



Excellence in Commissioning  
Through Excellent Primary Care

# Birmingham Health Overview Scrutiny Committee

## Development of the Operational Plan 2016/17

Tuesday 23<sup>rd</sup> February 2016

Les Williams  
Director of Performance and Delivery



# Purpose

- To update the Committee on the development of the CCG Operational Plan for 2016/17
- To set out the context within which it is being developed
- To provide the opportunity to influence its content and steer its direction



# Context

- NHS Planning Guidance published December 2015
- Sets out requirements for Operational Plan for 2016/17 and Sustainability and Transformation Plan (STP) to 2020/21
- In context of financial settlement in CSR, three years fixed, 2 years indicative
- NHS required to close three gaps - the 'Triple Aim'
  - Health and wellbeing
  - Care and quality
  - Productivity and efficiency



# Context

- Sustainability and Transformation Plan to 2020/21 to be place-based
  - STP footprint - Birmingham and Solihull
  - Submit in June 2016
- Operational Plan 2016/17 to be organisation-based, but first year of STP
  - Each CCG and Trust
- Three submissions of Operational Plan
  - 8<sup>th</sup> February
  - 2<sup>nd</sup> March
  - 11<sup>th</sup> April
- Operational plan therefore needs to predict content of strategic STP

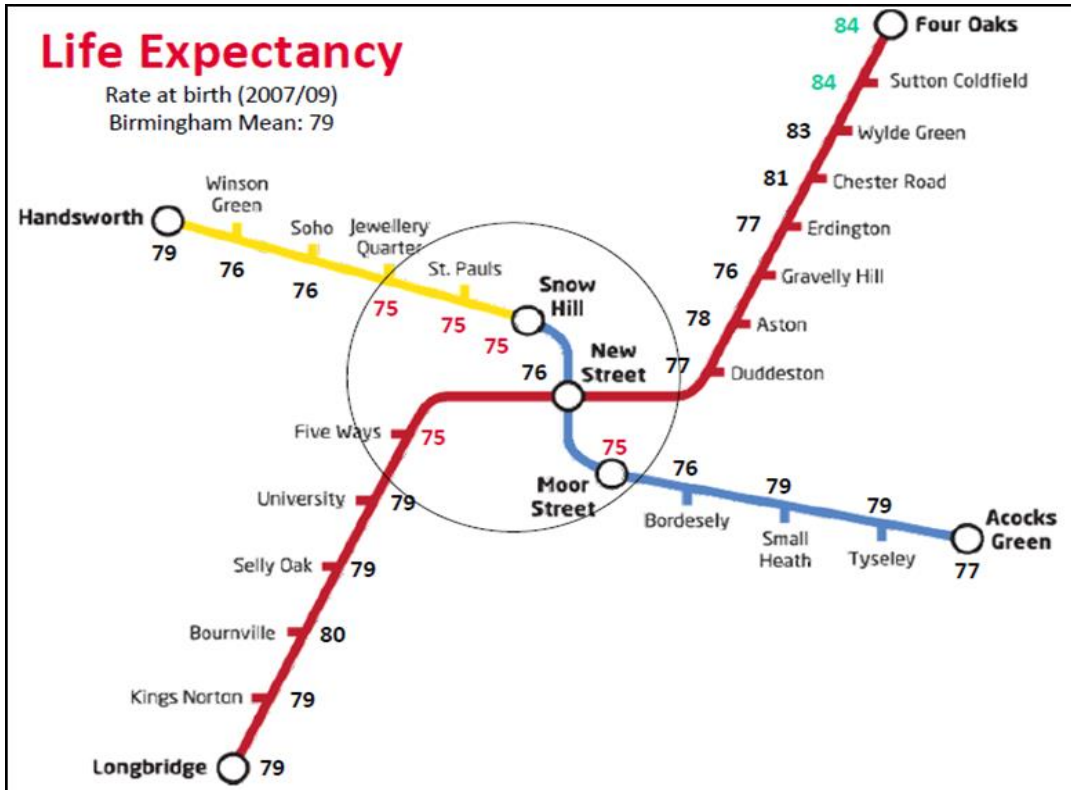


# 8<sup>th</sup> February submissions

- Minimum required:
  - Activity and financial projections for 2016/17 (subject to tariff publication, contracts agreement, BCF guidance)
  - Commitment to achieve NHS Constitution standards
  - Transforming Care plan
  - BCF plan (but requirement delayed as national view awaited)
  - Plan on a Page
  - Operational Resilience Capacity Plan
- Very much an initial submission – two further months to refine and confirm

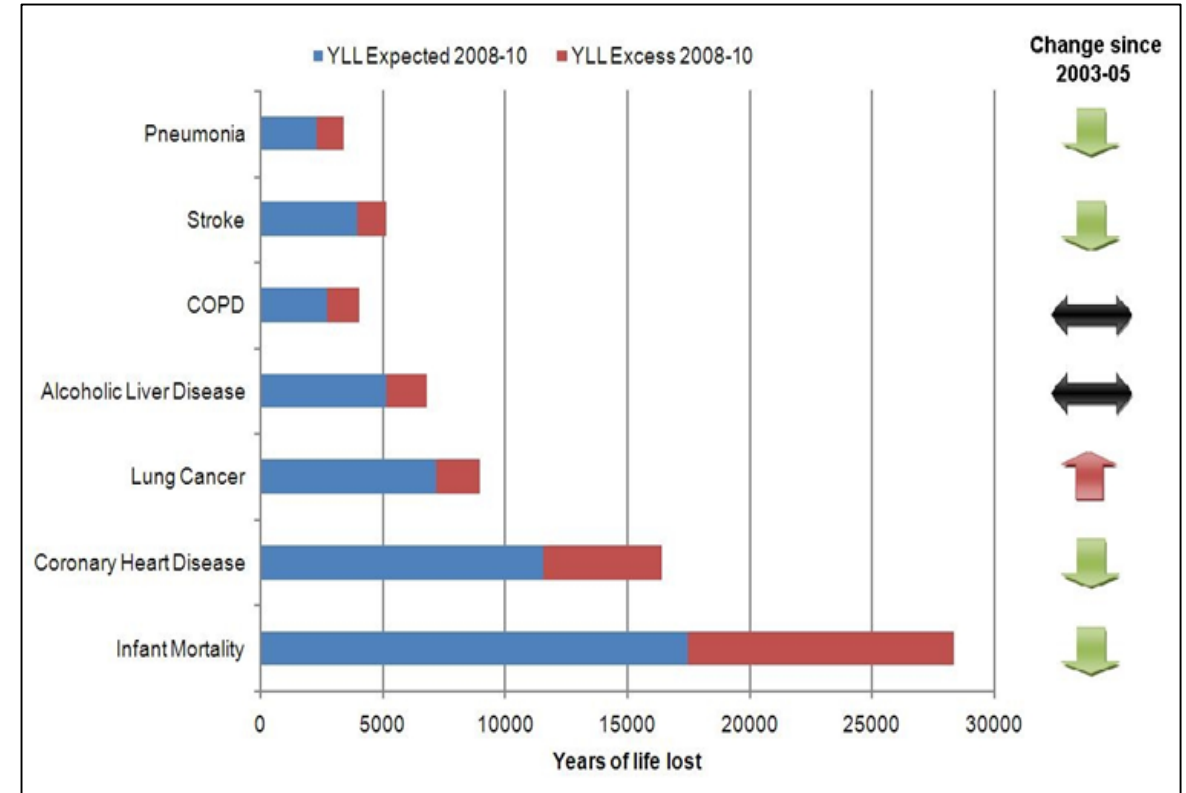


# Health inequalities and patterns of disease



Compared to national averages, Birmingham has:

- Lower rates of healthy eating/physical activity
- Higher levels of obesity
- Higher rates of smoking in most deprived wards



These 7 conditions make up 70% of life expectancy gap

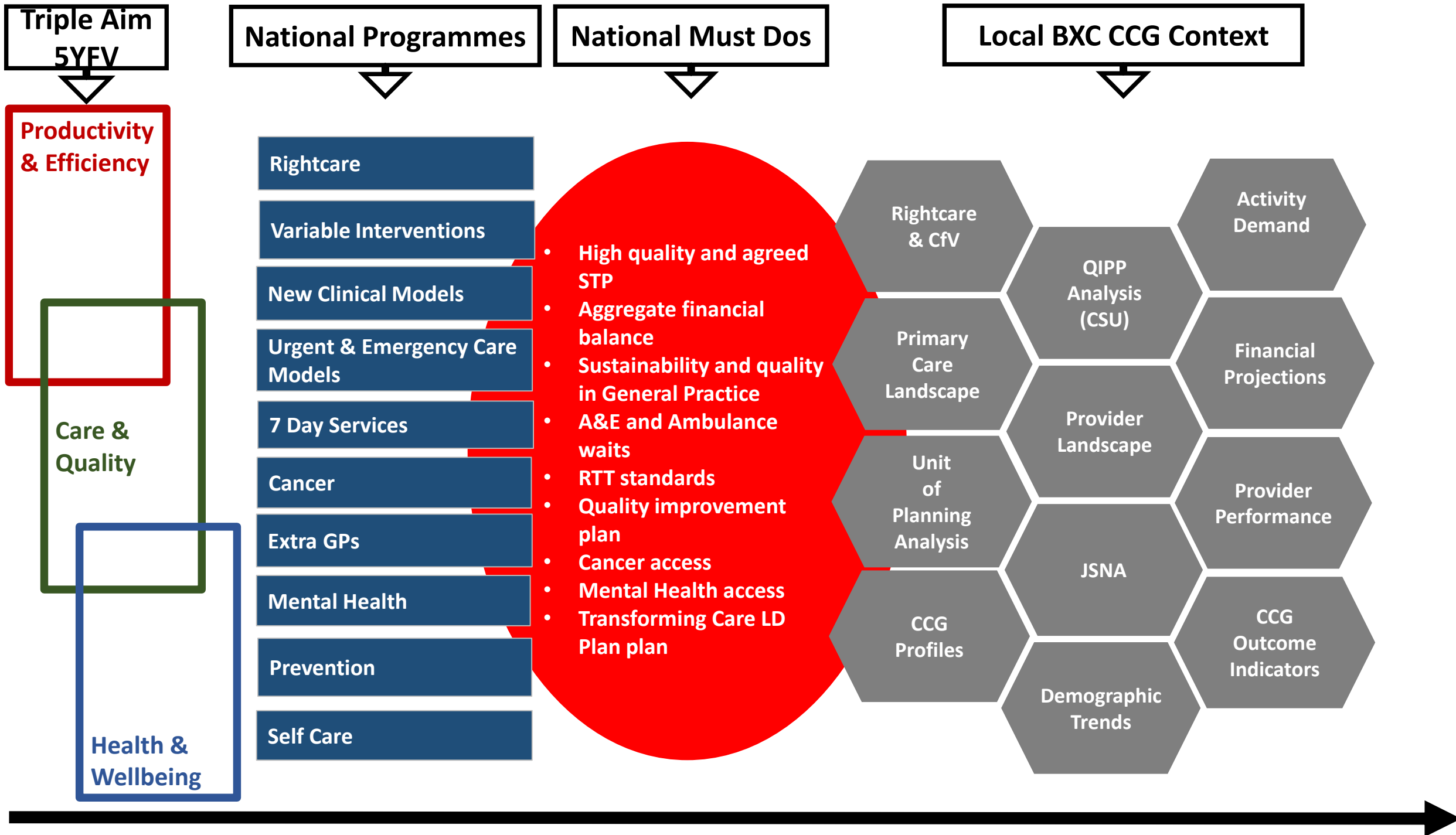
Variation in disease patterns according to affluence, age of populations and ethnicity



# Plan on a page

- Attempt to identify how our plan is developed from national policy, in context of local issues and concerns, through prioritisation and discussion, to arrive at 5 Strategic Objectives and large number of priorities
- Identifies current delivery vehicles in the CCG
- Relates to Unit of Planning priority workstreams (Birmingham, Solihull and Sandwell)
- Shows linkage to place-based commissioning (through STP)
- Final agreement by April subject to outcome of planning round and affordability
- Set out on next four pages



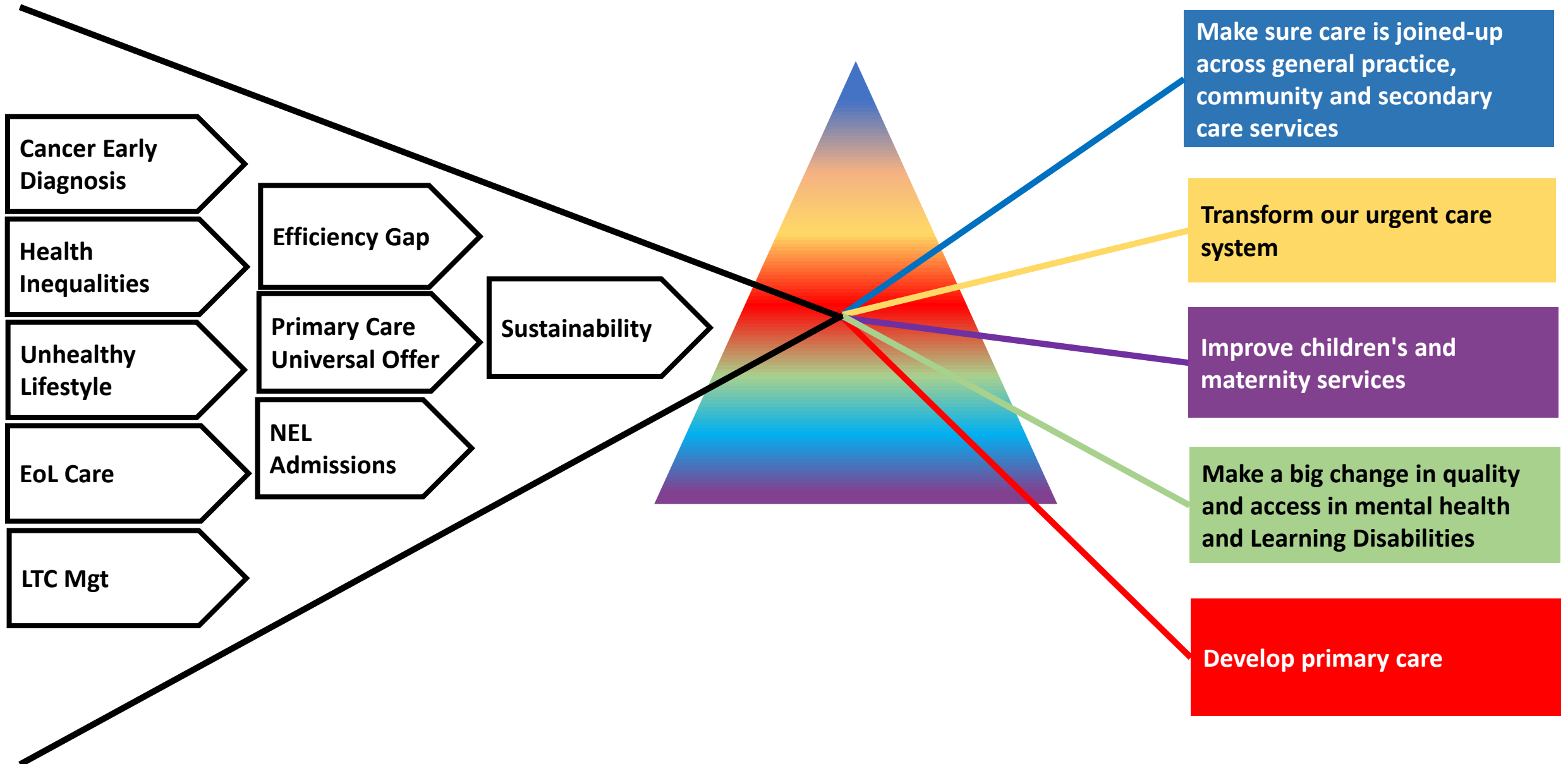




## Key Issues and Challenges

## Prioritisation

## Strategic Objectives





**CCG Delivery Vehicle**

**Unit of Planning Priorities**

**Sustainability & Transformation Plan**

Planned Care Programme

Urgent Care Programme

Maternity & Children's Programme

Mental Health Programme  
Transforming Care Programme

Primary Care Programme

Enablers Programme

Diagnostics

Specialised Commissioning

Children's Services  
Maternity Services

Mental Health  
Autism  
Personality Disorder



National

West Midlands Combined Authority

Sustainability & Transformation Plan  
Birmingham and Solihull CCGs  
UHB/HEFT  
BSMHFT  
BCH/BWH  
ROH  
BCHC  
WMAS  
3<sup>rd</sup> Sector

Birmingham CrossCity CCG

CCG Localities

Place Based Commissioning Approach

# Key Issues and Challenges

- Early diagnosis of cancer
- Addressing health inequalities, improving access to employment
- Unhealthy lifestyle – obesity, alcohol, smoking
- Improved and joined up management of long term conditions, especially CVD, respiratory disease, diabetes
- Implementing the end of life strategy, increasing choice and community based services
- Improved access to mental health services, including dementia diagnosis and care
- Responding to national review of maternity services
- Improved primary care, through delivery of ACE and expanded access
- Transformed urgent care system, leading to better local access, reduced attendances and admissions to hospitals

# Views and comments

- Views welcomed on any aspect, and particularly:
  - Are these the right areas on which to focus?
  - Are there other areas that should be excluded or included?



# Questions

