

Governing Body (public) meeting

DATE: 21 May 2015

Title	Development of the Commissioning Intentions 2016/17
Recommended action for the Governing Body	<p>That the Governing Body:</p> <p>NOTE the process being proposed to engage with stakeholders to draft and inform the Commissioning Intentions document, to cover the period from 2016/2017 onwards.</p>
Executive summary	<p>The planning guidance for the period 2014-2019 ('Everyone Counts: Planning for Patients 2014/2015 to 2018/2019) required CCGs to develop 5-year forward looking plans for the above period, with detailed operational plans for 2014/2015 and 2015/2016. Bexley CCG produced our final plan, entitled 'Our Plans 2014/2019' to comply with both the CCG constitution and NHS England Assurance requirements. The final plan was approved by the Governing Body during January 2014 and formally in May 2014, and published shortly afterwards by the CCG, as is required.</p> <p>As we are now coming to the end of the period supported by detailed commissioning plans, the CCG is required to produce an updated plan with key detail for the remaining period of the horizon until 2018/2019. It is the CCG position that the robust plan developed and agreed during 2014, provides a robust base upon which to develop and agree more detailed future plans.</p> <p>It is expected that the CCG will be required to submit first draft plans to NHS England towards the end of the current financial year. In order to meet this timetable and to ensure appropriate work up and engagement of clinically led transformation, the following outline timetable is proposed.</p> <p>11th June 2015– Initial Briefing and discussion at the GP Engagement Event, to determine key areas of transformation and action.</p> <p>25th June 2015- Governing Body Seminar: discussion and validation of emerging clinical ideas and presentation of high level plans</p> <p>June 2015 to September 2015: Public and Staff engagement.</p>

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	<p>During this time, CCG teams will continually update the emerging document to reflect emerging national and local changes, as well as feedback from stakeholder engagement events.</p> <p>10th September 2015 – GP Engagement Event, presentation of finalised plans, following engagement and review by the community and wider stakeholder group.</p> <p>26th November 2015 – Sign off at Governing Body of Final Detailed Plans.</p> <p>It is proposed that the process for arriving at a published plan will be led by an internal Task and Finish Group with a lead representative from each Directorate team: contracting and procurement; transformation; integrated commissioning; quality; patient and public engagement and finance, supported by the CCG Clinical Leads. This is to ensure that the process is live and engaging for the whole CCG, so that the Commissioning Intentions serve as a uniting strategy, not a “technical” plan alone.</p> <p>Bexley CCG intends to utilise benchmarking tools provided by NHS England to support the work of the task and finish group, and ensure that all areas for service improvement are investigated and acted upon.</p> <p>Significant progress has been made on the South East London 5-year strategy to articulate the key themes, where the 6 local commissioning organisations will work collaboratively over the coming years. Bexley CCG will ensure that the emerging Commissioning Intentions document reflects that our plans must dovetail with the emerging thinking across South East London, as well as changes expressed in the JSNA refresh and the direction of travel, as outlined by the London Health Commission.</p>	
<p>Which objective does this paper support?</p>	<p>Patients: Improve the health and wellbeing of people in Bexley in partnership with our key stakeholders</p>	<p>The Commissioning Intentions Planning Process reconfirms our Joint Health and Wellbeing Strategy priorities, as well as embedding self-management for long term conditions. It will ensure that</p>

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		integrated and collaborative commissioning with the Local Authority and fellow CCGs, as well as NHS England, is a key enabler of success. We can achieve more together than apart.
	People: Empower our staff to make NHS Bexley CCG the most successful CCG in (south) London	Organisation and Workforce Development is a key commissioning “enabler”. Our own Organisational Development Plan guides the development of our own staff and we will work closely with the Academic Health Sciences Centre and Health Education England to maximise innovation and plan for the necessary changing workforce that will support the Our Healthier South East London Strategy.
	Pounds: Delivering on all of our statutory duties and become an effective, efficient and economical organisation	It is intended that the future Commissioning Strategy will be carefully modelled and costed with numerous financial scenarios: upside, downside and base-case. Future QIPP planning will extensively modelled, tested and challenged through our Programme Management Office approach. The inclusive CCG-wide approach proposed means that financial sustainability and quality/safety will be worked on in a balanced way.
	Process: Commission safe, sustainable and equitable services in line with the operating framework and which improves outcomes and patient experience	The Commissioning Intentions plan serves as the foundation for our Operating Plan, which is a key requirement for continued assurance from

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		NHS England. Involvement of patients and the public, together with good clinical engagement will ensure that we triangulate hard and soft quality trends and build an open, enabling approach.
Organisational implications	Key risks <small>(corporate and/or clinical)</small>	
	Equality and diversity	The need to gear existing programmes and show how we intend to impact on those in greatest need. This will need considerable Equality Impact Assessment work.
	Patient impact	Taking patients with us as we continue a real shift in the healthcare model for Bexley. Patient and Public engagement continues to be essential.
	Financial	The risks are well known and the main elements that need careful negotiation are the split between CCG and NHS England in terms of shifting responsibilities within Specialised Commissioning and Primary Care, as well as the continued implementation of the Better Care Fund. There is a continued risk that increased investment will be required to implement the SEL Our Healthier SEL Strategy
	Legal issues	The CCG has a statutory duty to provide access to high quality services within the financial envelope available.
	NHS constitution	We will integrate all actions to meet Constitution standards into our mainstream plans.
Consultation (public, member or other)	<p>There is a statutory requirement to carry out wide engagement in the development of our Commissioning Intentions and, as the plans emerge, we will be continuing discussion and iteration of these plans with all our stakeholders, providers and partners.</p> <p>Although Patient and public involvement is embedded throughout the individual change programmes and projects that form our commissioning intentions, it is anticipated that engagement and consultation will be undertaken as appropriate for the broad emerging Commissioning Strategy as it is developed.</p>	
Audit	It is intended that draft versions of the plan will be shared with	

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(considered/approved by other committees/groups)	the Governing Body, Primary Care Advisory Group and the Finance Sub-Committee, so that financial and strategy plans receive the necessary scrutiny required.	
Communications plan	A wider communications plan will be developed to share emerging plans, at all key stages of document formation. It is expected that a confirmed communications plan will be shared with the first draft iteration of the document.	
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