# HILLINGDON CCG OPERATING PLAN 2015-16

| Relevant Board<br>Member(s) | Dr Ian Goodman                                      |
|-----------------------------|---|
| Organisation                | Hillingdon Clinical Commissioning Group             |
| Report author               | Mark Eaton: Interim Head of QIPP and Transformation |
| Papers with report          | None  |

## **1. HEADLINE INFORMATION**

| Summary   | Following the planning guidance given in the NHS document "Everyone<br>Counts" (covering the period from 2014-18), the Clinical Commissioning<br>Group (CCG) developed and agreed a five year strategic plan in 2014.<br>The five year strategic plan is aligned with the Simon Steven's Five Year<br>Forward View released in 2014.  |
|---|---|
|   | At the same time, the CCG agreed with the Health and Wellbeing Board<br>an Operating Plan that set trajectories for a range of key performance<br>areas for the first two years of the five year strategy.  |
|   | This paper introduces the changes that are being made to the Operating Plan for 2015/16. The Operating Plan for 2015/16 is in the process of being developed with additional information being added at each submission based on a timetable set by NHS England (NHSE). The information below summarises the information in the Operating Plan for 2015/16 as at the February 2015 submission date. |
|   |   |
| Contribution to plans                               | JSNA<br>Hillingdon Hoolth and Wallhoing Stratogy  |
| and strategies                                      | Hillingdon Health and Wellbeing Strategy<br>Hillingdon CCG Out of Hospital Strategy   |
|   | NWL 5 Year Strategic Plan   |
|   |   |
| Financial Cost                                      | NA  |
|   |   |
| Relevant Policy<br>Overview & Scrutiny<br>Committee | External Services   |
|   |   |
| Ward(s) affected                                    | All   |

## 2. **RECOMMENDATION**

That the Health and Wellbeing Board notes and agrees the proposed performance for the Operating Plan for 2015/16.

#### 3. INFORMATION

Following the planning guidance given in the NHS document "Everyone Counts" (covering the period from 2014-18), the Clinical Commissioning Group (CCG) developed and agreed a five year strategic plan in 2014. This strategic plan was produced in partnership with other CCGs across North West

London (NWL) reflecting both the common issues that exist in a number of service areas and also to capture the level of shared work that is occurring across the NWL area on key strategic programmes such as the Shaping a Healthier Future (SaHF) acute reconfiguration programme. The five year strategic plan is aligned with the Simon Steven's Five Year Forward View released in 2014.

At the same time, the CCG agreed with the Health and Wellbeing Board an Operating Plan that set trajectories for a range of key performance areas for the first two years of the five year strategy.

This paper introduces the changes that are being submitted to the Operating Plan for 2015/16 and these are detailed below. The Operating Plan for 2015/16 is in the process of being developed with additional information being added at each submission based on a timetable set by NHS England (NHSE). The information below summarises the information in the Operating Plan for 2015/16 as at the February 2015 submission date.

Generically, we have made provision for a 3% growth in activity across the board. This exceeds the current demographic growth that is projected within the JSNA to be 1.6% and reflects our expectation that demand for services will continue to exceed demographic growth as we have seen in both 2013/14 and 2014/15.

### Key Performance Standards

- **Referral To Treatment Targets**: The CCG expects to continue to exceed the 95% target for patients treated within 18 weeks of referral for non-admitted pathways and the 90% target for admitted pathways.
- **Cancer Waits**: The CCG is expected to continue to exceed the 93% target for patients waiting less than two weeks for an initial review following presentation with symptoms suggesting cancer. We also expect to exceed the minimum standards for patients waiting 31 and 62 days for treatment following diagnosis.
- **4 Hour Standard in A&E:** We expect to achieve the 95% performance target for patients waiting 4 hours or less prior to discharge or a decision to admit following presentation at the UCC or Emergency Department in all four quarters of 2015/16 recognising this will be challenging given recent increases in activity.
- Mental Health (Dementia): The CCG is increasing funding for Dementia Diagnosis and expects to achieve the 67% expected prevalence target for 2015/16. The scope of this has reduced from patients aged 30+ to only focusing on those aged 65+ and the 67% target defines the number of patients diagnosed with dementia each month against the expected prevalence of dementia in Hillingdon.
- **Mental Health (IAPT):** The CCG is also increasing the funding available for IAPT Services (Improving Access to Psychological Therapies) to ensure we are able to hit the 15% access target. This target means that the CCG will support 15% of those with conditions amendable to IAPT during the year. Aligned to this, the CCG expects to achieve a recovery rate (i.e., the percentage of patients working with IAPT who are deemed to have improved their condition) of at least 50% and will ensure that no less than 95% of patients are able to access support from IAPT within 6 weeks of referral.
- **Primary Care:** For the first time, the CCG is asked to report on how it expects Primary Care qualitative indicator scores to change during the year. The indicators relate to access to general practice and the experience of care. This is related to the evolving concept of Joint Commissioning. The CCG currently has not put forward a target and is working with colleagues across NWL to understand the implications of Joint Commissioning and our shared ambition for how these indicators will improve.

Later presentations of the Operating Plan will have details of the expected Quality Premium for 2015/16 and the CCG is currently developing the plans for where this work will be focused.

Achievement against national and local priorities is monitored at least quarterly by NHS England.

### 4. FINANCIAL IMPLICATIONS

None.

## 5. LEGAL IMPLICATIONS

NA

## 6. BACKGROUND PAPERS

NHS planning guidance 2014-2018 "Everyone Counts"