

Strategy templates 2014/15 – 2018/19







Strategy templates

Part of the set of templates that support Everyone counts: Planning for patients 2014/15 – 2018/19

First published: 19 December 2013

Introduction:

A strategic plan differs from an operational plan in many ways; it should be short, focussed and describe in a motivational way the direction of the organisation (s) that have signed up to it. It describes to those outside the system what the system plans to achieve in a way that informs and engages. It provides the basis for further detailed planning and should stimulate change in a system. That said, the strategic plan must also be realistic and attainable, to allow those within the system to understand and align with the strategic vision whilst working at all operational levels.

It is essential for these plans to be at the forefront of the planning process; they set the vision, ambitions and framework against which the two year detailed operational plans will be set. To help the submission of attainable and ambitious plans, templates have been developed that we hope are simplistic, flexible and helpful to commissioners and health systems generally.

What are we asking for?

Strategic planning should include the following elements:

- A long term strategic vision
- An assessment of the current state and current opportunities and challenges facing the system
- A clear set of objectives, that include the locally set outcome ambition metrics
- A series of interventions that when implemented move the health system from the current position to achieving the objectives and implementing the vision

Each strategic plan needs to be tested against the six characteristics of a sustainable health and care system (outlined below and from page 10 of *Everyone Counts*) ensuring that it reflects the needs of local citizens, the conclusions of local Call to Action conversations and informed by modelling tools such as Any town.

The structure of the submission has two core sections that we are asking to be completed and returned to us, in accordance with the timelines issued separately. These sections are a plan on a page and a key lines of enquiry submission – the strategic template will be deemed incomplete unless both sections are returned.

- 1. A *system* wide description of what the health economy should look like in five years. This system vision should identify how the health system will shape itself to meet future health demands without compromising quality outcomes or financial sustainability –the <u>plan on a page</u> is a helpful approach to describing this vision and a draft guide has been included in Appendix A.
- 2. A unit of planning¹ specific narrative describing how each organisation would reach this desired state through a high level road map that captures the high impact interventions planned within the health economy. This narrative takes the form of <u>a key lines of enquiry submission</u>. While this Strategy template looks for a narrative, this narrative must relate to, and underpin, the five year plans submitted in the related templates covering finance, activity and outcomes. To reduce duplication we have not asked for this material to be repeated in this document. In addition, the two year operational plans need to be consistent with the strategic direction set out here and triangulation across these various elements will be part of the assurance process.

This template contains the requirements of both sections of the template.

¹ The unit of planning will be determined by CCGs in accordance with letter issued on 04 November 2013

Section one | System narrative plan on a page- See attached 5 year strategy plan document and additional comments for Section Two- Key Lines of Enquiry

The plan on a page should have stakeholder sign up to its goals at a local health economy level. It should include the following characteristics:

Segment	Covering:	Supported by:
1. System vision	A statement describing what the desired state would be for the health economy in 2018/19 – this should ideally describe the health and care system rather than an individual organisation view – and which accounts for the six characteristics of a high quality, sustainable health and care system	See 5 year strategy
2. Improving quality and outcomes	 A) Looking at the seven improving outcome ambitions identified in <i>Everyone Counts</i>: planning for patients, how does the health economy plan to improve these and where appropriate, what level of improvement does it expect? 	See 5 year strategy
	B) What other local quality improvement plans are in place and how do these align with the local strategic needs assessments?	See 5 year strategy
3. Sustainability	In five years, what are the health economy goals for sustainability including reference to financial position, other resources and points of service delivery. This work should reference the do nothing gap calculated for the system by 2018/19 that aligns to the challenges identified in A Call to Action ²	See 5 year strategy
4. Improvement interventions	To achieve the desired end state what are the key improvement interventions planned at an organisational level and how will these deliver the quality and sustainability outcomes required?	See 5 year strategy
5. Governance overview	A summary of the governance processes in place to oversee the delivery of the plans, including high level description of what success looks like and who is responsible for measuring it	See 5 year strategy
Key values and principles	A summary of the agreed values and principles that underpin the system wide working required to deliver the vision	See 5 year strategy

As part of the assurance process, the plans on a page will be reviewed to understand alignment to detailed organisational metrics submitted through the operational and financial templates.

Examples of plans on a page are available separately

² <u>http://www.england.nhs.uk/2013/07/11/call-to-action/</u>

Section Two | Key lines of enquiry (KLOE)

The following table template asks key lines of enquiry and contains space for the organisation to add their responses.

Segment	Key Line of Enquiry	Organisation Response	Supported by:
Submission details	Which organisation(s) are completing this submission?	NHS Eastern Cheshire Clinical Commissioning Group	
	In case of enquiry, please provide a contact name and contact details	Mike Purdie - Governance Manager – Tel 01625 663470 email: mike.purdie@nhs.net	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
a) .System vision	What is the vision for the system in five years' time? ;	Caring together	
		'Caring together': Joining up local care for all our wellbeing	
		Over the last 18 months local commissioners and providers have united behind a common vision and purpose of transforming care services in Eastern Cheshire. This has been driven by a shared desire to join up care, improve outcomes and our citizens experience of care whilst responding to increasing clinical and financial sustainability challenges within an environment of one of the fastest ageing populations in England.	
		Quite simply, the transformation programme, called Caring Together is about organisations and people working together to make care as straightforward and integrated (joined up) as possible	
		 Our local clinical, health and social care partners believe that: People in Eastern Cheshire deserve services that are high quality and delivered as locally as possible. 	
		• Patients should sit at the heart of a proactive care system centred on them.	
		• Carers are one of the most important resources which allow people to be independent and believe that they need to be supported to provide this care.	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
		 Local people should be supported to take responsibility for their own health as much as possible. 	
		Over the next 5 years the Caring Together programme will achieve this vision through the commissioning of a radical and innovative new care system built on 4 environments of care, and delivered through each of the following elements;	
		 Transformation of Primary Care (in partnership with NHS England CWW Area Team and our involvement in the Challenge Fund) Development of a new Integrated Community care model (Whole system partnership in Eastern Cheshire and aligned to the Connecting Care across Cheshire Pioneer programme and the Better Care Fund). Reconfiguration of acute care (in partnership with the Greater Manchester Healthier Together programme & the "Challenged Economy" initiative) A range of Productivity initiatives to underpin the transformation programme. 	
		 The four environments of care include; The empowered person – Proactive empowerment of individuals to take responsibility for their own health Community provided care – Fully integrated and coordinated community care provided by multiprofessional teams Local specialist care – High quality specialist care delivered with a reasonable distance from peoples home Regional specialist care – Highly trained specialists delivering world-class care from centres of regional excellence. 	
		What do we want to achieve over the next 5 years? Our ambitions for the future can be summarised as being to:	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
		Increase the number of people having a positive experience of care	
		□ Reduce the inequalities in health and social care across Eastern Cheshire	
		Ensure our citizens access care to the highest standards and are protected from avoidable harm	
		□ Ensure that all those living in Eastern Cheshire should be supported by new, better integrated community services	
		Increase the proportion of older people living independently at home and who feel supported to manage their condition	
		Improve the health-related quality of life of people with one or more long term conditions, including, mental health conditions	
		Secure additional years of life for the people of Eastern Cheshire with treatable mental and	
	 How does the vision include the six characteristics of a high quality and sustainable system and transformational service models highlighted in the guidance? Specifically: 1. Ensuring that citizens will be fully included in all aspects 	<u>Engagement of our Citizens</u> The Caring Together programme has from its inception maintained a strong ethos of citizen engagement. All of our clinical design groups have public representation and the Caring Together Executive Board includes public representatives.	
	of service design and change, and that patients will be fully empowered in their own care 2. Wider primary care, provided	The CCG has recently launched " <i>Caring Together - Seizing the opportunity for better care: Join the Conversation</i> ," This is a local call to action to everyone in Eastern Cheshire to work with us to address many of the challenges we face in striving to provide health and care services that meet the needs of our population.	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
	 at scale A modern model of integrated care Access to the highest quality urgent and emergency care A step-change in the productivity of elective care Specialised services concentrated in centres of excellence (as relevant to the locality) 	This is the start of a conversation with the public, which will be running until the end of April, after which we will be feeding their views into a consultation exercise that will take place later in the year. As a well as listening to the public, we will be talking to a wide range of other interested parties, including staff, clinicians, partners in the voluntary and independent sectors, patient groups and sections of the community with particular interests or needs. <i>Wider Primary care provided at Scale</i> Utilisation of community assets and empowering people to effectively engage with a managed primary care delivery model in partnership with NHS England CWW Area Team and our 23 member practices to deliver 100% access to clinicians working in primary care. <i>A modern model of integrated care</i> The development of a new Integrated Community care model leading to a whole system partnership in Eastern Cheshire to deliver Risk stratification, neighbourhood teams, care planning, care coordination and case management. This is aligned to the Connecting Care across Cheshire Pioneer programme and the Better Care Fund <i>Access to the highest quality urgent & emergency care</i> The Caring Together Transformation programme will enable the CCG to bring a radical change to our approach to Urgent and emergency care shifting the focus from reactive care to proactive preventative care. The introduction of our integrated community care needs, pre-empting and planning for escalating need whether that be physical , mental or social care. Through our	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
		work with the Ambulance service we are strongly supporting the introduction of see and treat and hear and treat approaches under-pinned by the introduction of "pathfinders".	
		We recognise the scale and scope of the opportunity that exists for primary care to take a leading role in urgent & emergency care and our 5 year plans include expanding the role of practices in pre-emptive care in care homes, the introduction of new Urgent Primary care services and improving overall access to primary care.	
		The CCGs plans also include the need to improve access to more specialised urgent and emergency care. The population of Eastern Cheshire is already accessing and receiving the benefits from being part of the Greater Manchester Trauma network and our operational plans include the introduction of improved access to hyper-acute stroke care.	
		A step-change in productivity of elective care	
		Analysis of the Commissioning for Value packs indicates opportunities in Circulatory and Musculoskeletal care and will form part of our operational QIPP plans. Our 5 year plan for elective care is focused on the wider system reconfiguration that is necessary to support long term productivity gains and will address three key inter-related themes; The need to secure long term high quality, sustainable elective care services, the creation of innovative community based elective care solutions and maintaining our focus on efficient high quality referrals in-line with our current upper quality performance when compared to our peer group.	
		Through our involvement in Healthier Together and the Challenged economy programme the CCG will be working in partnership with South Manchester and Stockport CCG's to ensure access to sustainable high quality elective services commissioned collaboratively and supporting elective care providers to seek greater network solutions compliant with the Healthier Together standards.	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
		The CCG has a successful track record on increasing access and productivity of elective care by increasing the range of market providers (Audiology, diagnostics, minor surgery etc) and will continue to expand this commissioning approach in both its operational and 5 year plans.	
		Specialised services concentrated in centres of excellence	
		NHS Eastern Cheshire has a long history of working with specialist centres in Greater Manchester including Salford Royal (Neurosciences), Central Manchester (Paediatrics, Renal) and the Christie Hospital (Cancer).	
		Our involvement and partnership with the Healthier Together programme forms a key part of our 5 year plans ensuring continued access for our population to the highest standards of specialist care. Our plans include the development of access to 24/7hr specialist hyper acute care and work with the clinical networks and Academic Science networks to ensure our population continue to have access to the latest NICE guidance and technological developments.	
	How does the five year vision address the following aims: a) Delivering a sustainable NHS for future generations? b) Improving health	Over the next 5 years the Caring Together programme will achieve this vision through the commissioning of a radical and innovative new care system built on 4 environments of care, and delivered through each of the following elements;	Error! Reference source not found.
	 b) Improving health outcomes in alignment with the seven ambitions c) Reducing health inequalities? 	 Transformation of Primary Care (<i>in partnership with NHS England CWW</i> Area Team and our involvement in the Challenge Fund) Development of a new Integrated Community care model (Whole system partnership in Eastern Cheshire and aligned to the Connecting Care across Cheshire Pioneer programme and the Better Care Fund). 	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
		 Reconfiguration of acute care (in partnership with the Greater Manchester Healthier Together programme & the "Challenged Economy" initiative) A range of Productivity initiatives to underpin the transformation programme. 	
	Who has signed up to the strategic vision? How have the health and wellbeing boards been involved in developing and signing off the plan?	The Caring Together programme forms the heart of our 5 year plans and has been signed up to by all the major partners in Eastern Cheshire, including; NHS Eastern Cheshire CCG and all 23 member practices Cheshire East Council East Cheshire NHS Trust Cheshire & Wirral Partnership Trust Venova CIC NHS England NHS Trust Development Authority In addition the CCG is an Associate member of the Healthier Together Committee in Common and a partner of the Connecting Cheshire pioneer programme. The Caring Together programme has been submitted and endorsed by the Cheshire East Health & Wellbeing Board and regular updates on the Caring Together Programme are provided to the Health & Wellbeing Board, and Scrutiny committee including presenting the Strategic Outline Case and Case for Change.	
	How does your plan for the Better Care Fund align/fit with	The Better Care fund plan unites a shared vision of Cheshire East Council and	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
	your 5 year strategic vision?	NHS Eastern Cheshire Clinical Commissioning Group for improving outcomes	
		for residents through improving how health and social care services work	
		together. The Better Care Fund is a supportive enabler to the Caring Together	
		5 year plan and our shared plans to commission a transformed model of	
		integrated care, which will ensure that residents experience quality care and	
		support that is appropriate to their needs, and supports them to live as	
		independent and fulfilling lives as possible.	
	What key themes arose from the Call to Action engagement programme that have been used to shape the vision?	The Call to Action key themes have been fully embedded and localised in the Caring Together Programme as reflected in our Strategic Outline Case, Case for Change, the recently launched <i>Seizing the opportunity for better care: Join the Conversation</i> ," and the "Caring Together" website. (www.caringtogether.info)	
	Is there a clear 'you said, we did' framework in place to show those that engaged how their perspective and feedback has been included?	The Caring Together programme has a well-established platform for engaging with the general public, patients, staff and stakeholders. This includes a communications and engagement group, and appointment of external public relations and media expertise. The CT programme has demonstrated the "you said we did" approach has been applied to our general public, our patients our service users and the staff who work in all of our organisations.	
a) Current position	Has an assessment of the current state been undertaken? Have opportunities and challenges been identified and	The CCG has undertaken a comprehensive and thorough assessment of the current health & social care system evidenced through the Strategic Outline Case and Case for Change.	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
	agreed? Does this correlate to the Commissioning for Value packs and other benchmarking materials?	 The CCG has worked with McKinsey to complete a full assessment of the current state of the economy, along with all stakeholders and partner organisations in Eastern Cheshire. The Strategic Outline Case and draft Case for Change has used local (JSNA), Regional (Healthier Together), National (Commissioning for Value), Peer Group comparisons, CCG data packs etc. and international benchmarks in the development of the Caring Together programme. 	
	Do the objectives and interventions identified below take into consideration the current state?	The CCG has worked closely with NHS England to follow recognised international best practice methodology for major transformation programmes. The CCG Caring Together programme which forms the heart of our 5 year plans is based on a through baseline assessment articulated through the Strategic Outline case and the production of a Case for Change document.	
	Does the two year detailed operational plan submitted provide the necessary foundations to deliver the strategic vision described here?	The CCGs Operational plan has been developed to address immediate operational and quality improvement initiatives and to capture the full range of innovative pilots and early adopter innovations that support the 5 year plan. The operational plan covers the following 5 thematic areas;	CCG 2 year Operational plan
		 Urgent care Mental Health & Children services Learning Disabilities & care pathways Improving Quality of services Caring Together early adoption schemes. 	
b) Improving quality and outcomes	At the Unit of Planning level, what are the five year local outcome ambitions i.e. the aggregation of individual organisations contribution to the outcome ambitions?	Eastern Cheshire 5 year strategic plan is not based on a single unit of planning , but on the recognition that its transformational programme must work across a geographic footprint that covers Cheshire (Connecting Cheshire), North Derbyshire and Greater Manchester (Healthier Together / Challenged Economy) in order to deliver the greatest benefits for its local population. The	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
		following ambitions have been developed and supported by all partners of the Caring Together programme;	
		Ambition One To secure additional years of life for the people of Eastern Cheshire with treatable Mental and Physical Health conditions	
		Ambition Two: To improve the health related quality of life of people with one or more long term conditions, inc. mental health conditions	
		Ambition Three: To ensure that all those living in Eastern Cheshire should be supported by new, better integrated community services.	
		Ambition Four: To increase the proportion of older people living independently at home and who feel supported to manage their condition	
		Ambition Five: To increase the number of people having a positive experience of care	
		Ambition Six: To reduce the inequalities in health and social care across Eastern Cheshire	
		Ambition Seven: To ensure our citizens access care to the highest standards and are protected from avoidable harm.	
		The CCG's 2 year Operational plan sets out the primary outcome measures and trajectories for improvement against each ambition over the 5 year strategic plan.	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
	How have the community and clinician views been considered when developing plans for improving outcomes and quantifiable ambitions?	The 5 year plan as delivered through the Caring Together program includes a number of clinically lead design groups supported by a Care Professionals Board (CPB). This extensive consultation process has ensured Caring Together is delivering plans with quantifiable, improved outcomes as agreed by all persons under CPB.	
	What data, intelligence and local analysis were explored to support the development of plans for improving outcomes and quantifiable ambitions?	The CCG has worked in partnership with McKinsey to undertake a system wide economic modelling with engagement from all stakeholders (Commissioners and Providers) in Eastern Cheshire. This has provided a detailed evidence base of the financial gap over the next 5 years as a consequence of a "do nothing "scenario. Details of the economic modelling have been provided in a detailed strategic	
		outlined case which has been presented to the Caring Together Partnership board in October 2013. The financial analysis of this demanding scenario is presented in the following diagram.	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
		Commissioner (Healthcare and Social Care) and Acute Provider financial gap under a 'do nothing' scenario	
		£m 5 year Gap: £86m £61.1 £61.1	
		26% of total Spend £46.2 £36.9 31.9	
		£21.2 12.4 11.6 12.9 15.9 29.3	
		7.5 13.4 23.3 7.4 11.1 15.9 23.0 26.3 2013/14 2014/15 2015/16 2016/17 2017/18 2018/19	
		 It is our ambition in 2018/2019 that the Eastern Cheshire economy and all its partner organisations are able to discharge all their regulatory financial duties including surpluses 	
		CWP broadly financially sustainable and therefore does not contribute significantly to financial challenge Cheshrie East Council (Adult Social Care) financial gap. CEC and ECT financial gap for 2017/18 and beyond extrapolated from previous years positions. SOURCE: East Cheshrie Integrated Care model; EC CCG; Cheshrire East Council, East Cheshrie Trust (as at 8 Jan 14)	
		Caring together Integrating Care in Eastern Cheshire	
		In addition, the CCG is working closely with Stockport and South Manchester CCG to establish a Commissioning Framework to support the "Challenged economy" programme that covers the three CCGs and four local hospitals. A critical friend will be appointed to work across the economic footprint providing addition demand and activity analysis and establishment of a baseline position	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
	How are the plans for improving outcomes and quantifiable ambitions aligned to local JSNAs?	The Caring Together programme and the identified ambitions and outcomes have been developed from the local Health & Wellbeing Strategy and associated JSNA. The Director of Public Health and associate Director of Public Health have provided additional scrutiny and assurance of the plans.	
	How have the Health and well- being boards been involved in setting the plans for improving outcomes?	The structure of the Caring Together programme has been established in a way that the programme reports into the Health & Wellbeing Board (HWB). The programme direction for Caring Together provides regular progress reports to each HWB.	
c) Sustainability	Are the outcome ambitions included within the sustainability calculations? I.e. the cost of implementation has been evaluated and included in the resource plans moving forwards?	The Caring Together programme is a key driver to delivering a sustainable health economy over the next five years. Within the Case for Change, the "do nothing" scenario indicates a deficit that increases to circa £18m by 2018/19. The plans reflect a number of assumptions ranging from both national and local initiatives. These range from the Better Care Fund to the impact of the Caring Together transformation programme from 2018/19 onwards. The Local Health economy has been meeting routinely to ensure consistency where applicable in assumptions and future plans. Whilst the Caring Together programme is the key QIPP initiative from 16/17 onwards, the first 2 years are targeted against the areas of opportunity when compared to our peers as outlined in the "Commissioning for Value – insight pack". This enables the CCG underlying financial position to gradually improve over the next five years to a position that is sustainable looking forward.	Detailed metrics supplied in the financial templates

Segment	Key Line of Enquiry	Organisation Response	Supported by:
	Are assumptions made by the health economy consistent with the challenges identified in a Call to Action?	Yes, with adaptions to reflect local demographics and local JSNA	
	Can the plan on a page elements be identified through examining the activity and financial projections covered in operational and financial templates?	The activity and financial projects reflect the elements outlined within the plan at a strategic level. The constraints and rigidity of the financial template do not support each area to be individually recorded and as such has been aggregated in many instances.	
d) Improvement interventions	 Please list the material transformational interventions required to move from the current state and deliver the five year vision. For each transformational intervention, please describe the : Overall aims of the intervention and who is likely to be impacted by the intervention Expected outcome in quality, activity, cost and point of delivery terms e.g. the description of the large scale impact the project will have Investment costs (time, money, workforce) Implementation timeline 	In line with NHS England published guidance on service transformation the CCG is following recommended best practice. The Care Professionals board and Care design groups are currently completing work on establishing the new care models and supporting care standards which will inform future transformational interventions. Detailed information on transformational interventions will be completed as part of the Caring Together pre-consultation business case which will be published in June 2014. Please refer to the Caring Together programme as evidence of the timetable and schedule of work to be undertaken.	

Segment	Key Line of Enquiry	Organisation Response	Supported by:
	 example medicines optimisation Barriers to success Confidence levels of implementation 		
	The planning teams may find it helpful to consider the reports recently published or to be published imminently including commissioning for prevention, Any town health system and the report following the NHS Futures Summit.		
e) Governance overview	What governance processes are in place to ensure future plans are developed in collaboration with key stakeholders including the local community?	Caring Together Governance Structure(Slide 2 in CT Governance & Timelines presentation) including links to Eastern Cheshire Health Voice, Health Overview and Scrutiny Committee and Health and Wellbeing Board	CT Governance a timelines.pptx
f) Values and principles	Please outline how the values and principles are embedded in the planned implementation of the interventions	Refer to the attached document for further information	Error! Reference source not found.Erro r! Reference source not found. NHS Eastern Cheshire - 5 year