

SLOUGH BOROUGH COUNCIL

REPORT TO: Slough Wellbeing Board

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PART I

FOR DISCUSSION

Slough CCG Operational Plan 2017/18 – 2018/19

1. Purpose of Report

The three East Berkshire Clinical Commissioning Groups (Bracknell & Ascot, Slough, and Windsor, Ascot & Maidenhead CCGs) have submitted their Operational Plan for the two years 2017/18 to 2018/19 to NHS England (NHSE). The plan has now been fully assured.

This report summarises the NHS national priorities as laid out in the 'NHS Five Year Forward View' and highlights how these, together with local priorities will be delivered via the Operational Plan.

2. Recommendation(s)/Proposed Action

The Board is requested to note the report.

3. The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan

The Operational Plan aligns with and supports the Slough Joint Wellbeing Strategy priorities.

3a. Slough Joint Wellbeing Strategy Priorities

The Operational Plan for Slough will help support the delivery of the following Slough Joint Wellbeing Strategy 2016 – 2020 (SJWS) priorities:

- 1) Protecting vulnerable children
- 2) Increasing life expectancy by focussing on inequalities
- 3) Improving mental health and wellbeing

3b. The JSNA

This Operational Plan represents the collective commissioning ambitions of the three East Berkshire CCGs and has been informed by NHSE Planning Guidance, local partner priorities, strategies, plans, the JSNA and the Frimley Sustainability and Transformation Partnership (STP).

3c. **Five Year Plan Outcomes**

The Operational Plan will help support the delivery of the following 2017 Five Year Plan's outcomes:

- 1) Our children and young people will have the best start in life and opportunities to give them positive lives
- 2) Our people will become healthier and will manage their own health, care and support needs

4. **Other Implications**

- (a) **Financial** - The Operational Plan complies with NHS England key planning requirements.
- (b) **Risk Management** - Key risks to the delivery of the Operational Plan across all work programmes have been identified and are included in Chapter 10 of the plan.

Slough CCG shares two committees that have a key role in the development and scrutiny of the delivery of the Plan. There are the Business Planning and Clinical commissioning Committee and Finance and the Quality, Innovation, Productivity and Prevention (QIPP) Programme.

Programmes of work are aligned to programme boards which have a clear focus on implementation and how risks to delivery are being managed.

- (c) **Human Rights Act and Other Legal Implications** - No Human Rights implications arise.
- (d) **Equalities Impact Assessment** - The Operating Plan aims to improve health outcomes and wellbeing for the people of Slough and to deliver sustainable, consistent standards of care within the resources available.
- (e) **Workforce** - There will be significant workforce development implications in the delivery of the local and national aspirations for healthcare provision over the coming years, alongside what we know to be ongoing challenges in recruitment and retention within health and care provision. These are recognised within our plan, and are also supported by a Sustainable Transformation Plan (STP) work stream on workforce.

5. **Summary**

This report provides the Wellbeing Board with an update on the Slough CCG's Operational Plan. The document also represents the collective ambition of the three East Berkshire CCGs.

The Board is asked to note the report and to support the delivery of the Operational Plan and associated work programmes during 2017/18 and 2018/19.

The Operational Plan sets out how the three East Berkshire CCGs, working with the wider health and care system, will aim to deliver the national nine 'must do's' alongside any local priorities, achieving improvements in the quality and safety of services provided, and improving health outcomes for local people.

6. **Supporting Information**

NHSE (Delivering the Forward View – NHS Planning Guidance 2016/17 – 2020/21) has set out a clear list of national priorities (nine ‘must do’s’) for 2017/18-18/19 and the longer-term challenges for local systems. These include transforming urgent and emergency care services, improving cancer outcomes by ensuring cancers are diagnosed promptly with prompt treatment and care delivered in the most appropriate setting, implementing the national Mental Health Taskforce - addressing the variation in access to and quality of care and support whilst promoting good mental health and preventing poor mental health.

The nine must do’s are:

- Sustainability & Transformation Partnership development
- Financial sustainability
- Primary Care
- Urgent & emergency care
- Referral to treatment times and elective
- Cancer
- Mental Health
- People with learning disabilities
- Improving quality in organisations

The Operational Plan also demonstrates how we will achieve financial sustainability as three CCGs and with our system partners. It describes our commitment to improving outcomes and delivering sustainable, consistent standards of care within the resources available. The Plan has been informed by local clinicians, patients, and key partners.

Slough CCG Local Priorities

Slough CCG has articulated its high level priorities over the next two years which align with the local Slough Joint Wellbeing Strategy priorities and the 5 Year Plan outcomes:

- Ensure patient rights under the NHS Constitution are upheld
- Develop a transformed model of general practice
- Reduce unwarranted variation in outcomes and the use of money
- Prevent crisis and escalation of health issues, through early identification and treatment
- Improve urgent on the day access to services and response to those in crisis
- Ensure mental health receives as much attention as physical health
- Develop integrated services across the NHS and social care
- Give people support to live healthy lives and look at their conditions

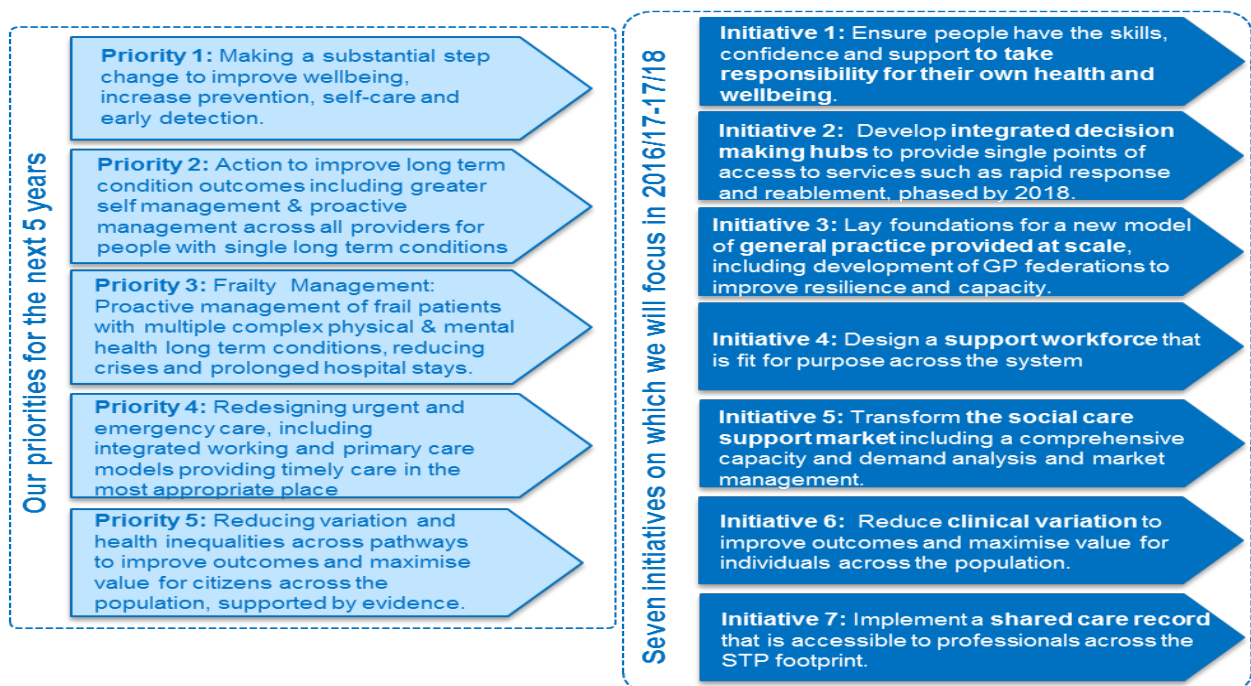
These priorities will be delivered through the following areas of work:

- Integrated Care Hubs and primary care, urgent and emergency care transformation
- Continued improvements in access to mental health services for children and young people
- Early identification of mental and physical health needs for people with a learning disability

- Increased emphasis on prevention, self-help and self-care supporting public health initiatives and STP prevention programme
- Encourage people to stop smoking, increase physical activity, reduce alcohol consumption, and reduce their weight
- Integrated care planning for those with diabetes and cardiac problems e.g. heart failure, complex case management, shared care records through interoperability solution Connected Care
- Increased access to personal health budgets and social prescribing

In December 2015, NHSE outlined a new approach aimed at ensuring that health and care services are built around the needs of local populations through the development of joint Sustainability and Transformation Plans (STP), setting out how local services will evolve and become sustainable over the next five years, thereby delivering the 'NHS Five Year Forward View' vision. Slough CCG is part of the Frimley STP and the Operational Plan sets out how over the next two years we will support the delivery of the STP.

The priorities and associated initiatives of the Frimley STP for the next 5 years are:



7. Comments of Other Committees

The draft Operational Plan outline was shared with the Slough Wellbeing Board prior to its submission in December 2016.

The Plan has also been discussed at Slough CCG member practices meetings, with the public through the community partnership forum and with the CCG Governing Body in several iterations before the final version was submitted to NHSE.

8. Conclusion

The Board is asked to note the report and to support the delivery of the Operational Plan and associated work programmes during 2017/18 and 2018/19.

9. **Appendices attached**

'A'- Slough CCG Plan on a Page

10. **Background Papers**

Delivering the Forward View – NHS Planning Guidance 2016/17 – 2020/21
<https://www.england.nhs.uk/wp-content/uploads/2015/12/planning-guid-16-17-20-21.pdf>

Operational Plan 2017/18 – 2018/19 (Bracknell & Ascot CCG, Slough CCG, Windsor, Ascot & Maidenhead CCG) <http://www.sloughccg.nhs.uk/about-us/our-plans>

Slough Clinical Commissioning Group: Plan on a Page



Population <ul style="list-style-type: none"> ❖ The population profile differs from the national picture with a larger proportion of children aged 0 to 14 and younger adults aged 25 to 44, but a smaller proportion of adults aged 45 and over. 28% of the CCG's total registered population is under 19 ❖ 5 of the lower super output areas in the CCG boundary are in the 20% most deprived nationally ❖ Life expectancy at birth for men is 78.5 years, which is significantly worse than the national figure of 79.2 years. Life expectancy at birth for women is 82.7 years, which is similar to the national figure of 83.0 years 	<ul style="list-style-type: none"> ❖ The recorded prevalence of cardiovascular diseases, cancer, respiratory diseases, chronic kidney disease, depression and dementia is lower than the national prevalence rates and comparator CCG group. The recorded prevalence of diabetes is higher. Mental health disorders are marginally higher than England, but lower than the comparator CCG group ❖ The CCG had 8,144 potential years of life lost (PYLL) considered amenable to healthcare in 2012-14. This rate of 2,460 PYLL per 100,000 registered population is significantly higher than the national rate. Ischaemic heart disease was the main cause of PYLL in the CCG at 36.0%
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Opportunities for improvement

Improved outcomes in cancers, maternity, gastro-intestinal, neurology, trauma and injury, diabetes, dementia and learning disability
Opportunities to spend money more wisely in: neurology, respiratory, genito-urinary, gastro-intestinal and endocrine

Our high level priorities for the next two years are <ul style="list-style-type: none"> Ensure patient rights under the NHS Constitution are upheld Develop a transformed model of general practice Reduce unwarranted variation in outcomes and the use of money Prevent crisis and escalation of health issues, through early identification and treatment Improve urgent on the day responsiveness of services and response to those in crisis Ensure that mental health receives as much attention as physical health Develop integrated services across the NHS and social care Give people support to live healthy lives and look after their conditions 	Our priority areas of work <ul style="list-style-type: none"> Improve access to general practice and integrate other services and develop capacity and skills Improve the use of technology for online consultations and sharing records Provide information about early diagnosis and screening for cancers Support people at risk of developing diabetes and offer all diabetics the 8 care processes, structured education and group consultations Commission integrated community based MSK, Eye, Neurology, Cardiology, Respiratory and Dermatology services Implement an integrated care record Increase clinical input to NHS 111 calls. Stream patients to the most appropriate service in A & E Improve arrangements for discharging people from hospital Mental health - develop services for children and young people, people in a crisis and those with long term conditions, depression and anxiety and eating disorders. Focus on physical health Focus on the physical health of people with a learning disability and support them in the community Improve support to people who have been diagnosed with dementia Improve maternity services Commission integrated teams for people with complex conditions Deliver personal health budgets, self help and self care programmes Provide 24/7 support and share care records for people at the end of their lives Encourage people to stop smoking, increase physical activity, reduce alcohol consumption, and reduce their weight 	What will the impact be? <ul style="list-style-type: none"> ❖ I will be given the information I need to stop myself getting ill and will have more control if I do ❖ I will be helped to give up smoking or drinking too much alcohol, I will be helped to lose weight and get active ❖ I will be more likely to go to the correct service first time and avoid a health crisis ❖ I will only have to tell my story once and all the relevant services will have up to date information about me ❖ If I am a parent or carer I will have information to help anyone I am caring for if they are sick or hurt ❖ I will be less likely to stay in hospital longer than I need to ❖ I will be more likely to have earlier diagnosis and treatment for circulatory disease, dementia, diabetes, cancer (particularly bowel and breast) and hypertension ❖ If I have a learning disability or mental ill health, I will also be checked for physical health problems and will be more likely to be cared for closer to home ❖ I will be more likely to live longer despite any health problems (particularly cancer) ❖ If I am a mother, I will be more likely to have a better experience of maternity services
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Our supporting strategies <ul style="list-style-type: none"> ❖ Engagement of communities and patients to give people the skills and confidence to look after themselves and stay healthy ❖ Development of our workforce to deliver new models of care ❖ Development of the public estate to make the best use of public resources and deliver our new models 	<ul style="list-style-type: none"> ❖ Use of technology to support patients and clinicians in becoming more efficient, ensuring patients have to tell their story only once and can look after themselves ❖ Becoming a system with a collective focus on the population ❖ Robust quality and safeguarding procedures
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