

## Operational Plan 2019/20 Summary

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### Overview

The CCG has developed an Operational Plan for 2019/20 which outlines our programmes and priorities for the next 12 months. These are focused on delivering the aims of the *NHS Five Year Forward View* of better health, better care and lower costs. These plans also align to the implementation of the *NHS Long Term Plan* and the Birmingham and Solihull Sustainability and Transformation Plan.

### Improving outcomes for our neighbourhoods

The *NHS Long Term Plan* has a strong focus on prevention, the wider determinants of health and wellbeing and digital transformation. To support the delivery of this, we will develop into an Integrated Care System over the next few years. This means NHS organisations, in partnership with local councils and others, will take collective responsibility for managing resources, delivering NHS standards and improving the health of the population they serve. In practice, this will mean:

- Understanding people's specific needs in different parts of Birmingham and Solihull
- Using our collective resources to best meet these specific needs
- Working together as one organisation to meet demands for care.

This year's Operational Plan reflects some of the changes we need to make to become an Integrated Care System.

### Programme Plans and Priorities

The following is an outline of our priorities for 2019/20 and what this means in practice for our communities in Birmingham and Solihull.

#### Primary Care

- Improve GP access through the development of Primary Care Networks covering populations of 30,000-50,000. This will help patients have better access to GPs and an extended range of services available to them. It will also integrate GP practices with other health services.
- Continue with service improvements in diabetes/ respiratory disease treatment and support.
- Support GPs and patients to deliver the Universal Offer, which will ensure a consistent range of GP-based services are available across Primary Care for our population through a single contract with GPs across Birmingham and Solihull

- Ensure co-ordinated and timely end of life care and support is available in a location that supports the individual and their family/carers.
- Improve the diagnosis rate for people with dementia by working with care homes and GPs and increase access to navigation services for individuals and families/carers. This will help all people, and in particular Black, Asian and Minority Ethnic communities, get the wider health, care and social support they need when diagnosed or living with dementia.
- Deliver social prescribing support and prevention to promote wellbeing. This is a way for local agencies to refer people to a link worker who will give them time, focusing on what matters to them. The link workers then connect people to community groups and statutory services for practical and emotional support.

### **Urgent and Community Care**

- Develop the High Intensity Service Users service to achieve a safe reduction in the frequent number of calls and ambulance transfers to A&E through improved support at home.
- Improve assessments for elderly patients and reduce avoidable hospital admissions by working with a wider range of health and care professional as part of the Older People Assessment and Liaison service. This will ensure an appropriate package of care is in place.
- Develop Urgent Treatment Centres to support patients who need urgent medical attention but are not faced with a life-threatening situation. Conditions that can be treated at an urgent treatment centre include: sprains and strains, suspected broken limbs and minor head injuries.
- Develop intermediate care to help patients with short-term support so they can increase their independence and reduce the risk of a fall.
- Work with Care Homes to reduce avoidable admissions to hospital.

### **Personal Health Budgets**

- Deliver Personal Health Budgets to give greater choice and control for patients where possible and move to greater personalised care that meets the needs of the individual.

### **Mental Health**

- Increase access to mental health services and focus on people's wider mental, physical and social needs. This will include increased physical health checks for people experiencing mental ill-health, improved access to voluntary sector services that help address the social causes of poor mental health and increased access to psychological therapies.
- Re-design the support for all-ages who experience a mental health crisis, which will include a mental health urgent and hospital services for children and adults. This will reduce the number of people sectioned under the Mental Health Act by working in a way that identifies and deals with people at the earliest point possible.

- Transform re-ablement and recovery services when discharged from hospital and ensure all patients have a person-centred discharge plan.
- Work together with partners across Birmingham and Solihull to develop seamless care for children and adults and in turn reduce waiting times, ensure people can access high quality mental health support when they need it and prevent suicides wherever possible.

### **Children, Young People and Maternity**

- Develop an enhanced and targeted service for the most vulnerable mothers and babies. This will include implementation of a specialist peri-natal mental health service across Birmingham and Solihull.
- Deliver a social care and GP education programme to reduce avoidable hospital admissions and referrals for children and young people.
- Ensure consistent services are in place across Birmingham and Solihull for consultant paediatric advice services, guidance services and integrated care teams.
- Review the Children's Community Rapid Response service and neuro-rehabilitation pathways for potential re-commissioning.

### **Special Education Needs and Disabilities**

- Work with a range of partners to ensure there is a smooth transition from young people's services to adult services.
- Improve health input into education health and care plans to improve outcomes for people.
- Improve access to therapies – occupational, physiotherapy, speech and language to support individuals and their families/carers.

### **Cancer**

- Deliver cancer targets and faster diagnosis through early detection/screening and improved referral processes.
- Improve access and uptake for breast, bowel and cervical cancer screening for people from Black, Asian and Minority Ethnic Groups and vulnerable adults.
- Implement Personalised Cancer Care for breast, colorectal and prostate cancer.

### **Planned Care (Elective Care)**

- Deliver the referral-to-treatment targets for all planned care services.
- Deliver transformation in musculoskeletal services covering orthopaedics, pain management, spinal/back and rheumatology.
- Deliver transformation in eye health and reducing sight loss for all main eye conditions.
- Deliver transformation in outpatients through enhanced GP advice and guidance support and digital solutions. This will provide patients with virtual follow-up appointments and clinics with consultant advice available through GPs. Over time,

this will significantly reduce the need for patients to attend outpatients in a hospital setting with care closer to home.

### **Continuing Health Care & Children & Young People's Continuing Care**

- Improve the overall service provided to people who need continuing health care or continuing care, which will include assessments and reviews.
- Ensure that patients are supported home first where appropriate with reduced delayed transfers of care from hospital to another setting.
- Roll out greater personalisation and support through Personal Health Budgets.

### **Learning Disabilities and Autism**

- Reduce reliance on inpatient care for people with learning disabilities/ autism working with housing and care providers.
- Improve annual health checks for people with a learning disability and improve uptake of Personal Health Budgets.
- Reduce premature mortality by improving access to health services, staff training and making reasonable adjustments to improve quality of life for people with learning disabilities and autism.

### **Medicine Management and Optimisation**

- Deliver the cost improvement plan, NHS England Medicines Value Programme relevant to primary care, polypharmacy reviews, medicines waste reduction and support for the Universal Patient Offer.

### **Improving Quality**

- Develop a quality strategy to underpin our approach to quality, safety and improve outcomes for patients.
- Implement system wide learning from serious incidents and 'never events'.

### **Estates and Digital Transformation**

- Review the number of vacant properties to reduce costs where possible.
- Digital transformation including NHS network, patient apps and other software development to support digital local health care records.

### **Further information**

If you would like more information on the priorities in this year's Operational Plan, please see the full document on the website.

If you have queries about the Plan, please contact the PMO Office on [nhsbsolccg.planningpmo@nhs.net](mailto:nhsbsolccg.planningpmo@nhs.net).