

# Bromley CCG

Strategic and  
Operational Plans  
2014 - 19

# Planning Requirements

- SE London 5 year Strategic Plan, by 30 June
- Bromley 2 year Operating Plan, by 4 April
- Better Care Fund Plan, by 4 April
  
- In addition, in order to inform the other requirements, Bromley is refreshing its 5 year Strategic Plan, by 4 April

# Bromley Strategic Plan 2014 - 19

- JSNA
- Health and Well Being Strategy
- Priority Health Outcomes
- Benchmarking
- Stakeholders and Engagement
- Vision
- Plan on a Page

# JSNA

- Currently being updated, latest JSNA is 2012
- Separate needs assessment commissioned to support the development of services in Orpington
- Key Issues from JSNA:
  - More complex health and social care needs
  - Diabetes rose sharply (5.2% prevalence)
  - Hypertension prevalence high (17.2%)
  - Smoking prevalence slightly lower than average at 17.8%
  - Obesity amongst reception year and year 6 children has increased
  - Number of people on the mental health register rose sharply to 2616
  - Dementia prevalence constant over the last six years

# Health and Well Being Strategy

Priority setting exercise identified the following areas as a high burden and worsening:

- Diabetes
  - High Blood Pressure
  - Obesity
  - Anxiety/Depression
  - Dementia
- CYP Complex Needs
  - CYP Mental Health/Emotional
  - CYP Referrals Social Care
  - Support for Carers

# Priority Health Outcomes

- Securing additional years of life
- Improving health related quality of life for people with long term conditions
- Reducing time spent avoidably in hospital
- Increasing proportion of people living at home independently following discharge from hospital
- Increasing the number of people having a positive experience of hospital care
- Increasing positive experience of care outside hospital
- Eliminating avoidable deaths in hospitals caused by problems in care

# Benchmarking

- Benchmarking studies and data packs reviewed, with key messages:
  - High level of excess winter deaths
  - High level of Ambulatory Care Sensitive conditions
  - High level of GP referrals for planned care
  - High volume of ‘less effective’ procedures
  - High prescribing spend
  - High standardise hospital mortality index
  - Poor outcomes in mental health

# Stakeholders and Engagement

- Call to Action engagement
  - National and local structured engagement
  - Local focus on long term conditions, integrated care, self management
  - Focus groups (eg Beckenham Beacon planning)
  - Engagement events with LBB (eg Adult Care)
  - National collation of exercise
- Engagement with providers
- Review by GP members

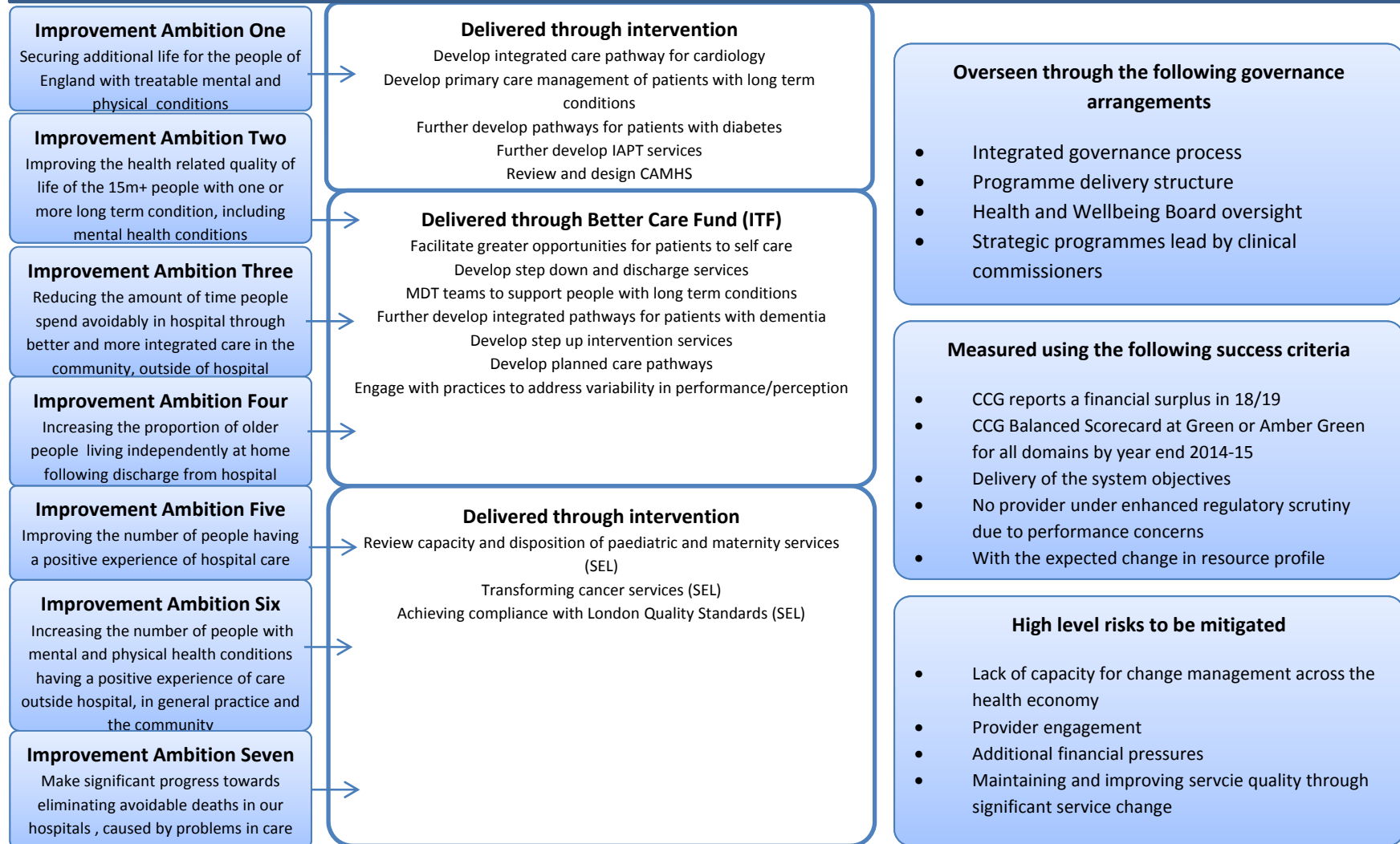


# Vision

- Better Health
  - Improve health outcomes and reduce health inequalities across Bromley
- Better Care
  - Transform the landscape of healthcare, by developing partnerships, leading to an integrated healthcare system with improved access and quality
- Better Value
  - Create a sustainable health economy reinforced through collaborative working

# Bromley CCG – Plan on a Page 2014 - 19

NHS Bromley Clinical Commissioning Group’s vision is to:  
 Improve health outcomes and reduce health inequalities across Bromley  
 Transform the landscape of healthcare, by developing partnerships, leading to an integrated healthcare system with improved access and quality  
 Create a sustainable health economy reinforced through collaborative working



# Operational Plan 2014 - 16

- Improvement Interventions
- Financial Plan
- QIPP Plan 2014 -16

# Improvement Interventions

- Integrated care pathways for Cardiology and Diabetes
- Integrated teams to support care management of patients with long term conditions
- self care and telehealth support for patients with long term conditions
- Development of mental health intervention services
- Change in the balance of mental health delivery from a hospital to community based focus
- Integrated alternatives to unscheduled hospital admission
- Integrated support for early discharge
- more community based care pathways for planned services
- Strengthen maternity services
- Improve end of life care
- Capacity, capability and effectiveness of primary care providers

# Financial Plan

- Requirement to plan for 1% recurring surplus and 2% non recurring fund
- Demographic growth around 0.5% per annum
- Growth allocation 3.8% in 2014-15
- CCG additional contribution to the Better Care Fund is £13.2m over the next two years
- QIPP requirement is £12m for each of the next two years

# QIPP Plan

- Full year effect of schemes in progress (£5.3m)
- Major transformational schemes (£4.9m)
  - Care pathway redesign
  - Referral management
  - Integrated care for long term conditions
  - Shift from inpatient to community for mental health
  - Develop alternatives to unscheduled hospital admission
- Good Housekeeping schemes (£1.8m)

# Risks

- Impact of further acute reconfiguration
- Acute overperformance
- Impact of new services on prescribing patterns
- Overperformance in continuing healthcare
- Continuing healthcare retrospective reviews
- Constraints on running costs
- Market forces factor adjustments