

**Operational Plan 2019/20**

**Governing Body meeting**

**F**

**2 May 2019**

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<b>Purpose of Paper</b>	
<p>In January 2019, Governing Body approved the CCG's commissioning intentions for 2019/20. Since then, Sheffield CCG (SCCG) has submitted the 2019/20 activity plan (also known as the Operational Plan) to NHS England on 4 April 2019 following extensive contract negotiations with our key service providers.</p> <p>This paper therefore details the priorities for 2019/20 including our commitment and focus to achieve the national Constitutional Standards as well as our submitted activity plans as agreed through our contractual discussions.</p>	
<b>Key Issues</b>	
<p>Nine priority areas have been developed for 2019/20 by aligning the CCG's strategic objectives and goals, the strategic direction of the emerging revised Shaping Sheffield plan, the Accountable Care Partnership (ACP) current objectives as well as national direction in terms of the NHS Long Term Plan and the 2019/20 planning guidance.</p> <p>SCCG's transformation programmes are all aligned to these priority areas including those that also form part of the 2019/20 QIPP programme. The activity plan for 2019/20 reflects all of these priorities and programmes of efficiency.</p> <p>The key areas for focus in 2019/20 are the Constitutional Standards which are currently not being delivered: the A&amp;E four hour standard, the Cancer waiting time standards that are currently not being met and seven day follow up following discharge, for patients treated under the Care programme Approach.</p> <p>There are other key performance measures which are also priorities to improve, namely Delayed Transfers of Care; and other Mental Health service indicators such as IAPT recovery rate.</p>	
<b>Is your report for Approval / Consideration / Noting</b>	
<b>Approval</b>	
<b>Recommendations / Action Required by Governing Body</b>	
<p>Governing Body is asked to approve the activity plan (operational plan) for 2019/20 and the key priority areas that SCCG will be focussing on to deliver our objectives including</p>	

achievement of the national Constitutional Standards.

**Governing Body Assurance Framework**

***Which of the CCG's objectives does this paper support?***

- 1 To improve patient experience and access to care.
- 2 To improve the quality and equality of healthcare in Sheffield.
- 3 To work with Sheffield City Council and other partner organisations to reduce health inequalities in Sheffield.
- 4 To ensure there is a sustainable, affordable healthcare system in Sheffield.
- 5 Organisational development to ensure we meet organisational health and capability requirements.

**Are there any Resource Implications (including Financial, Staffing etc)?**

None for this paper, implications are identified in individual plans and programmes.

**Have you carried out an Equality Impact Assessment and is it attached?**

***Please attach if completed. Please explain if not, why not***

No, equality impact assessment will be undertaken for each project or programme.

**Have you involved patients, carers and the public in the preparation of the report?**

Yes, development of programmes includes patient involvement

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#### 1. Introduction / Background

- 1.1. In January 2019, Governing Body approved the CCG's commissioning intentions for 2019/20. Since then Sheffield CCG have submitted the 2019/20 activity plan (operational plan) to NHS England on 4 April 2019 following extensive contract negotiations with our key service providers.
- 1.2. Alongside meeting national requirements, the CCG needs an annual operational plan for local purposes, so that members, staff, partners and the public understand what we aim to achieve in 2019/20 and what our priorities are.
- 1.3. This paper therefore details the priorities for 2019/20 including our commitment and focus to achieve the national constitutional standards as well as our submitted activity plans as agreed through our contractual discussions.

#### 2. 2019/20 Operational Plan

- 2.1. Sheffield CCG's vision remains the same and recommits the CCG to: Reducing health inequalities and improving population health commissioning across Sheffield; Supporting primary care more and committing to partnership working including integrated commissioning across Sheffield and the wider system, all to improve the health and wellbeing of the Sheffield population:

***“By working together with patients, public and partners, we will improve and transform the health and wellbeing of our citizens and communities across Sheffield. We intend to fundamentally change the balance of healthcare provided in hospital and in the community, so that many more patients receive care closer to home when that is the best place for them”.***

- 2.2. As previously presented to Governing Body, nine priority areas have been developed for 2019/20 which will enable the CCG to deliver our objectives and vision. These priority areas are:
  - Cancer Care
  - Care Closer to Home
  - Commissioning for Quality and Safety
  - Mental Health, Learning Disability & Autism
  - Improving Patient Pathways
  - Person Centred Care
  - Primary Care Transformation
  - Sustainable and Affordable Healthcare

- Urgent Care in Primary Care

2.3. These priority areas have been developed by aligning the CCG's strategic objectives and goals, the strategic direction of the emerging revised Shaping Sheffield plan, the ACP current objectives as well as national direction in terms of the NHS Long Term Plan and the 2019/20 planning guidance.

2.4. SCCG's transformation programmes are all aligned to these priority areas including those that also form part of the 2019/20 QIPP programme whereby, as detailed within the financial plan paper, there is a target of £15.24m.

2.5. The activity plan for 2019/20 reflects all of these priorities and programmes of efficiency which is detailed in appendix 1. The change in activity level from 2018/19 is detailed in table 1 and in some activity areas shows a lower than expected level of growth due to the dedicated work in those areas in 2019/20 by both SCCG and our Providers.

Table 1: Activity difference between 2019/20 and 2018/19

Point of Delivery	Final Plan Submission % activity growth
GP Referrals	0.3%
Other Referrals	0.9%
<i>Total Referrals</i>	<i>0.5%</i>
OPFA	0.8%
OPFU	2.0%
Elective Admissions	3.7%
A&E	1.2%
NEL 0 LOS	0.7%
NEL +1 LOS	0.7%
<i>Total NEL Admissions</i>	<i>0.7%</i>

### 3. Meeting the Constitutional Standards

3.1. **Accident & Emergency:** Sheffield Children's Hospital NHS Foundation Trust (SCH) have consistently delivered the four hour standard throughout 2018/19 and this mirrors the planned trajectory for 2019/20. Sheffield Teaching Hospitals NHS Foundation Trust (STH) were unable to deliver the standard last year. The Trust has been working through their internal action plan, and the CCG is working with all partners, including Yorkshire Ambulance Service (YAS), to maximise system efficiency and patient flow. The CCG has developed a plan to reduce A&E attendances in 2019-20 as part of a wider plan for reform of unscheduled care. Therefore, the delivery of the A&E waiting time standard for adults continues to be

our most challenging issue requiring system wide co-operation and focussed action.

- 3.2. **Cancer Waiting Times:** SCCG continues to work with STH and with the South Yorkshire, Bassetlaw & North Derbyshire (SYB&ND) Cancer Alliance to address areas where additional capacity is required (personnel, equipment, theatre time) and to support STH in improving flow through the pathways, as well as working with general practice to support early detection of cancer signs and symptoms, and prompt referral.
- 3.3. **Referral to Treatment Performance:** SCCG, STH and SCH continue to surpass the 92% 18 Week Referral to Treatment standard on aggregate, SCCG have set a trajectory for 2019/20 that reflects the national standard of 92%. Therefore, SCCG remain in a strong position on delivery of this target, with some of the best performance in England.
- 3.4. **Diagnostic 6 Week Waiting Times:** STH and SCH consistently achieved the standard in the last part of the year and this is planned to continue throughout 2019/20.
- 3.5. **Seven day follow up after discharge from mental health inpatient care:** This standard was not delivered consistently every month in 2019/20 which is partly due to a significant increase in referrals. SCCG continues to work closely with SHSC in which all breaches are reviewed and lessons are identified and implemented. SCCG will continue to support Sheffield Health & Social Care NHS Foundation Trust (SHSC) with service improvement and achievement of the target.
- 3.6. **Fifty percent of people referred for Early Intervention in Psychosis should be seen within two weeks:** This target is being met at Trust and CCG level and the trajectory is to continue achieving this in 2019/20.
- 3.7. **Improving Access to Psychological Therapies (IAPT):** Sheffield is meeting the two standards for treatment waiting times and for the expected level of access to treatment (as compared to estimated need). We do not consistently meet the 50% recovery rate standard, although most months we are very close. Our service sees patients with more complex needs than the national model, and caseloads are large. The CCG is in dialogue with SHSC about a new service offer, based in neighbourhoods, in order to respond to the increasing numbers of mental health referrals and which would support IAPT.
- 3.8. **Ambulance Times:** YAS are making steady progress towards delivery of the new national standards across Yorkshire. Work continues on modernising fleet, recruiting and training staff, and looking at workforce development and new models. Good progress is being made on See and Treat and Hear and Treat.
- 3.9. The key areas for focus in 2019/20 are therefore the Constitutional Standards which are currently not being delivered:
  - **Urgent and Emergency Care:** Our system leadership role includes oversight of all factors which impact the standard, eg alternatives to A&E (including 111, See and Treat / Hear and Treat, Primary Care Hubs, Advice in pharmacy); preventing unnecessary admissions, and patient flow. System

wide reform and redesign, including same day emergency care, seven day services.

- **Delayed Transfers of Care:** System leadership continue to address this key focus area across Sheffield.
- **Cancer:** The waiting time standards that we are not consistently achieving are a key priority with the SYB&ND Cancer Alliance and STH working together to address the gaps in capacity and improve pathways. This includes with member practices to address the first part of the cancer pathway.
- **Mental Health Service Measures:** We will continue to focus on improving consistency of delivery of all our mental health measures such as IAPT recovery times.

#### **4. Action / Recommendations for Governing Body**

Governing Body is asked to approve the activity plan (operational plan) for 2019/20 and the key priority areas that SCCG will be focussing on to deliver our objectives including achievement of the national Constitutional Standards.

Paper prepared by Sandie Buchan, Deputy Director of Commissioning and Performance

On behalf of Brian Hughes, Director of Commissioning and Performance

April 2019

Appendix 1: 2019/20 Activity Plan

Activity Line	CCG Adjusted 18/19 FOT	19/20 Annual Plan	Forecast Growth from CCG Adjusted 18/19 FOT to 19/20 Plan
<i>Total Referrals (General and Acute)</i>	215345	216486	0.5%
Total GP Referrals (General and Acute)	131942	132373	0.3%
Total Other Referrals (General and Acute)	83403	84113	0.9%
Total Consultant Led Outpatient Attendances	675100	685509	1.5%
Consultant Led First Outpatient Attendances	242192	244030	0.8%
Consultant Led Follow-Up Outpatient Attendances	432908	441479	2.0%
Consultant Led Outpatient Procedures	129826	132294	1.9%
<i>Total Elective Admissions</i>	<i>81869</i>	<i>84929</i>	<i>3.7%</i>
Total Elective Admissions - Day Cases	71227	73186	2.8%
Total Elective Admissions - Ordinary	10642	11743	10.3%
<i>Total Non-Elective Admissions</i>	<i>55779</i>	<i>56187</i>	<i>0.7%</i>
Total Non-Elective Admissions - 0 LoS	13588	13687	0.7%
Total Non-Elective Admissions - +1 LoS	42191	42500	0.7%
<i>Total A&amp;E Attendances excluding Planned Follow Ups</i>	<i>208354</i>	<i>210863</i>	<i>1.2%</i>
Type 1 A&E Attendances excluding Planned Follow Ups	174061	175306	0.7%
Other A&E Attendances excluding Planned Follow Ups	34293	35557	3.7%
Number of Completed Admitted RTT Pathways	31425	31425	
Number of Completed Non-Admitted RTT Pathways	122142	122141	
Number of New RTT Pathways (Clockstarts)	201282	201284	