

2020/21 Revised Operational Plan**Governing Body meeting****D****5 November 2020**

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Purpose of Paper	
<p>In February and March 2020, Governing Body received and approved the CCG's Commissioning Intentions and Operational Plan for 2020/21. Since then, the country has been through and continues to experience the challenges of the COVID-19 pandemic. As a result, Sheffield CCG's plans for 2020/21 were put on hold and have recently been through a process to ensure that they continue to be fit for purpose.</p> <p>This paper details the process that has been undertaken to ensure the objectives, priorities and commissioning intentions continue to meet the needs of the Sheffield population as well as meet national requirements. The full operational plan is submitted alongside this paper but will be presented as a live document that will adapt to any changes that are driven and agreed either nationally or locally as circumstances change with the pandemic.</p>	
Key Issues	
<p>The overarching strategy of Sheffield CCG remains fit for purpose and recognises the new challenges and requirements during the current phase of the COVID-19 pandemic. It is appreciated that whilst an operational plan can be developed, the changing landscape of the NHS will require the plan to be a live document that flexes and changes as things progress.</p> <p>As this paper was written, the level of demand on health and care services was increasing and priorities were being identified to ensure both urgent patients were being seen as well as managing increasing numbers of COVID positive patients that required hospitalisation. Once approved, this operational plan will drive the work of the CCG, however will take into account that priorities will change and pieces of work may stop/start during the continuation of the COVID-19 pandemic.</p>	
Is your report for Approval / Consideration / Noting	
Approval	

Recommendations / Action Required by Governing Body
<p>The Governing Body is asked to:</p> <ul style="list-style-type: none"> • Approve the operational plan and the detailed priorities for the remainder of 2020/21, whilst acknowledging that the plan will flex and adapt alongside the changing landscape of the NHS.
What assurance does this report provide to the Governing Body in relation to Governing Body Assurance Framework (GBAF) objectives?
<p>Which of the CCG's Objectives does this paper support?</p> <p>This paper supports the achievement of all of the CCG's objectives.</p> <p>Description of Assurances for Governing Body</p> <p>This paper provides assurance to the Governing Body that there has been a thorough process for the CCG to review and confirm its operational plan for 2020/21. There is also a business planning process in place to monitor the delivery of our plan against the agreed strategic objectives.</p>
Are there any Resource Implications (including Financial, Staffing etc)?
Yes, a focus of clinical and managerial time to deliver the business planning objectives.
Have you carried out an Equality Impact Assessment and is it attached?
An EIA will be completed for each individual programme during the development stage.
<i>Have you involved patients, carers and the public in the preparation of the report?</i>
Feedback from a variety of people has been included within the development of the plan and will continue to inform ongoing priorities moving forwards.

2020/21 Revised Operational Plan

Governing Body meeting

5 November 2020

1. Introduction

- 1.1. In February and March 2020, Governing Body received and approved the CCG's Commissioning Intentions and Operational Plan for 2020/21. Since then, the country has been through and continues to experience the challenges of the COVID-19 pandemic. As a result, Sheffield CCG's plans for 2020/21 were put on hold and have recently been through a process to ensure that they continue to be fit for purpose.
- 1.2. This paper details the process that has been undertaken to ensure the objectives, priorities and commissioning intentions continue to meet the needs of the Sheffield population as well as meet national requirements. The full operational plan is submitted alongside this paper but will be presented as a live document that will adapt to any changes that are driven and agreed either nationally or locally as circumstances change with the pandemic.

2. NHS Landscape

- 2.1. The timeline below details the actions that were set out for the NHS over the course of 2020 to date:
- 2.2. On 30th January 2020, the first phase of the NHS's preparation and response to COVID-19 was triggered with a declaration of a Level 4 National Incident.
- 2.3. On 17th March 2020, the NHS was asked to redirect staff and resources to tackle the COVID-19 pandemic with specific actions alongside the national major incident plan.
- 2.4. On 29th April 2020, the second phase of NHS response to COVID-19 was announced and set out the broad operating environment and approach that the NHS would work within moving forwards.
- 2.5. On 31st July 2020, NHS England and NHS Improvement set out the third phase of the NHS response to COVID-19. The phase three response detailed a set of priorities for the rest of 2020/21 that not only meets the new needs and challenges of overcoming the current COVID-related capacity constraints, but also ensures the NHS restores non-COVID health services.
- 2.6. The priorities within the phase three document are:

- Accelerating the return to near-normal levels of non-COVID health services, making full use of the capacity available in the ‘window of opportunity’ between now and winter.
 - Preparation for winter demand pressures, alongside continuing vigilance in the light of further probable COVID spikes locally and possibly nationally.
 - Doing the above in a way that takes account of lessons learned during the first COVID peak; locks in beneficial changes; and explicitly tackles fundamental challenges including: support for our staff, and action on inequalities and prevention.
- 2.7. A number of activity plans were submitted to NHSE/I that detailed how elective activity will return to pre-COVID levels over the coming months. These were developed alongside our colleagues in both primary and secondary care, ensuring a Sheffield place response was submitted.
- 2.8. On 24 October 2020 Sheffield, along with the other South Yorkshire areas, was placed in the national tier 3 category due to the increasing number of COVID positive cases and the subsequent strain on health and care services.
- 2.9. Therefore, as this paper was written, the level of demand on health and care services was increasing and priorities were being identified to ensure both urgent patients were being seen as well as managing increasing numbers of COVID positive patients that required hospitalisation. Once approved, this operational plan will drive the work of the CCG, however will take into account that priorities will change and pieces of work may stop/start during the continuation of the COVID-19 pandemic.

3. 2020/21 Operational Plan

- 3.1. A process has been undertaken over the past few months to ensure that the overarching strategy of Sheffield CCG remains fit for purpose and recognises the new challenges and requirements during the current phase of the COVID-19 pandemic. It is appreciated that whilst an operational plan can be developed, the changing landscape of the NHS will require the plan to be a live document that flexes and changes as things progress.
- 3.2. The vision of Sheffield CCG remains the same:

“Working with you to make Sheffield healthier”

With the objectives of the CCG detailing how we work with our patients, public partners and staff to achieve our vision:

- Reduce the impact of health inequalities on peoples’ health and wellbeing through working with Sheffield City Council and partners
- Lead the improvement of quality of care and standards
- Bring care closer to home
- Improve health sustainability and affordability
- Be a caring employer that values diversity and maximises the potential of our people

3.3. Refreshing the operational plan also included ensuring the challenges that were originally identified in order for the CCG to focus on addressing were also reviewed. These are detailed within the Operational Plan alongside the commissioning principles in which we will seek to fulfil our role as health commissioners.

3.4. The phase three letter clearly details priorities that all NHS organisations will focus on for the remainder of 2020/21. However, all health and care organisations across Sheffield are working collaboratively to ensure these priorities are delivered alongside locally agreed priorities. Sheffield CCG's commissioning intentions have therefore been reviewed with the following in mind:

- Identified commissioning implications arising from COVID and its consequences
- Prioritisation of commissioning intentions to include the priorities within the phase three letter and include a greater weighting on reducing health inequalities
- The agreed ACP near term priorities are embedded within our commissioning work and addresses inequalities across the health and care system in Sheffield.
- Delivering local outcomes and national requirements including those detailed within the NHS Long Term Plan alongside our joint commissioning colleagues at Sheffield City Council
- Identified areas of wider ICS system delivery across South Yorkshire & Bassetlaw

3.5. Appendix 1 details the full operational plan for 2020/21.

3.6. The operational plan is divided into six chapters:

Chapter 1: NHS Sheffield CCG: Who we are, and what we do

Chapter 2: Our response to COVID-19

Chapter 3: Restoring services & building resilience

Chapter 4: Our highest priorities for quality and safety in the remainder of 2020/21

Chapter 5: Our Commissioning Intentions for 2020/21

Chapter 6: Being a caring employer that values diversity and maximises the potential of our people

Each chapter details what our priorities are for the remainder of 2020/21.

3.7. It is important to recognise that Sheffield CCG staff have responded flexibly and with enthusiasm to the most challenging of circumstances over the past few months and have achieved some great things for the people of Sheffield. Everybody has contributed to the success of the CCG adapting to working very differently, supporting primary care and our partners across the city, and learning new skills so quickly as a result of the COVID pandemic. This has been recognised throughout our operational plan and the chapter 'Our response to COVID' in particular.

4. Recommendations

4.1 The Governing Body is asked to:

- Approve the operational plan and the detailed priorities for the remainder of 2020/21, whilst acknowledging that the plan will flex and adapt alongside the changing landscape of the NHS.

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November 2020