

LINCOLNSHIRE HEALTH AND WELLBEING BOARD

Open Report on behalf of Lincolnshire East Clinical Commissioning Group

Report to	Lincolnshire Health and Wellbeing Board
Date:	25 March 2014
Subject:	Lincolnshire East Clinical Commissioning Group Operational Plan 2014/15 and 2015/16

Summary:

As part of NHS governance, all NHS Clinical Commissioning Groups must produce an annual rolling programme, their 5 year Strategic Plan 2014-19 and their Operational Plan for 2014/15 and 2015/16. The Strategic Plan must be agreed and finalised by June 2014 and will be a significant output of the Lincolnshire Sustainable Services Review. The 2 year operational plans must be finally submitted to the NHS Executive by 4th April 2014, but with a directive that they must be formally approved and signed off by the Lincolnshire Health and Wellbeing Board on the basis that the plans take account of and support the five core themes of the Joint Health and Wellbeing Strategy 2013 -18 (JHWS), through the CCGs programmes and projects.

The purpose of this paper is to assure the Board that the JHWS is supported by the Lincolnshire East CCG plans and to request the Board to formally support the CCG plans.

Actions Required: To formally support the Lincolnshire East Clinical Commissioning Group Operational Plans 2014/15 and 2015/16.

1. Background

All NHS Clinical Commissioning Groups (CCGs) are required to develop their 5 year strategic and 2 year operational plans on an annual, rolling basis. For the operational plans 2014-16 the deadline is 4th April 2014 and for the strategic plans 2014-19 the deadline is June 2014. Ideally, strategy should precede operational plans deadlines, however, because of the recent restructuring within the NHS, the need to ensure operations continue to move forward and the timetable and the likely impact of the Lincolnshire Sustainable Services Review, this timetable is the pragmatic way to proceed

and the LSSR Blueprint produced in October 2013 gives enough substance to inform how the first 2 years of operations may contribute to the strategy.

Significant expectations have been established by the planning guidance issued by the NHS Executive in December 2013, regarding the content and level of the plans, not least the assurance shown within plans that all partners and stakeholders have been consulted in the plans development and in particular, that the plans complement and support the 5 core themes established within the Joint Health and Wellbeing Strategy 2013-18, to the extent that the Operational Plan can be formally approved and supported by the Health and Wellbeing Board. The integration of care the development of accessible services closer to home, avoidance of unnecessary hospital admission and the maintenance of people in their homes are key components within CCG plans and the mantra of **'quality and safety first'** flows through all considerations.

In line with both national and local drivers, the Lincolnshire East CCG have established 4 key programmes of work, each of which is underpinned by a series of projects (all identified in programmes and projects – see section 3 of attached plan).

LECCG programme	Anticipated impacts	LSSR workstream	JHWS theme
Wider primary care provided at scale	<ul style="list-style-type: none"> • Reduced unnecessary referrals • Increase capacity in community • Effective prescribing • Reduced CVD mortality • Improved dementia pathway • Healthy lifestyle programmes 	Proactive care Women and children	<ul style="list-style-type: none"> • Promoting healthier lifestyles • Delivering high quality systematic care • Improving lives of older people • Tackling social determinants of health • Improving outcomes for children
A modern model of integrated care	<ul style="list-style-type: none"> • Improved pathways for long term conditions and frail elderly • Integrated neighbourhood teams • Supporting patients at home • Improved continuity of care • Falls prevention • Better access to psychological services 	Cross cutting	<ul style="list-style-type: none"> • Promoting healthier lifestyles • Delivering high quality systematic care • Improving lives of older people • Tackling social determinants of health • Improving outcomes for children
Access to the highest quality urgent and emergency care	<ul style="list-style-type: none"> • Integrated urgent care and reduced hand offs • Care home support • GPs in A&E and single point of access • Rapid response • Appropriate reduced admissions 	Urgent care	<ul style="list-style-type: none"> • Delivering high quality systematic care • Improving lives of older people
Productive elective care	<ul style="list-style-type: none"> • Cardiovascular disease • Improving access and outcomes in cancer • Appropriate repatriation to home localities • Improved intensive psychiatric care 	Elective care Women and children	<ul style="list-style-type: none"> • Delivering high quality systematic care • Improving outcomes for children

2. Conclusion

Lincolnshire East Clinical Commissioning Group contend that their draft operational plans for 2014/15 and 2015/16 and the core themes expressed with the Joint Health and Wellbeing Strategy are mutually supportive in addressing the health needs and inequalities across the served, Lincolnshire population and that the Boards formal support for the CCGs Operational Plan would be appropriate.

3. Consultation

The CCG plans, as presented, have been extensively consulted upon in their development. No further formal consultation is anticipated prior to publication in April 2014.

4. Appendices

These are listed below and attached at the back of the report	
Appendix A	Lincolnshire East CCG's Plan on a Page

5. Background Papers

Draft Lincolnshire East Clinical Commissioning Group 5 year Strategic Plan 2014-19 and 2 year Operational Plan 2014-16 www.lincolnshireeastccg.nhs.uk
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Lincolnshire East CCG website – www.lincolnshireeastccg.nhs.uk
The final *Lincolnshire East Clinical Commissioning Group 5 year Strategic Plan 2014-19 and 2 year Operational Plan 2014-16* will be available on the website when complete

Strategic Priorities and key measures of success

Reducing early deaths***We will increase life expectancy***

- Detecting cancer earlier (Local Priority 1)
- Finding and managing patients with a high risk of stroke (Local Priority 3)

In 2013/14 we will increase, by 3%, the number of people who are screened for cervical cancer (25-49) and improve treatment to reduce strokes to move us closer to the UK median

Talking and listening to Patients***We will improve engagement with our patients***

- By continuously listening to patients in our GP practices to improve services
 - Consult with our patients about our priorities and ask them how we are doing
 - Improve our links with hard to reach groups
- In 2013/14 we will achieve this by holding two Stakeholder events per year and implement the Family & Friends Test in 50% of our GP Practices

GP and Community Services***We will drive improvements***

- Our GPs will review each other's practice
- Improve the effectiveness of our prescribing and achieve a 1% financial reduction (Local Priority 2)
- Continue to provide dementia training and support to care homes
- Improve care for people with diabetes, providing 90% of the care in the community
- Reduce the harm from falls
- Improve palliative and end of life care

Quality and Safety***We will put quality at the centre of all we do***

- Zero tolerance of pressure sores
- Improve patient experience when using our general practices and other providers
- Reduce the number of patients who get preventable infections in hospital (CDiff reduce by 19 cases)
- Learning and acting upon the recommendations of the Francis Report
- Contract assurance of national and local quality and safety standards
- Ongoing monitoring of complaints and incidents and ensuring there is a systematic gathering and use of soft intelligence via continuous listening

Alternatives to Hospital Admissions***We will care for more people at home and in the community, admitting less people to hospital***

- Increase the number of patients being looked after at home
 - Improve how Community Nurses, GPs and Social Services work together
 - Work with the Ambulance Service and GPs to reduce the need to go to A&E
 - Improve how GPs and A&E work together
- In 2013/14 we will reduce non-elective admissions by 600 and will deliver 2500 diverted A&E attendances

Using Hospitals Well***We will improve access, choice and efficiency***

- Get prompt access to a consultant when patients need it
- Improve treatment options for ENT, Ophthalmology and Dermatology
- Reduce number of times patients go back to hospital
- Provide as much service choice as we can to patients
- Develop and use our community hospitals in Louth and Skegness

In 2013/14 we will reduce our follow-ups by 2%

Mental Health and Learning Disabilities***We will improve patient experience***

- A minimum of 15% of patients with need will access psychological therapy (IAPT)
 - Provide better treatment pathways for patients with dementia
 - Improve rates of health checks by 20% for people with Learning Disabilities (LD) by March
- In 2013/14 the commissioning of LD and vulnerable adults placements will reflect the learning from Winterbourne review.

Working together for better care***We will work with our partners in Lincolnshire to deliver the Health and Well Being Strategy and work together with other CCGs in commissioning high quality services for our population.***Our
Values

Quality – safety, effectiveness & patient experience will guide our decisions

Clinical Leadership – clinicians will be our key leaders and primary influence

Patients – patient's views will be sought and taken into account in what we do

Integration & Partnership – will be used as keys to success

Fairness – we believe investment should reflect need

Equality – we will strive for equality of patient experience, opportunity and outcome

Good Value – we will use NHS resources to best effect

NHS
Outcomes
Framework

Preventing
premature
death

Quality of life for
people with long
term conditions

Help recover
from ill health or
following injury

Ensure positive
experience of
care

Care
delivered in a
safe