

REPORT TO:	HEALTH AND WELLBEING BOARD (CROYDON) Date: 26th March 2014
AGENDA ITEM:	8
SUBJECT:	DRAFT - Croydon CCG 2 Year Operating Plan
BOARD SPONSOR:	Paula Swann, Chief Officer, Croydon CCG

CORPORATE PRIORITY/POLICY CONTEXT:

Croydon CCG Operating Plan sets out the plans to deliver our strategic direction and ambitions over the next two years 2014/15 and 2015/16. The strategic direction aligns to the Health and Wellbeing priorities 2013/18:

1. increased healthy life expectancy and reduced differences in life expectancy between communities
2. increased resilience and independence
3. a positive experience of care

To drive forward the outcomes and ambitions described within the plan, Croydon CCG has agreed joint strategies with LBC and wider stakeholders which include the Health and Wellbeing Strategy and Transformation Strategy.

The CCG has also developed in conjunction with its member practices and public its' Prevention, Self-Care and Shared Decision Making Strategy, Primary and Community Care Strategy, and a Whole Systems Urgent and Emergency Care Strategy signed up by all partners delivering urgent and emergency care and a Mental Health Strategy.

These strategies set the direction to transform how we deliver our services. The main priority for how we commission our services is to ensure that the public receive the right care, in the right place at the right time.

In the current financial environment and with the growth in our populations it is vital we keep challenging how we deliver our services to ensure sustainability in quality and the management of demand.

Within all our pathway redesign and reflected within the Operating Plan is the emphasis on prevention, self-care and shared decision making where appropriate to do so.

FINANCIAL IMPACT:

The 2 year Operating Plan sets out Croydon CCG ambitions to reduce the inherited financial deficit, through quality, innovation and productivity and prevention plans. These are described in section 14.

1. RECOMMENDATIONS

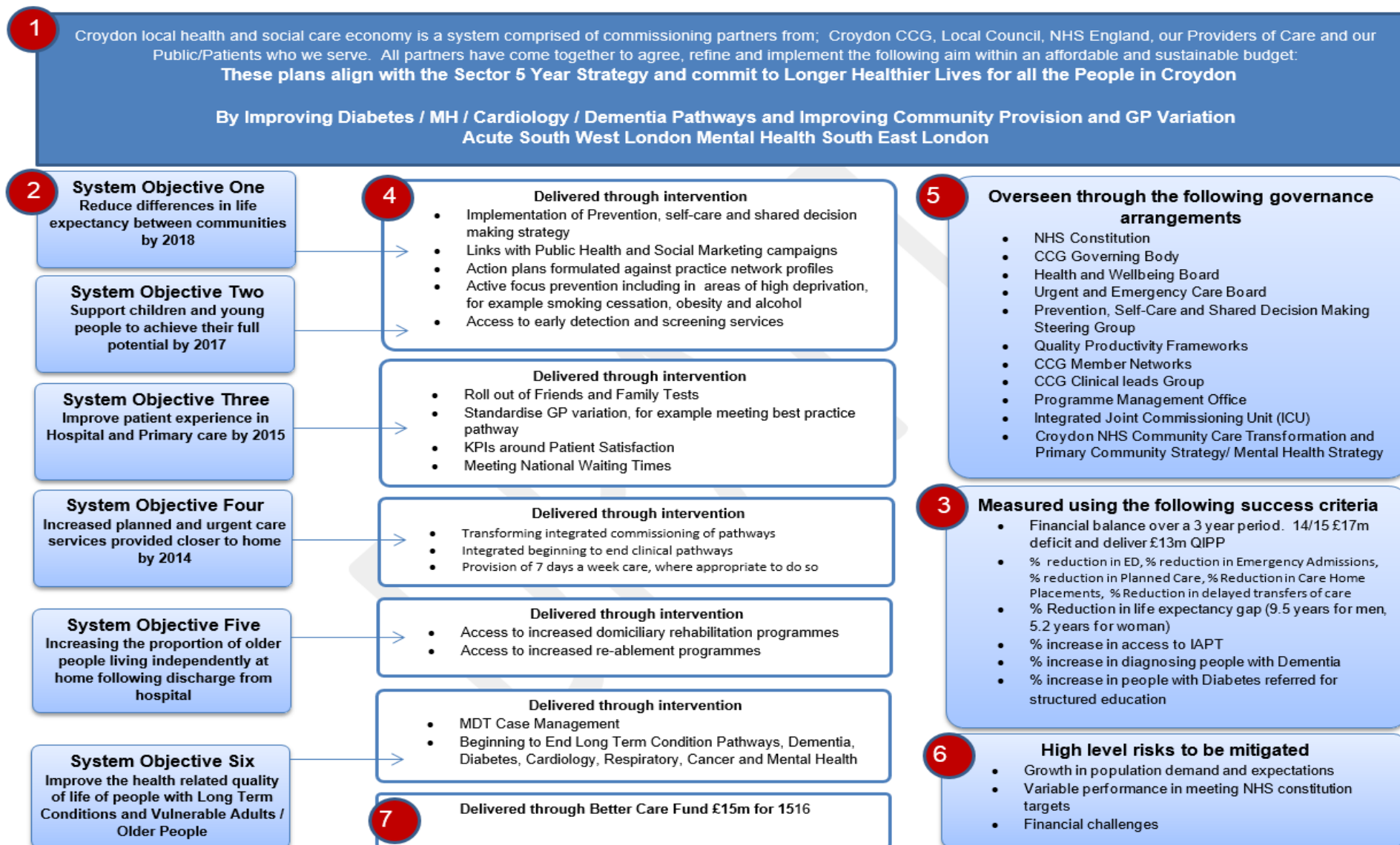
This report is for information on the progress in development of Croydon CCG 2 Year Operating Plan.

The HWBB considers the planned improvements in quality premium measures and the specified increased level of reporting of medication errors from specified local providers between Q4,2013/14 and Q4, 2014/15 (page 22).

2. EXECUTIVE SUMMARY

- 2.1 As part of Everyone Counts Planning for Patients 2014/15 and 2015/16 Croydon CCG is required to develop a 2 Year Operating Plan, in addition to this a 5 Year Sector Strategic Plan is also due to be submitted in Draft on 4 April and finalised in June 2014.
- 2.2 Croydon CCG is working with SWL sector in developing the 5 Year Strategy and is also taking the opportunity to further refresh its 5 Year Strategy with further emphasis on for example Out of Hospital Care, Integration, outcomes based commissioning and Parity of Esteem.
- 2.3 NHS England, guidance for the 2 year Operating Plan sets out key national overarching aims, these include:
- Reducing the number of potential years of life lost (PYLL) from treatable conditions
 - Improving the health related quality of life of people with one or more long-term conditions and being prepared for the predicted rise of people with dementia
 - Reducing the amount of time people spend avoidably in hospital
 - Increasing the proportion of older people living independently following hospital discharge
 - Reducing the proportion of people reporting a very poor experience of inpatient care and primary care
 - Making significant progress towards eliminating avoidable deaths in our hospitals.

2.4 In response to this Croydon CCG has agreed the following overarching framework. Formal sign off is due in April 2014 by the CCG Governing Body



3. DETAIL

- 3.1 The Draft Operating Plan can be viewed by clicking on the link provided under 'Background Documents'; the detail within the Operating Plan covers:
- Our Challenges
 - National Priorities
 - Our Priority Programme Areas
 - Our Financial Position
 - Our Commissioning Enablers
- 3.2 It also updates on progress to date with baseline information that is required to populate the templates see excel CCG Commissioning Outcomes Template and Provider/Commissioning Template.
- 3.3 National guidance encourages CCGs to explicitly discuss with their Health & Well Being Boards their proposed quality premium measures.
- 3.4 The 'quality premium' is intended to reward clinical commissioning groups (CCGs) for improvements in the quality of the services that they commission and for associated improvements in health outcomes and reducing inequalities.

Area	In Appendix pages 14 - 22 (see 'Background Documents' link at end of paper)
Self-Certification	NHS Constitution CIPs HCAIs / MRSA
Ambitions for Improving Outcomes	<p>Outcome Ambition 1 E.A.1: i) What is your ambition for securing additional years of life from conditions considered amenable to healthcare?</p> <p>Outcome Ambition 2 E.A.2: ii) What is your ambition for improving the health-related quality of life for people with long-term conditions?</p> <p>Outcome Ambition 3 E.A.4: iii) What is your ambition for reducing emergency admissions?</p> <p>Outcome Ambition 5 E.A.5: iv) What is your ambition for increasing the proportion of people having a positive experience of hospital care?</p> <p>Outcome Ambition 6 E.A.7: v) What is your ambition for increasing the proportion of people having a positive experience of care outside hospital, in general practice and the community?</p>
Quality Premium Measures	<p>E.A.1: i) Potential years life lost (PYLL) from amenable causes in 2014/15</p> <p>E.A.4: ii) What trajectory are you aiming for in the composite avoidable emergency admissions indicator in 2014/15?</p> <p>E.A.3: iii) For IAPT, what proportion of people that enter treatment against the level of need in the general population are planned in 2014/15 and 2015/16?</p> <p>E.A.6: iv) Do you plan meet the nationally set objective for the Friends and Family Test in 2014-15 and 2015/16? Yes/No</p> <p>E.A.9: v) Have you agreed (in conjunction with your Health and Wellbeing Board and NHS England area team) a specified increased level of reporting of medication errors from specified local providers between Q4, 2013/14 and Q4, 2014/15?</p> <p>vi) Where there are requirements for Quality Premium measures and/or planned levels of improvement to be agreed with the relevant Health and Wellbeing Board and NHS England area team, do you have their agreement to each of these?</p>
Local Priorities	Local Priority 1: C2.5 People with diabetes diagnosed less than a year who are referred to structured education.
Other Measures	<p>E.A.S.5 i) Number of C.Difficile infections in 2014/15</p> <p>E.A.S.1 ii) What dementia diagnosis rate are you aiming for in 2014/15 and 2015/16</p> <p>E.A.S.2 iii) What level of IAPT recovery are you aiming for in 2014/15 and 2015/16?</p>
A&E Activity	Baseline data against MAR

4. CONSULTATION

- 4.1 The priorities with the Operating Plan follow the same themes that were widely consulted on in developing the 5 Year Integrated Strategic Operating Plan 2013/14. NHS England in setting its national ambitions has worked with a wider range of stakeholders to agree these and Croydon CCG through networks, established steering groups, patients participation groups has continually consulted on pathway redesign and local priorities.

5. SERVICE INTEGRATION

- 5.1 The Operating Plan sets out the pathways redesign for the priority areas.

6. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

- 6.1 Not Applicable

7. LEGAL CONSIDERATIONS

- 7.1 Not applicable

8. HUMAN RESOURCES IMPACT

- 8.1 Not applicable

9. EQUALITIES IMPACT

- 9.1 The operating plan seeks to reduce health inequalities in Croydon. A full assessment of the impact of the plan will be carried out within the next two weeks prior to submission to NHS England.

10. ENVIRONMENTAL IMPACT

- 10.1 Not Applicable

11. CRIME AND DISORDER REDUCTION IMPACT

- 11.1 Not Applicable

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BACKGROUND DOCUMENTS

CCG Operating Plan 2014-16

<http://egeprapwv01lc.lcbau.croydon.net/akscroydon/images/att3615.pdf>