

## Paper PB.17.12.15/05

# PUBLIC BOARD PAPER - NHS ENGLAND

Title: Mandate, NHS Planning Guidance and CCG Assessment Framework

## Lead Director:

Ian Dodge, National Director: Commissioning Strategy

#### Purpose of Paper:

To describe the proposed approach to NHS planning and CCG assessment following the Spending Review

### The Board is invited to:

The Board is asked to:

- endorse the overall approach
- give delegated authority to the Chairman and Chief Executive to approve the final version of the guidance as it is agreed with our partners.

#### Mandate, NHS Planning Guidance and CCG Assessment Framework NHS England Board 17 December 2015

#### 1.0 NEW MANDATE TO NHS ENGLAND AND THE NHS IN ENGLAND

1.1 Today the Government publishes its new Mandate to NHS England (See Appendix). That, in turn, was based on the *Forward View*, and the Spending Review. The Mandate differs significantly from the previous Mandate, is shorter and more focused, and clearly lays out longer-term goals and 16/17 deliverables. It also uses the Mandate to NHS England to set broader system objectives requiring partnership action by NHS Improvement, Public Health England, Health Education England and the Department of Health itself.

## 2.0 NHS PLANNING GUIDANCE

- 2.1 The NHS Planning Guidance 2016/17-2020/21 will reflect the settlement we have reached with the Government on the Mandate.
- 2.2 As in 2015/16, it is a shared document, produced jointly with the Arms Length Bodies.
- 2.3 It lays out three interdependent tasks: (i) to implement the Forward View; (i) to restore and maintain financial balance across commissioners and providers; and (iii) deliver core standards for patients.
- 2.4 It articulates clear national requirements and national challenges to local NHS systems, and key business requirements and assumptions including on allocations and tariff. We are aiming for brevity.
- 2.5 We are proposing to ask the NHS to produce two separate but interconnected plans: (i) a strategic "Sustainability and Transformation" plan by local health and care system, for sign off by July 2016. We are encouraging local bodies to spend the next six months planning properly for the next five years; (ii) a plan by organisation for 2016/17, to reflect the emerging strategy.
- 2.6 As discussed in our Board development sessions, the intention is to signal, unambiguously, that the primacy of planning by individual institutions should increasingly be supplemented by planning by place for local populations.
- 2.7 We will be asking every health and care system to come together, to create its ambitious local blueprint for accelerating its implementation of the *Forward View* and achieving financial sustainability. Sustainability and Transformation Plans are about the holistic pursuit of the triple aim.
- 2.8 This will call for system leadership. It also requires an open, engaging, and iterative process that harnesses the energies of clinicians, patients, citizens, and local community partners including the voluntary sector, business, and local government.
- 2.9 We propose to use the plans as the basis of assessing the phased access to national transformation funding for example for spread of new care models, enhanced access to General Practice and technology.

# 3.0 LOCAL HEALTH SYSTEM IMPROVEMENT AND ASSESSMENT FRAMEWORK

3.1 We will measure progress through a new local health system *Improvement and Assessment Framework*. We propose to consult on this in January 2016, and align with the planning guidance. The framework is our new version of CCG assurance, and it will apply from 2016/17. The Commissioniing Committee will sign off the final version. Its relevance reaches beyond CCGs, because it's about how local health systems and communities can assess their own progress.

## 4.0 **RECOMMENDATION**

- 4.1 The Board is asked to:
  - endorse the overall approach
  - give delegated authority to the Chairman and Chief Executive to approve the final version of the guidance as it is agreed with our partners.

Appendix 1

To follow