking and Dagenham CCG's operating plan will set out to address including the links to the Better Care Fund, on which there is a separate paper being presented to the Health and Wellbeing Board.</li></ul>	
<b>Recommendation(s)</b> The Health and Wellbeing Board is asked to: <ul style="list-style-type: none"><li>• Note the briefing on the strategic and operational planning process for 2014/15 to 2018/19</li><li>• Comment on the issues being addressed within the Operating Plan and in particular the emerging priorities that have been identified</li><li>• Receive the full draft of the Operating Plan at its meeting of 25 March.</li></ul>	
<b>Reason(s)</b> The Health and Wellbeing Board will be required to sign off the Better Care Fund (BCF) to enable transfer of funds from health to social care. The CCG's Operating Plan sets out the overall plan for the CCG, incorporating the aims of the BCF. The CCG Operating plan will contribute to the delivery of the wider health economy's 5 year strategy which the Health and Wellbeing Board will also be involved in developing through the Integrated Care Coalition.	

## **1. Purpose of this report**

1.1 Barking and Dagenham CCG is required to produce three key strategic documents:

- 5 year Strategic Plan as part of the Barking and Dagenham, Havering and Redbridge strategic planning unit
- 2 year Operating Plan for Barking and Dagenham
- 2 year Better Care Fund, a joint plan between the London Borough of Barking and Dagenham and the CCG.

1.2 These documents need to: respond to local needs and priorities; build on and align with current local strategies, particularly Health and Well-being Strategies; and respond to national requirements. The plans will set out the framework for the CCG's expenditure and activities during this period. This report provides an overview of the process for developing these plans and their content.

## **2. Background**

### **2.1 Introduction**

The CCG has been in operation since April 2013 and is responsible for commissioning hospital and community health services, including mental health services, for the local population. Each year it has to set out its plans for the future in line with its financial position.

### **2.2 National guidance**

*Everyone Counts: Planning for Patients 2014/15 – 2018/19* was released on 20 December 2013. It builds on the 2013/14 planning guidance and sets out a framework within which commissioners need to work with partners in local government and providers to develop strong, robust and ambitious 5 year plans to secure sustainable high quality care for all.

A full version of the guidance can be found at <http://www.england.nhs.uk/wp-content/uploads/2013/12/5yr-strat-plann-guid-wa.pdf>

### **2.3 Stakeholder engagement**

2.4 The CCG engages with stakeholders including patients and the public through its Patient Engagement Forum, through its relationship with Healthwatch and through other targeted activities. There has been ongoing discussion and engagement about the CCG's commissioning intentions at the sub-groups of the Health and Wellbeing Board (Mental Health, Children and Maternity and Integrated Care).

2.5 Healthwatch organised a stakeholder event on 16 January 2014 to engage with stakeholders on the CCG overall strategy with a particular focus on the joint work with the London Borough of Barking and Dagenham on the Better Care Fund and on changes to community and intermediate care services provided by North East London Foundation Trust that are currently being trialled as part of delivering more integrated care.

## **2.6 Financial Position**

2.7 Barking and Dagenham CCG has driven a programme of efficiencies in 13/14 which has resulted in its current stable financial position. However there will be continuing pressures on the CCG budget which will require the CCG to maintain a similarly rigorous approach to expenditure in the period 14-19. The CCG will be seeking to maximise value through its contracted services and will continue with QIPP (Quality, Innovation, Productivity and Prevention) programmes. These will have a focus on providing services in the most planned, clinically and cost effective way possible to avoid use of non-elective care and to achieve the best outcomes for patients. The CCG financial allocations for 14/15 provides Barking and Dagenham CCG with a funding increase higher than the minimum agreed level, which is an improvement to the CCG's original funding expectation. However some of the planning assumptions (for example a 2.5% non recurrent spend requirement) may have a negative impact on the CCG's planning position. In addition the CCG's current year activity baseline has increased at month 7, and a significant overspend is being reported in acute contracts. This increase in activity will need to be reflected in financial plans. Emergency admissions investments which will need to be agreed with Acute Trusts through the Urgent Care Board and will need to be linked to the Better Care Fund.

## **3. 5 year Strategic Plan**

### **3.1 Process for developing plan**

A strategic planning unit of Barking and Dagenham, Havering and Redbridge, building on previous whole system working, will develop the 5 year strategic plan. The Integrated Care Coalition has been identified as the local vehicle for driving an ambitious five year plan forward. The need for stronger support from NHS England at Health and Well Being Boards, and for primary care contracting and development has been identified through that route.

The BHR-wide Integrated Care Steering Group has been used to take forward system wide discussions on the planning process, including the links to borough/CCG development of the local Better Care Fund Plans. This group will be extended to ensure appropriate input from NHS England to include primary care and specialised commissioning as well as engagement of public health.

### **3.2 Overview of content of plan**

3.3 A draft BHR Strategic Headline plan on a page (see appendix 1) was co-produced with the Integrated Care Steering Group and NHS England in December prior to the formal release of the planning guidance. The following organisations have come together to agree the strategic plan:

- Barking and Dagenham CCG
- London Borough Barking and Dagenham
- Havering CCG
- London Borough Havering
- Redbridge CCG

- London Borough Redbridge
- Barking, Havering and Redbridge University Hospitals Trust
- North East London Foundation Trust.

3.4 The vision of this partnership is to improve health outcomes for local people through best value healthcare in partnership with the community.

3.5 The system objectives of the strategic plan will be to achieve the ambitions set out in *Everyone Counts*:

1. Securing additional years of life for the people of England with treatable mental and physical health conditions.
2. Improving the health related quality of life of the 15 million+ people with one or more long-term condition, including mental health conditions.
3. Reducing the amount of time people spend avoidably in hospital through better and more integrated care in the community, outside of hospital.
4. Increasing the proportion of older people living independently at home following discharge from hospital.
5. Increasing the number of people with mental and physical health conditions having a positive experience of hospital care.
6. Increasing the number of people with mental and physical health conditions having a positive experience of care outside hospital, in general practice and in the community.
7. Making significant progress towards eliminating avoidable deaths in our hospitals caused by problems in care.

3.6 Work is underway to quantify the scale of the ambition locally.

3.7 These will be delivered through:

- *The BHR integrated care strategy and the Better Care Fund: developing seamless and integrated health and social care for local people, with continued implementation of the local strategy putting the person at the centre of care provided by integrated teams.*
- *The acute reconfiguration programme: Reconfiguring local A&E and maternity departments in order to improve the quality of urgent and emergency care and maternity services for local people; and the development of King George Hospital as a centre of excellence*
- *Specialised commissioning services: services that consistently deliver best outcomes and experience for patients, within available resources.*
- *Primary care improvement: primary care services that consistently provide excellent health outcomes to meet the individual needs of local people.*

- *Prevention and health promotion:* empowering and saving lives from vaccine preventable diseases, high quality, accessible screening programme for all, working together to achieve excellence in Health in Justice outcomes.

## **4. Operating Plan**

### **4.1 Health and Wellbeing Strategy**

The Operating Plan will align with the Health and Wellbeing Strategy, work is being undertaken to map the CCG contribution to delivering the Health and Wellbeing Strategy and to align this with the *Everyone Counts* ambitions.

### **4.2 Greater focus on outcomes**

The strategic direction of Barking and Dagenham CCG's plans and the initial development of the Better Care Fund plans are consistent with the aims, framework and service characteristics set out in the planning guidance. It is clear, however, that further work is required to strengthen the improvement in outcomes expected as a result of the changes being made (work to date has focussed on the activity and financial impact). This will support the delivery of the Health and Wellbeing Strategy as noted above.

### **4.3 Stronger engagement**

Further consideration will be given to stronger citizen engagement as the CCG moves into this next phase (taking into account initial feedback from local Call to Action responses).

### **4.4 New models of primary care**

There is a national call for the development of new models of primary care, which are more proactive, holistic and responsive particularly for frail older people and those with complex health needs. There have been some initial local discussions on the development of a primary care improvement programme and within Barking and Dagenham there is a clearly identified need by stakeholders to improve access to primary care. The CCG's plans to address these issues will need to be reviewed to reflect proposed changes in the GP contract to secure specific arrangements for all patients aged 75 and over to have an accountable GP and for those who need it to have a comprehensive and co-ordinated package of care. These plans will be complementary to the Better Care Fund plans.

### **4.5 Urgent care**

Whilst the BHR Urgent Care Board operates largely as prescribed, review of membership in the New Year is proposed. The UCB will need to ensure there is a refresh of plans before summer 2014 and reach agreement on investment plans to be funded by the retained 70% from the application of the marginal rate rule. Procurement plans for urgent care will also need to take account of the national work to develop a new specification for NHS111.

### **4.6 Specialised commissioning**

The CCG will need to work closely with Specialised Commissioning to understand the local implications of the developing national strategy.

## 4.7 Emerging Priorities

Taking into account the above factors, the emerging priorities for Barking and Dagenham CCG's 2 year operating plan are summarised below:

Priority	Proposed Changes
Integrated care	<ul style="list-style-type: none"> <li>• Implement Integrated Care Strategy. Better care through - Joint Assessment and Discharge, Integrated Health and Social Care Teams, frail elders and falls prevention. Better care in nursing homes and at end of life.</li> <li>• Further focus on integrating mental and physical health services</li> <li>• Better Care Fund as key tool to support integration</li> </ul>
Urgent care	<ul style="list-style-type: none"> <li>• Implement urgent care strategy - people seen at the right place first time, improved access to primary care, changes to walk in centres and more effective hospital based urgent care/A&amp;E services.</li> <li>• Improved access to mental health urgent care services</li> </ul>
Planned care	<ul style="list-style-type: none"> <li>• Improved productivity in elective care</li> <li>• Care as close to home as possible, better join up between primary care, community care and hospital care, getting the right tests/right care first time.</li> </ul>
Primary care improvement	<ul style="list-style-type: none"> <li>• Take forward a primary care improvement plan focused on setting quality standards and improving outcomes at practice, locality and CCG level</li> <li>• Support primary care provider development in line with NHSE England "Call to Action" transformation plans</li> </ul>
Children and young people	<ul style="list-style-type: none"> <li>• Joint planning and commissioning services for children with Special Educational Need and Disability including: Education, Health and Care Plan (EHCP) and personal budgets</li> <li>• Improving children's mental health through implementing Children's Improved Access to Psychological Therapies (IAPT)</li> <li>• Quality improvements to the maternity pathway and the care of women with complex social factors</li> </ul>
Learning disabilities and mental health	<ul style="list-style-type: none"> <li>• Implementation of the Winterbourne concordat and the development of a Section 75 for learning disabilities service with LBBD</li> <li>• Ongoing focus on meeting access and recovery rate</li> </ul>

	<p>improvement for Improved Access to Psychological Therapies (IAPT)</p> <ul style="list-style-type: none"> <li>• Implementation of the mental health tariff in shadow form</li> <li>• Improved dementia diagnosis rates and access to memory clinics</li> </ul>
Cancer	<ul style="list-style-type: none"> <li>• Early detection – particularly lung cancer in B&amp;D</li> <li>• Improved screening</li> <li>• Improved primary care management at end of life (Macmillan GPs)</li> <li>• Better post-treatment pathways</li> </ul>

The Health and Wellbeing Board is invited to comment on these priorities.

## 5. Better Care Fund

The Better Care Fund (previously referred to as the Integration Transformation Fund) was announced in June 2013 as part of the 2013 Spending Round. It provides an opportunity to transform local services so that people are provided with better care and support to enable the achievement of health and social care outcomes and forms a key part of the CCG's Operating Plans. A separate report on the Better Care Fund is being made to the Health and Wellbeing Board from the Integrated Care Sub-Group.

## 6. Timelines

B&D CCG are required to submit a first draft of their 2 year Operating Plan and (with LBBD) the Better Care Fund plan on 14 February. Final submission for both of these is 4 April. The first draft of the 5 year strategic plan will need to be submitted on 4 April with the final document due on 20 June.

## 7. Appendices

- Appendix 1: The system narrative 'plan on the page' that was submitted on 18 December 2013