

South Worcestershire

Clinical Commissioning Group



Redditch and Bromsgrove Clinical Commissioning Group



Wyre Forest Clinical Commissioning Group

Outline of CCGs Operational Plans; 2014/15 – 2015/16

Health and Well - Being Board 11th March 2014

Outline of Presentation

- What is a CCG Operational Plan?
- Planning Context and Process
- Presentation of Draft Plans for 2014/15 2015/16
- Implications for Health and Care in Worcestershire



What is a CCG Operational Plan?

- NHS planning guidance and financial allocations *"Everyone Counts"* issued 19th Dec 2013 – Feb 2014.
- Emerging themes, together with CCG priorities, presented to HWB Board Nov 2013 & Feb 2014
- Key Aspects:

o2 year financial allocations – no change for Worcs CCGs
oNational NHS financial gap of £30bn by 2020/21 confirmed
oLonger term approach to planning and step change required
oStrategic "Units of Planning" created – ie Worcestershire, to produce 5 year
Strategic Plan (June 2014)

oCCGs to produce 2 year Operational Plans,

oCreation of Better Care Fund across Health and Social Care

Planning Process and Timescale

- Operational Plans are not traditional "narrative" plans
- Rather they provide a statement that CCGs plan to deliver the following -
 - The NHS Constitution requirements
 - Specific improvements in outcomes for the local population
 - Outcome measures against the Better Care Fund
 - Activity levels (ie patients seen in specific areas)
 - Financial balance & compliance with NHS rules
- Assessed & assured by NHS England Area and Regional
- Assurance of 1st submission for 3 Worcestershire CCGs received w/c 3/3/2014
- To be refined and re submitted April following contract completion as part of 5 year Worcestershire Strategic Plan

CCG Operational Plans: Statements of Intentions

- NHS Constitution The 3 CCGs are setting plans aimed at delivering the performance standards in the NHS Constitution throughout 2014/15 and 2015/16
- Provider CIPs The 3 Worcestershire CCGs are working in partnership on the quality assurance of provider cost improvement plans. A process is in place to review and approve the plans from a quality perspective once they have been received from providers. This will be monitored through Clinical Quality Review meetings with both Trusts.
- Infection The 3 CCGs plan to manage HCAIs so that our local population have
- no cases of MRSA in 2014/15 and 2015/16 and
- no more than the following nos of C diff in 2014/15:-

R&B CCG - 45 (2013/14 10/12 - 37) SW CCG - 77 - 57) WF CCG - 22 - 17)

• Friends and Family Test – The 3 CCGs plan meet the nationally set objective for the Friends and Family Test in 2014/15 and 2015/16.

• Finance – The 3 CCGs are setting financial plans which provide for financial balance, specific reserves and contingencies in line with the NHS finance regime

CCG Operational Plans: Ambitions to Improve Health Outcomes

Each CCG has set a specific trajectory for 8 nationally set health outcomes: -

 $\circ \mbox{Reducing}$ the number of potential years of life lost from conditions considered amenable to healthcare.

oImproving the health related quality of life for people with long term conditions

 Reducing the number of emergency admissions for conditions that should not require acute health care

•Reducing the proportion of people reporting a poor experience of hospital care

 $\circ \mbox{Reducing the proportion of people reporting a poor experience of care outside hospital in general practice and the community$

oImprove the proportion of people accessing psychological therapies

oImprove the proportion of people accessing dementia diagnosis within primary care

Reduce the number of C Diff infections

In addition each CCG must:

- agree a local CCG priority with the HWB Board
- agree a target for improving medication reporting errors

Locally set individual CCG Outcome Ambitions

Taking into account national comparative data, local evidence, Health and Well Being Strategy, emerging Worcestershire Strategic Plan, locally set CCG priorities the following local priorities have been proposed for each CCG:

- •R&B Reducing unnecessary emergency admissions
- •SW Reducing mortality from respiratory diseases in under 75s
- •WF Improving self reported mental health wellbeing

The HWB Board is asked to:

- support the selection of these priorities for the CCGs
- support the improvement in the reported rate of medication errors



CCG Planned Spend by Category: 2013/14 – 2015/16

Planned Spend £000s	Redditch & Bromsgrove			South Worcestershire			Wyre Forest		
	2013/14	2014/15	2015/16	2013/14	2014/15	2015/16	2013/14	2014/15	2015/16
Acute	100,038	97,930	98,592	156,656	151,596	151,202	63,750	63,899	63,528
Mental Health & LD	13,493	13,763	14,038	*	*	*	10,359	10,392	10,417
Community	24,171	24,428	24,681	33,880	34,247	34,171	12,364	12,534	12,432
Local Authority & Joint Commissioning	13,270	13,320	16,316	53,358	53,235	65,144	9,109	9,716	13,603
Primary Care	26,992	27,447	28,581	52,424	53,493	55,086	22,090	22,274	23,074
Other	373	3,333	5,823	6,153	12,850	12,187	105	4,758	4,961
Total	178,337	,		302,471	305,421	317,790	117,777	123,573	128,015
* MH/LD spend included under LA & Joint Commissioning									



Healthcare Spending 2013/14 – 2015/16



