

Appendix 1

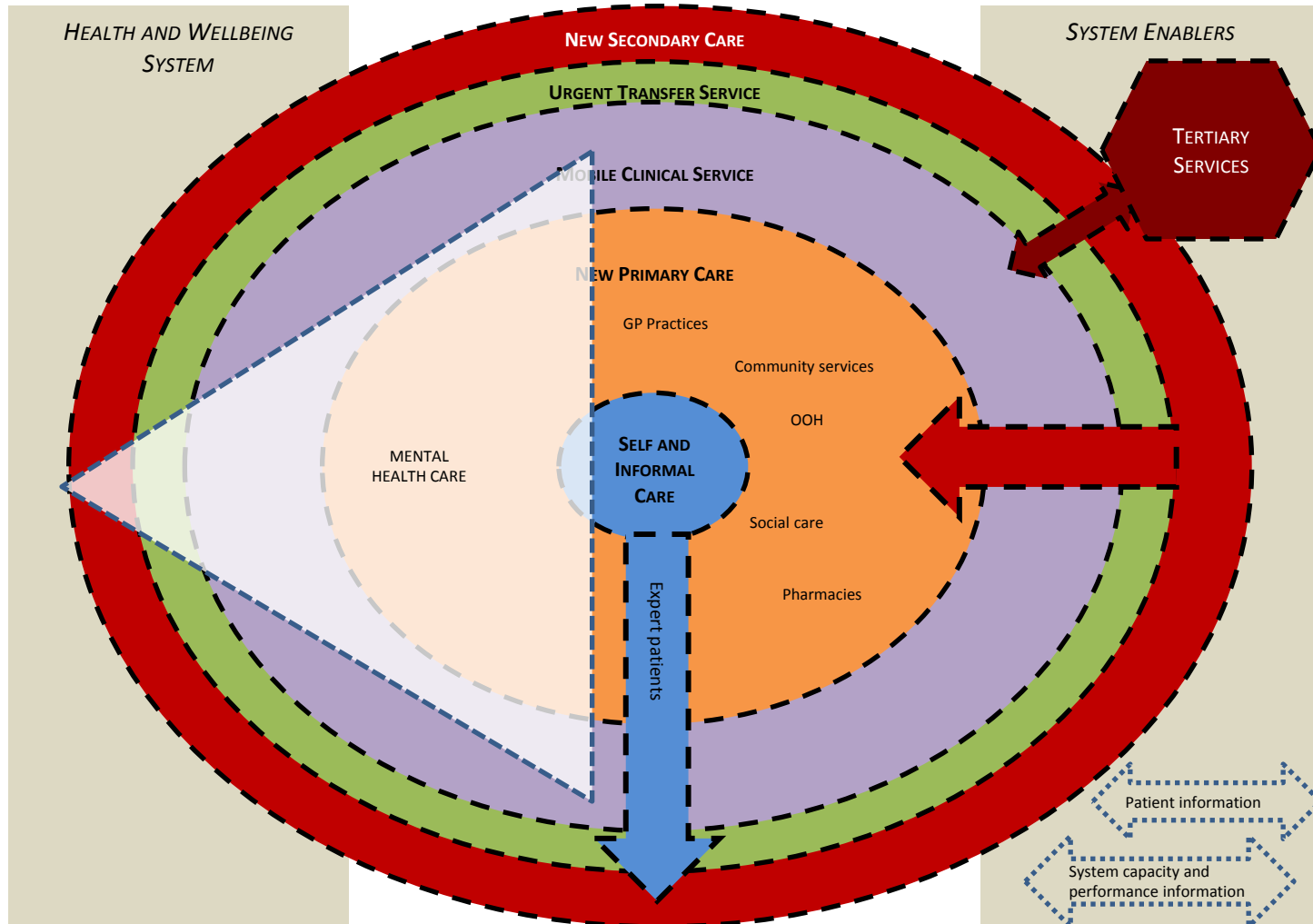


West Kent

Clinical Commissioning Group

2016/17 and beyond Operating plan

The CCG's current strategy – 'Mapping the Future'



The Mandate 2016/17

NHS England's objectives

1. Through better commissioning, improve local and national outcomes, particularly by addressing poor outcomes and inequalities
2. To help create the safest, highest quality health and care services
3. To balance the NHS budget and improve efficiency and productivity
4. To lead a step change in the NHS in preventing ill health and supporting people to live healthier lives
5. To maintain and improve performance against core standards
6. To improve out-of-hospital care
7. To support research, innovation and growth

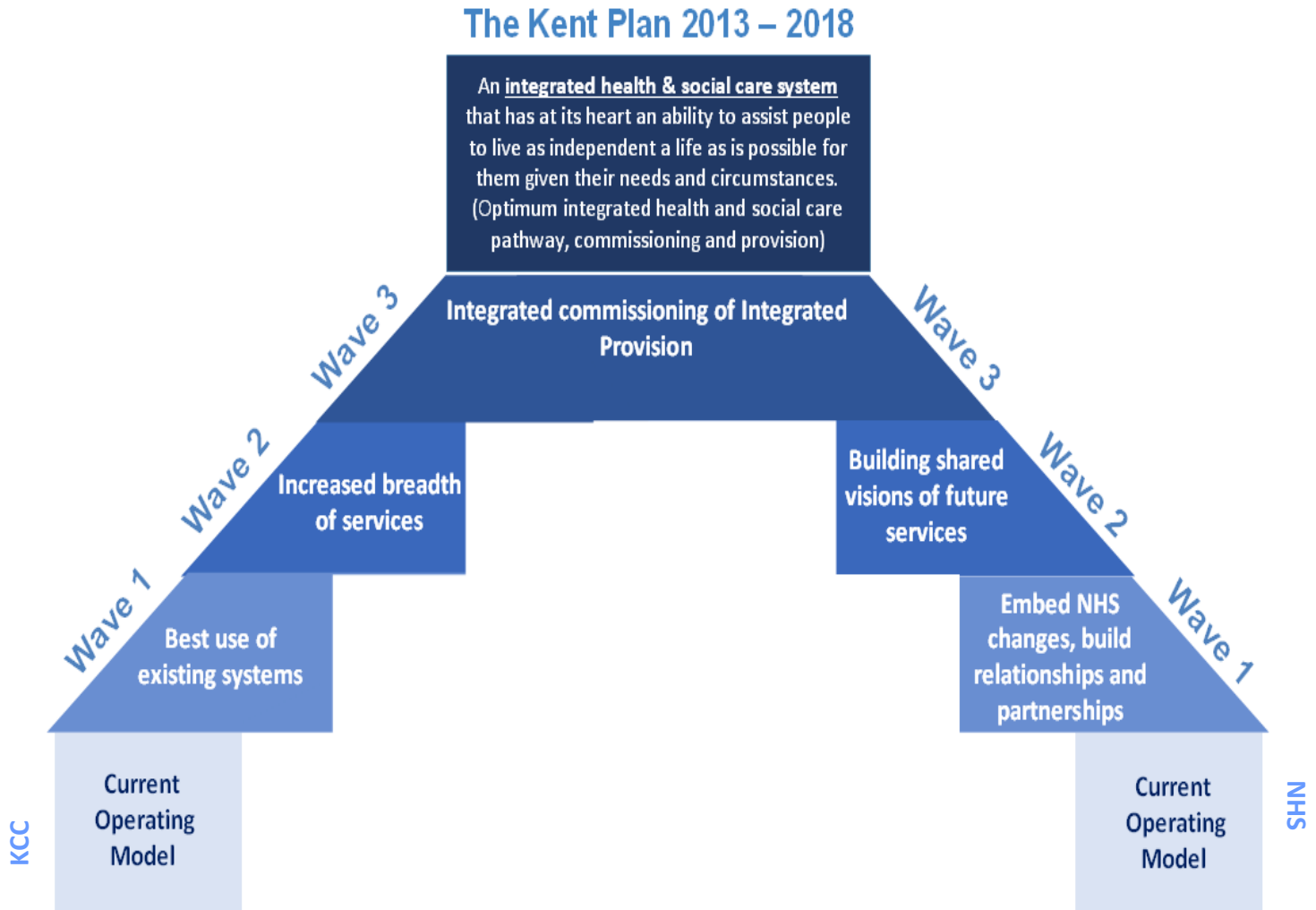
The Five Year Forward View

- ❖ Getting Serious about Prevention
- ❖ Empowering Patients and Engaging Communities
- ❖ New Care Models
 - Multispecialty Community Providers (MCPs)
 - Primary and Acute care Systems (PACS)
 - Urgent and emergency care networks
 - Specialised care
 - Enhanced health in care homes
- ❖ Smarter use of technology
- ❖ Efficiency and more money

New Care Models...

- ❖ Can act as Accountable Care Organisations that ...
 - Provide and commission
 - Defined population
 - Capitated risk
 - MDT approach
 - Rewarded for outcomes
 - Real time, operational informatics

CCGs and KCC – Integration Pioneer



HWB Priorities

Joint Health and Wellbeing Strategy

Outcome 1

Every child has the best start in life

Outcome 2

Effective prevention of ill health by people taking greater responsibility for their health and wellbeing

Outcome 3

The quality of life for people with long term conditions is enhanced and they have access to good quality care and support

Outcome 4

People with mental ill health issues are supported to 'live well'

Outcome 5

People with dementia are assessed and treated earlier, and are supported to 'live well'

Approach: Integrated Commissioning

Approach: Integrated Provision

Approach: Person Centered

Priority 1

Tackle key health issues where Kent is performing worse than the England average

Priority 2

Tackle health inequalities

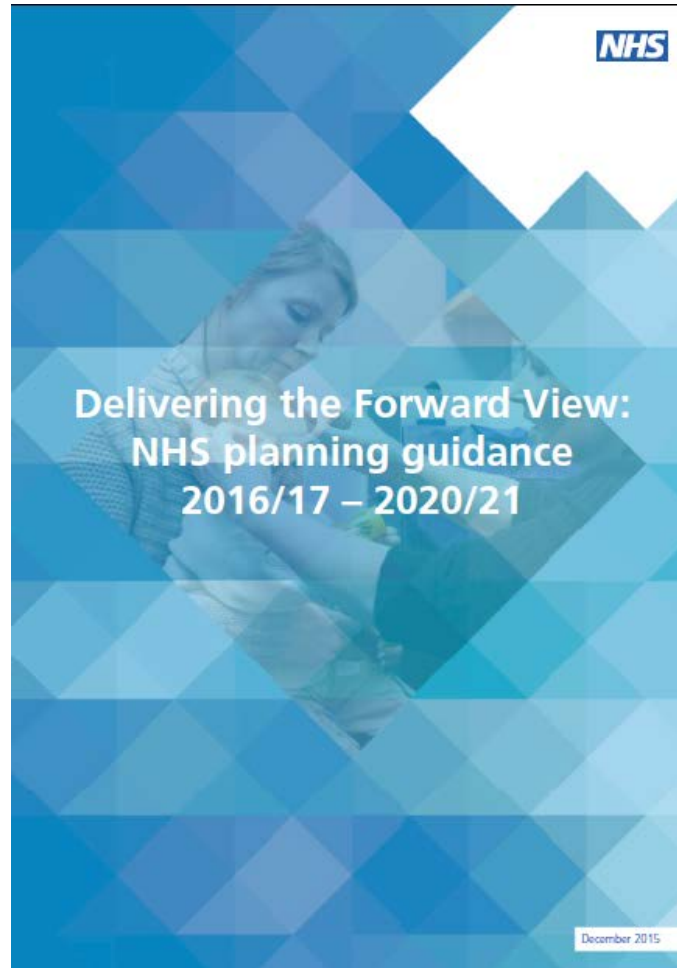
Priority 3

Tackle the gaps in provision

Priority 4

Transform services to improve outcomes, patient experience and value for money

Planning Guidance for 2016/7 – 2020/21



Two separate but connected plans

- a five year **Sustainability and Transformation Plan** (STP), place-based and driving the Five Year Forward View (by June 16)
- a one year **Operating Plan** for 2016/17, organisation-based but consistent with the emerging STP (by April 16)

Nine 'must dos' for 2016/17

1. Develop and high quality and agreed STP
2. Return the system to aggregate financial balance
3. Develop a local plan to address the sustainability and quality of primary care
4. Get back on track with access standards for A&E and ambulance waits
5. Improve and maintain NHS constitution standards for RTT
6. Deliver the NHS Constitution 62 day cancer waiting standard and continue to deliver the 31 day standard
7. Achieve and maintain two new MH access standards – treatment for a first episode of psychosis & IAPT. Continue to meet the dementia diagnosis rate of 67%
8. Deliver the actions set out in plans to transform care for people with LD
9. Develop and implement an affordable plan to make improvements in quality; particularly for organisations in special measures.

Planning Priority Themes (1)

- Mental Health
- Frailty and Dementia
- Transforming Outpatients
- Timely access to diagnostics, including reporting
- Children's Health Services (including CAMHS)
- Cancer
- Avoiding the need for Urgent Care
- Focus on delivering ambulatory care when possible

Planning Priority Themes (2)

- Development of Primary care and New Primary Care
- Working in partnership with District councils
- Getting best value from Continuing Health Care and Placements
- Opportunities for repatriation
- Improved prescribing
- Enhancing services for patients with Learning Disability

Enabling workstreams and focus

- IT and other technology / Digital roadmap
- Contracting/Pricing
- Links to quality agenda and contract schedules
- Integration of commissioning with KCC

Allocations – forward look

	DfT (£m)	DfT (%)	Actual per capita (£)	Target per capita (£)	Actual allocation £m	Target allocation £m	Base level growth %	Growth received by CCG %
2013-14	(39.828)	(7.9)	1,000	1,085	466.024	505.582		
2016-17	(15.221)	(2.7)	1,124	1,156	540.964	556,185	1.4	5.0
2017-18	(14.042)	(2.5)	1,143	1,172	555,399	669,441	0.2	2.7
2018-19	(12.673)	(2.2)	1,162	1,188	570,065	582,738	0.1	2.6
2019-20	(11.949)	(2.0)	1,182	1,206	585,306	597,255	0.0	2.7
2020-21	(10.460)	(1.7)	1,223	1,244	611,691	622,151	1.5	4.5

Dft = Distance from target

WK CCG Draft Financial Framework 2016-17

	M10 O/T	FYE/ NR	Recurrent	P&P	Demo- graphic	Other	Baseline/ Business Rules	Budget (£551.5m)
MTW	208.6	2.0	210.6	3.3	2.1	-1.8		214.2
Other Acute	98.1	-0.9	97.2	1.2	1.7	3.0		103.1
KMPT	31.2	-0.7	30.5	0.3	0.3	0.4		31.5
Other MH	11.7	-0.3	11.4	0.1	0.1	1.0		12.6
KCHFT	32.7	-0.3	32.4	0.4	0.3	0.0		33.1
Other community	15.0	0.6	15.6	0.1	0.1	0.0		15.8
CHC	35.2	0.0	35.2	0.9	2.8	0.0		38.9
Primary Care	10.9	-1.1	9.8	0.4	0.0	1.8	1.1	13.1
Prescribing	71.9	1.0	72.9	0.7	2.9	1.2		77.7
Other	5.2	0.0	5.2	0.0	0.0	-1.9	6.3	9.6
Contingency	0.0	0.0	0.0	0.0	0.0	0.0	2.7	2.7
Running Costs	10.6	-0.1	10.5	0.0	0.0	0.0	0.0	10.5
GRAND TOTAL	531.1	0.2	531.3	7.4	10.3	2.6	10.1	562.8
					QIPP requirement			11.3