

WOLVERHAMPTON CCG

GOVERNING BODY
13 DECEMBER 2016

Agenda item 7

Title of Report:	CCG Operating Plan 2017 -2019
Report of:	Director of Strategy and Transformation
Contact:	Steven Marshall, Director of Strategy and Transformation
(add board/ committee) Action Required:	<input checked="" type="checkbox"/> Decision <input type="checkbox"/> Assurance
Purpose of Report:	To ask the Governing Body to agree to sign of the CCG Operational Plan for 2017 -2019 subject to final feedback from NHS England.
Public or Private:	This Report is intended for the Public Domain
Relevance to CCG Priority:	Building Leadership Capability and Capacity
Relevance to Board Assurance Framework (BAF):	Outline which Domain(s) the report is relevant to and why – See Notes for further information
<ul style="list-style-type: none"> • Domain 4: Planning (Long Term and Short Term) 	The Operational Plan has been prepared in line with national NHS Planning Guidance to fulfil the CCG's responsibilities.

1. BACKGROUND AND CURRENT SITUATION

- 1.1. Shared operational planning guidance for the NHS was published in September 2016. This set out that, to support the ongoing development of Sustainability and Transformation Plans (STPs), CCGs would need to develop and approve a two-year operational plan for 2017-2019 by 23 December 2016. In conjunction with this, two-year contracts with providers based on these plans would also need to be agreed by December



1.2. The CCG has been developing an Operational Plan, which consists of a narrative document and detailed financial and activity plans. A draft version was submitted to NHS England in November and feedback on the content is awaited.

2. DRAFT OPERATIONAL PLAN

2.1. The latest draft of the operational plan for 2017-2019 will be circulated at the Governing Body meeting. This is to ensure that the Governing Body have access to the most up to date version for consideration should NHS England provide detailed feedback on the initial draft and further changes be required.

2.2. The draft plan builds on the CCG's five-year strategy for the Wolverhampton health economy established in 2014, based on the vision to commission the right care, in the right place at the right time for our patient population. It sets out the work that will be undertaken to help us achieve that vision throughout the two year period.

2.3. The plan sets out our key priorities for delivery as follows:-

- Delivering our contribution to the Black Country STP;
- Supporting Greater integration of health and social care services across Wolverhampton;
- Supporting the continued improvement and development of Primary Care in Wolverhampton;
- Developing new models of care to support care closer to home and avoidable admissions to hospital;
- Meeting our statutory duties and responsibilities; and
- Supporting the development of the appropriate infrastructure for health and care across Wolverhampton.

2.4. Details of planned work to deliver against each of these priorities are set out in the plan. This includes highlighting how the CCG will deliver against the nine national 'must dos' set out in the planning guidance. It is clearly aligned with both the Black Country STP and a number of the CCGs existing strategies and plans – in particular those for Primary Care, Urgent Care and End of Life Care.

2.5. The challenges and risks facing both the CCG and our partners across the Black Country STP in delivering against these plans are acknowledged in the plan. In particular detail is given around how the CCG's operational plans will directly contribute to closing the gaps in health and wellbeing, care and quality and finance and efficiency across the STP.



3. NEXT STEPS

- 3.1. The Planning Guidance sets out that the Governing Body are required to approve the plans support two-year contracts being put in place by 23 December. As further amendments are likely to be required, the Governing Body are asked to consider the draft plan, make any comments and approve it as a working draft, authorising the Executive team to make the consequential amendments required following feedback from NHS England and submitting the final version on the Governing Body's behalf.
- 3.2. Once the final version has been submitted, the operational plan will be the driving force for the CCG's work throughout 2017-2019. The priorities set out in the plan will also be used to inform the ongoing review of risk management and Board Assurance arrangements to ensure that the Governing Body retain a clear oversight of delivery against the plan over upcoming months.

4. CLINICAL VIEW

- 4.1. Clinical views will be sought on the plans set out in the Operational Plan as they are developed. Governing Body members are encouraged to provide a clinical perspective on the plan during the discussion at the meeting.

5. PATIENT AND PUBLIC VIEW

- 5.1. The operational plan sets out a high level approach to public engagement throughout the period covered by the plan. This approach closely aligns with collaborative work both locally and across the STP footprint to ensure that engagement is targeted effectively and duplication is avoided where possible.

6. RISKS AND IMPLICATIONS

Key Risks

- 6.1. The Operational Plan details the high level strategic risks associated with delivery of the CCGs plan, including the financial risks involved and the level of change required to transform services and address demand in the system. More granular levels of risk will be developed through the ongoing review of arrangements to align with the delivery priorities set out in the plan.

Financial and Resource Implications

- 6.2. The narrative plan is accompanied by detailed financial and activity modelling that detail how plans will be delivered within the CCG's financial allocations and support the work across the STP to return the system to financial balance. Brief details of how this is aligned are included in the narrative plan.



Quality and Safety Implications

- 6.3. The Operational plan details both our priorities for quality improvements across the services we commission and how we will monitor and support improvements through our processes.

Equality Implications

- 6.4. There are no equalities implications arising from the operational plan itself as it sets out plans at a high level. Specific work in the detailed delivery plans will be subject to equality analysis as appropriate throughout their development.

Medicines Management Implications

- 6.5. There are specific no medicines management implications arising from this report.

Legal and Policy Implications

- 6.6. The Operational Plan has been drafted in line with the nationally mandated NHS Operational Planning Guidance. It meets the requirements set out in this statutory guidance.

7. RECOMMENDATIONS**That the Governing Body:-**

- **Consider and comment on the working draft of the Operational Plan for 2017-2019**
- **Approve the working draft of the Operational Plan**
- **Authorise the Executive team to make the necessary amendments to the Plan and submit the final version to NHS England.**

Name Peter McKenzie
Job Title Corporate Operations Manager
Date November 2016



REPORT SIGN-OFF CHECKLIST

This section must be completed before the report is submitted to the Admin team. If any of these steps are not applicable please indicate, do not leave blank.

	Details/ Name	Date
Clinical View	To be sought on specific areas of work as required	
Public/ Patient View	To be sought in line with timescales set out in local and STP plans	
Finance Implications discussed with Finance Team	Claire Skidmore	Throughout Drafting Process
Quality Implications discussed with Quality and Risk Team	Manjeet Garcha	Throughout Drafting Process
Medicines Management Implications discussed with Medicines Management team	To be sought on specific areas of work as required	
Equality Implications discussed with CSU Equality and Inclusion Service	To be sought on specific areas of work as required	
Information Governance implications discussed with IG Support Officer	N/a	
Legal/ Policy implications discussed with Corporate Operations Manager	N/a	
Signed off by Report Owner (Must be completed)	Steven Marshall	

