

**Trust Board Meeting: Wednesday 14 January 2015**

**TB2015.10**

<b>Title</b>	<b>Update on National Planning Guidance for 2015/16</b>
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<b>Status</b>	For information
<b>History</b>	N/A

<b>Board Lead(s)</b>	<b>Mr Andrew Stevens, Director of Planning &amp; Information</b>			
<b>Key purpose</b>	<b>Strategy</b>	Assurance	Policy	Performance

## Executive Summary

<p>1. The NHS has published its planning guidance for 2015/16.</p>
<p>2. “The Forward View into Action: planning for 2015/16” sets out the action that needs to be taken both nationally and locally “to make a start in 2015/16 towards fulfilling the vision set out in the NHS Five Year Forward View, whilst at the same time delivering high quality, timely care that the people of England expect today”.</p>
<p>3. The guidance sets out the planning framework for 2015/16 under the following themes:</p> <ul style="list-style-type: none"><li>• Creating a new relationship with patients and communities.</li><li>• Co-creating new models of care.</li><li>• Priorities for operational delivery in 2015/16.</li><li>• Enabling change.</li><li>• Driving efficiency</li></ul>
<p>4. The document also sets out the proposed planning timetable and milestones.</p>
<p>5. Attached to this paper is a presentation that was used to support consideration of the Five Year Forward View and its implications for the Trust at the Trust Board seminar in November.</p>
<p>6. The planning guidance will inform the Trust’s own internal planning framework and the development of both the corporate and divisional business plans. Progress on the development of these plans and the Trust’s required planning submissions to the Trust Development Authority will be reported to the Board.</p>
<p><b>7. Recommendation</b></p> <p>The Trust Board is recommended to note this report.</p>

## Update on National Planning Guidance for 2015/16

### 1. Introduction

- 1.1. This paper summarises the National Planning Guidance for the NHS for 2015/16. “The Forward View into Action: planning for 2015/16” serves as the operating framework for the NHS for 2015/16. It sets out how the NHS both nationally and locally should “make a start in 2015/16 towards fulfilling the vision set out in the NHS Five Year Forward View, whilst at the same time delivering the high quality, timely care that the people of England expect today.”
- 1.2. Attached to this paper are the slides supporting the consideration given to the Five Year Forward View by the Trust Board at its seminar held on 26 November 2014.

### 2. Creating a new relationship with patients and communities

- 2.1. The prevention and engagement agendas are seen as crucial the achievement of the vision set out in the Five Year Forward View.

#### ***Getting serious about prevention***

- 2.2. The planning guidance reinforces the Five Year Forward View’s renewed emphasis on the prevention agenda.
- 2.3. Six different approaches to improving health and wellbeing are set out. These are:
  - Clinical commissioning groups (CCGs) will be required to set quantifiable targets and standards for reducing local health inequalities and improving outcomes for health and wellbeing.
  - There will be strengthened national action on prevention on key health and wellbeing issues.
  - A national evidence-based diabetes prevention programme will be implemented.
  - Proposals will be developed for improving NHS services for helping individuals stay in work or return to employment.
  - Incentives will be extended for employers who provide effective health programmes for employees.
  - NHS Employers will be required to improve the physical and mental health and wellbeing of their staff.

#### ***Empowering patients***

- 2.4. Strategies for empowering patients will include:
  - A requirement for providers to show demonstrable progress towards achieving fully interoperable digital health records from 2018. From April 2015, patients will have on-line access to their GP records.

- There will be a strengthening and extension of personal health budgets and personalised commissioning.
- Patient choice will be strengthened with specific initiatives in mental health and community services.

### ***Engaging communities***

2.5. In 2015/16 there will be a focus on actions to improve the way that the NHS engages with communities and citizens involving them in decisions about the future of health and care services. This will include:

- CCGs working with other health and social care partners to draw up plans to identify and support carers.
- Energising community volunteering and encouraging new roles for volunteers.
- Streamlining the process for the NHS funding of the charitable and voluntary sector.
- NHS employers leading the way as progressive employers with particular reference to the diversity agenda.

## **3. Co-creating new models of care**

3.1. Planning guidance sets out proposals for the acceleration of the design and implementation of the new models of care required to deliver the new vision for the NHS.

3.2. It is proposed that initial cohorts of sites will be identified to support the prototyping of four different types of care models outlined in the Forward View:

- Multi-speciality community providers.
- Integrated primary and acute care systems.
- Additional approaches to creating viable, smaller hospitals.
- Models of enhanced health in care homes.

3.3. A structured programme of support will be put in place for the cohorts.

3.4. In 2015, NHS England, working together with the Local Government Association, will develop proposals for establishing a health and care garden city in one or more areas of fast growing population (including the recently announced new garden cities of Ebbsfleet and Bicester). These areas would take a “first principles” approach to designing an integrated infrastructure that promotes health and wellbeing.

3.5. An additional initiative will include development of a small number of test bed sites, which will serve as important opportunities for the life science and health and technology industries to partner with the NHS to demonstrate how multiple innovations can deliver significant improvements in outcomes, patient experience and cost effectiveness.

- 3.6. In 2015/16, a new regime for challenged systems will be introduced that will seek to create the conditions for success in those areas that have been identified as being the most challenged.
- 3.7. Measures will be introduced to strengthen primary care and to address some of the key problems that it is currently facing such as recruitment and retention and premises improvement.
- 3.8. Action will also be taken to support the strengthening of:
  - Urgent and emergency care services.
  - Maternity services.
  - Cancer services.
  - Specialised services

#### **4. Priorities for operational delivery in 2015/16**

- 4.1. Proposals for improving the quality and safety of services are set out in the planning guidance.

##### ***Improving quality and outcomes***

- 4.2. Local health economies are required to strengthen their performance against the NHS Outcomes Framework.
- 4.3. A revitalised National Quality Board will publish its priorities and work programme by the summer of 2015 with a view to building a single framework for consistently measuring quality across providers, commissioners and regulators.

##### ***Improving patient safety***

- 4.4. Measures to improve patient safety in 2015/16 will include:
  - An expectation that commissioners and providers will continue to drive forward and embed improvements in response to the Francis report, the failings at Winterbourne View and the Berwick Review.
  - The identification of sepsis and acute kidney injury as two specific clinical priorities that will be the subject of new indicators for the 2015/16 Commissioning for Quality and Innovation (CQUIN) incentive framework.
  - Improvements in antibiotic prescribing.
  - Continued progress in implementing the clinical standards for seven day services.

##### ***Meeting NHS constitution standards***

- 4.5. The guidance calls for better joint working between commissioners and providers to ensure realistic and deliverable joint plans for the meeting of NHS constitution standards.

***Achieving parity for mental health***

4.6. Measures to secure the achievement of parity for mental health include:

- The introduction of access and waiting time standards.
- The strengthening of liaison psychiatry.
- Improvements in crisis support.
- The development of community child and adolescent mental health services.

***Transforming care of people with learning disabilities***

4.7. The guidance calls for greater progress to be made in securing a substantial reduction in reliance on inpatient care for people with learning disabilities or autism.

**5. Enabling change**

5.1. The guidance sets out the measures to strengthen the key enablers of the required transformation.

***Harnessing the information revolution and transparency***

5.2. Actions are identified that will support the transformation of outcomes for patients and citizens, the development of new models of care and the reduction in the cost of services. These include:

- From April 2015 all citizens will have online access to their GP records.
- The NHS number will be used as the primary identifier in all settings when sharing information.
- Patients will have access to easy to use electronic prescription service, with an expectation that 60% of GP practices will be transmitting prescriptions electronically to the pharmacy by March 2016.
- The expansion of online services for patients to other applications.
- A legally binding requirement by October 2015 for structured coded discharge summaries to be available to health professionals electronically.
- Electronic referrals between GPs and other services to become the norm, with at least 80% of elective referrals to be made electronically by March 2016.
- The development by commissioners of a road map for the introduction of fully interoperable digital records in line with the National Information Board's framework "Personalised Health and Social Care 2020".

***A modern health and social care workforce***

- 5.3. Measures to ensure that the NHS has a modern health and care workforce capable of delivering the required vision include:
- Strengthened engagement between health economies and their local education and training boards (LETBS).
  - The development of a new National Workforce Advisory Board.
  - Preparations for the introduction of nursing and midwifery revalidation from the end of December 2014.

***Accelerating useful innovation***

- 5.4. Accelerated innovation within the NHS will be promoted through:
- Schemes such as the “Commissioning through Evaluation” and “Early Access to Medicines” programmes.
  - The development by NHS England and NICE of a new deployment model for new technologies in 2015.
  - The 100,000 whole genomes project (for which Oxford is one of the first centres to be announced).

**6. Driving efficiency**

- 6.1. The guidance identifies how the financial challenge faced by the NHS will be approached.

***A more productive and efficient NHS***

- 6.2. The Forward View identified the need for the NHS to achieve two to three percent efficiency per year over the next parliament. The plans suggest that this can be achieved by:
- Closing the gap between the least and most efficient providers.
  - Exploiting the productivity gains through technological advancement or improvements in service delivery.
  - Implementing preventative approaches and new care models.
  - Better staff retention including by promoting the health and wellbeing.

***NHS funding in 2015/16***

- 6.3. £1.98 billion of additional investment in the NHS was announced by the Chancellor of the Exchequer in the autumn statement. This will be deployed through a combination of an uplift to commissioner allocation and the creation of funds to support transformation.

***Joint working between commissioners and providers***

- 6.4. The planning guidance sets out an expectation of enhanced activity and capacity planning between commissioners and providers both to secure services for patients and to manage demand across health systems.

***NHS England and Monitor's proposals on the national tariff***

- 6.5. The planning guidance sets out key financial assumptions for 2015/16. These result in a provider efficiency requirement of 3.8%.
- 6.6. The marginal rate for non-elective activity above the 2008/09 – based base line will be increased from 30 to 50%. Specialised activity above planned levels will be funded at a 50% marginal rate.

***NHS England's requirements for commissioners in key areas***

- 6.7. Better Care Fund plans will be required to be reviewed in the light of the likely outturn for 2014/15 and progress with contract negotiations with providers for 2015/16. All commissioners are required to set aside 1% non-recurrent spend in 2015/16 both as a contingency and to support the implementation of new care models. The guidance summarises the CQUIN framework for 2015/16.

**7. Timetable**

- 7.1. A summarised planning timetable and milestones are set out in the table below:

By 23 Dec 2014	Publication of 2015/16 planning guidance
Jan 2015	Publication of revised National Tariff, standard contract for 2015/16
Jan – 11 Mar 2015	Contract negotiations – including voluntary mediation
13 Jan 2015	Submission of initial headline plan data (CCGs, NHS England, NHS Trusts)
From 29 Jan 2015	Weekly contract tracker to be submitted each Thursday (CCGs, NHS England, NHS Trusts and NHS FTs)
13 Feb 2015	Checkpoint for progress with planning measures and trajectories (CCGs, NHS England)
20 February	National contract stocktake – to check the status of contracts



27 Feb 2015	Submission of full draft plans (CCGs, NHS England, NHS Trusts, FTs)
27 Feb – 30 Mar 2015	Assurance of draft plans (CCGs, NHS England, NHS Trusts and FTs)
6 Mar 2015	Checkpoint for progress with planning measures and trajectories (CCGs, NHS England)
11 Mar 2015	Contracts signed post-mediation (CCGs, NHS England, NHS Trusts and FTs)
12 – 23 Mar 2015	Contract arbitration (CCGs, NHS England, NHS Trusts and NHS FTs)
By 25 Mar 2015	Arbitration outcomes notified to commissioners and providers (CCGs, NHS England, NHS Trusts and NHS FTs)
By 31 Mar 2015	Plans approved by Boards of CCGs, NHS Trusts and Foundation Trusts
10 Apr 2015	Submission of full final plans (CCGs, NHS England, NHS Trusts and FTs)
From 10 Apr 2015	Assurance and reconciliation of operational plans

## 8. Conclusion and recommendations

- 8.1. The last five slides of the attached presentation map current initiatives within the Trust on to the key themes within the Five Year Forward View and the associated planning documentation.
- 8.2. The planning guidance will be incorporated into the Trust's own planning framework for 2015/16 and will help to shape both the Trust's corporate business plan and divisional business plans for 2015/16.
- 8.3. Progress on the development of the business plan and the associated planning returns to the Trust Development Authority will be reported to the Board.

### ***Recommendation***

- 8.4. The Trust Board is asked to note the contents of this paper.

**Andrew Stevens**

**Director of Planning & Information**

**22 December 2014**