

Agenda Item:7

<p style="font-size: 1.2em; font-weight: bold; margin: 0;"><i>Governing Body</i></p> <p style="font-size: 1.2em; font-weight: bold; margin: 0;"><i>held in public</i></p>	<p style="font-size: 1.5em; font-weight: bold; margin: 0;">Report</p> <p style="margin: 0;">Date of Meeting: 16/1/20</p>
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<b>Report Title</b>	Long Term Plan Update & 2020/21 Commissioning Delivery Planning		
<b>Report Author</b>	<b>Presented By</b>	<b>Responsible Director</b>	
Penny Emerson Programme Director Bedfordshire Luton & Milton Keynes Commissioning Collaborative	Geraint Davies Director of System Commissioning Bedfordshire, Luton and Milton Keynes CCGs Commissioning Collaborative	Geraint Davies Director of System Commissioning Bedfordshire, Luton and Milton Keynes CCGs Commissioning Collaborative  <b>Signature:</b> 	
<b>Purpose for presenting report</b>	This update provides an update for the Board on the Long Term Plan, together with an overview of the likely national planning framework & requirements for progressing 2020/2021 operational planning and a broad outline of the planning timeframes.		
<b>Action Required:</b>	Note the detailed context for the CCGs annual planning round		
<b>Approval Route:</b>	Executive team		
<b>Further Assurance:</b>	N/A		
<b>Which Strategic Objectives does this report provide evidence for?</b>			<b>Please Tick</b> ✓
We will commission high quality, safe and sustainable models of care that deliver effective clinical outcomes and patient experience using evidence based decisions and best practice			✓
We will ensure that there is a financially sustainable and affordable healthcare system in Bedfordshire.			✓
We will lead, engage and operate as an effective place based and STP wide system partner to achieve greater integration of care delivery.			✓
We will support local people and stakeholders to have an influence on services we commission to ensure our decisions are informed and shaped by local views and insights.			
We will operate and manage our Governing Body to the highest standards of accountability and transparency.			✓
<b>Implications/Assessments</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
Have any financial implications been signed off by the Chief Finance Officer?			✓
Have any quality implications been signed off by the Director of Nursing & Quality?			✓
Have any privacy implications been signed off by the Head of Information Governance?			✓

Have any conflicts of interest implications been signed off by the Corporate Office?			✓
Have any public engagement implications been signed off by the Head of Communications & Engagement?			✓
Has an Equality Impact Assessment been carried out?			✓
<b>Key Risks</b>	Risks to the delivery of our plan will be reflected in the GBAF for 2021		
<b>Executive Summary</b>	This is a summary paper		

## 1.0 Background

Across the Integrated Care System (ICS) we have developed a Long Term Plan (LTP) for Wellbeing and Health for Milton Keynes, Luton, Central Bedfordshire and Bedford Borough (BLMK) spanning a 5 year period. This was submitted to NHS England at the end of November 2019. An Executive Summary of the final BLMK LTP response has also been developed. Both will be issued soon, following final sign off by NHS England.

This year has been a foundation year, laying the groundwork for the implementation of the Long Term Plan as a whole from April 2020 onwards. Work has now commenced on detailed planning for commissioning and delivery that will specifically take place during 2020/2021 in line with both national requirements and the BLMK LTP.

This update provides a summary for the Board, likely national planning framework & requirements for progressing 2020/2021 operational planning and a broad outline of the planning timeframes.

## 2.0 Introduction

The NHS Long Term Plan sets out the direction of travel for the NHS over the next five to ten years. All STPs/ICSs have submitted a final response to NHS England at the end of November including:

- A Strategy Delivery Plan (narrative, plus trajectories for delivery in some areas)
- Supporting technical appendices including detailed template returns for workforce, finance and activity.

This was collaboratively developed to provide a focus for partnership working for the next five years. In part it explains how we will implement the proposals in the NHS Long Term Plan, but it goes beyond that to consider the wider action that is needed to improve wellbeing and health. It links closely with the four Health and Wellbeing Board strategies, and their constituent priorities. The plan is of a high level and has been designed to make it accessible for the public, patients and staff through production of an Executive Summary (Appendix A). Feedback from the public, patients and service users on the Long Term Plan (following a number of engagement events held during April – August) has also been used to inform its development.

In line with the NHS national annual operational planning timeframes, work has recently commenced to develop and agree (in further detail) local commissioning delivery plans for the forthcoming year, ensuring that they are reflected appropriately in service contracts.

### 3.0 National Planning Parameters for 2020/2021

Detailed guidance, to assist systems and organisations in preparing for 2020/21 operational planning and contracting, is expected to be published by NHSE w/c 13<sup>th</sup> January. As with previous years, it is likely that plans will need to reflect the following elements:-

- Delivery requirements for 2020/2021 that reflect LTP commitments and local commissioning priorities
- Organisational activity & financial plans for 2020/2021 that reflect LTP system planning
- Productivity, Efficiency & Performance assumptions that reflect LTP system planning
- Workforce planning
- Data & Technology planning

### 4.0 Developing our Commissioning Delivery Plan

#### 4.1 Context

2019/20 has been a foundation year for BLMK, seeing progress in the development of our Integrated Care System (ICS), the development of Primary Care Networks (PCNs) and the identification of two Integrated Care Provider (ICP) footprints. 2020/21 will see further collaborative transformation as the local NHS architecture responds to the commitments laid out in the Long Term Plan. These changes lay the groundwork for the implementation of the Long Term Plan, the collective vehicle of which will be a range of local aligned strategies and plans as illustrated in the diagram below:



Going forward, it is important that the different elements of our wider system planning (as shown above) fit together cohesively, and that there is clarity of leadership for them.

#### **4.2 Commissioning Delivery Plan for 2020/2021**

Whilst the overarching Long Term Plan has set out the strategic direction for the system across key priority areas, more detail is now required to outline service delivery, key outcome measures and system efficiencies at a commissioning level. This detail will form the basis of our Commissioning Delivery Plan for 2020/21, and will encompass the implementation plans for each of the key service areas referenced and articulated in the LTP response.

We are expecting that NHS annual planning guidance will be issued on 13<sup>th</sup> January 2020 and that this will set out the explicit requirements for development and inclusion of our CCG plan for 2020/2021. Importantly, the plan will need to align to the commitments already set out in the LTP, Place Based Plans, individual Clinical Service Strategies and ultimately The Clinical Strategy and its delivery plans (when these are ready).

#### **4.3 Planning Timeframes**

A national planning timetable is likely to be included in the technical guidance, to be published shortly. However, timeframes for the production of organisational level and STP/ICS system level operational plans are likely to reflect the following outline:-

National Guidance & Supporting Technical Information published.	w/c 13 <sup>th</sup> January
Organisations & STP/ICS systems submit draft Operational Plans.	Mid-February
Organisations & STP/ICS systems submit draft Operational Plans.	28 <sup>th</sup> February
Contract agreed and signed with providers	End of March

#### **4.4 System Intentions & Priorities**

Whilst our overarching BLMK Long Term Plan has set out the strategic direction for the system across key priority areas, more detail is now required to outline service delivery, key outcome measures and system efficiencies at a commissioning level. This detail will form the basis of operational planning and the development of a CCG Commissioning Delivery Plan for 2020/21 and will summarise key service and transformation priorities that will be delivered next year. As well as reflecting commitments outlined in our BLMK LTP response, commissioning plans for next year should also reflect local priorities.

As part of the early work being undertaken to support the development of an Integrated Care Partnership (ICP) across Bedfordshire, and to engender closer working between providers and commissioners, the CCG has initiated a number of bilateral and joint conversations between the CCG and providers to formulate efficiency savings and quality improvements that are aligned across Bedfordshire.

#### **4.5 Financial Context**

The funding settlement for Bedfordshire CCG amounts to an additional £124.5m to 2023/4. This equates to on average 4.6% increase per annum to the core programme budget and

5.7% per annum for delegated primary care. In addition to this the BLMK system will be in receipt of targeted transformation funds for mental health, primary care, cancer and long term conditions (£10m in 2019-20 rising to £30m by 2023-24) of which Bedfordshire will receive a share.

NHS England have set the financial trajectories (previously called control totals) for each ICS system for the next four years. Systems will be measured on their overall delivery as well as that of individual organisations. For BLMK this encompasses the 3 CCG's of Bedfordshire, Milton Keynes and Luton, as well as the hospital providers (Bedford Hospital, Milton Keynes University Hospital and Luton & Dunstable) and 50% of Cambridge Community Services. Each organisation has been set a trajectory including a 0.5% stretch target to contribute to a Regional contingency reserve.

For Luton & Milton Keynes CCGs the trajectory requires delivery of a 0.5% surplus each year. For Bedfordshire CCG the trajectory includes an element of historic debt recovery as well, which is being challenged by the BLMK ICS and plans have been submitted excluding the delivery of this additional target. For Bedford Hospital and Milton Keynes University Hospital, who have previously held deficit trajectories, the requirements are for a modest improvement year on year, with a contribution from the national Financial Recovery Fund (FRF) required to offset remaining deficits. The system trajectory will not reach an overall surplus position before FRF until 2023/24.

Financial plans have been developed to meet the NHS England performance requirements of the long term plan (including the mental health investment standard) , together with the local pressures from population growth. Taking all of these planning requirements into account the delivery of the financial trajectory over the next four years will be challenging, particularly in the next year 2020/21. Bedfordshire CCG has a £123m efficiency challenge across the period, with £33m (4.7% of allocation) in year one. Bedford hospital has a further £4.8m efficiency challenge (before impact of the CCG target)(2% of revenue) in year one.

Efficiency plans are under joint development as part of the contract negotiations with Bedford Hospital and Luton and Dunstable University Hospital, along with East London Foundation Trust.. There is a focus on delivery of real cash releasing savings across the local system rather than cost shifting between organisations. High level areas of focus have been identified, but further work is required as part of the next steps for operational planning to develop the more detailed delivery plans within each area and the degree of risk share between organisations.

## **5.0 Recommendation**

The Board is asked to note the detailed context for the CCGs annual planning round as set out within the paper.

Appendix A – BLMK LTP Response – Executive Summary



BLMK LTP SUMMARY  
251119.pdf

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