

Corrections to the NHS Operational Planning and Contracting Guidance 2017-2019, published NHS England and NHS Improvement on Thursday 22 September 2016.

27 September 2016

Page	Paragraph reference	Action and text
9	Must do table section 7. Mental Health	<p>Corrected text:</p> <ul style="list-style-type: none"> Additional psychological therapies so that at least 19% of people with anxiety and depression access treatment, with the majority of the increase from the baseline of 15% to be integrated with primary care; <p>Original text:</p> <ul style="list-style-type: none"> Additional psychological therapies so that at least 19% of people with anxiety and depression access treatment, with the majority of the increase from the baseline of 15% to be integrated with physical healthcare;
10	Must do table section 8. People with learning disabilities	<p>Corrected text:</p> <ul style="list-style-type: none"> Reduce premature mortality by improving access to health services, education and training of staff, and by making necessary reasonable adjustments for people with a learning disability and/ or autism. <p>Original text:</p> <ul style="list-style-type: none"> Reduce premature mortality by improving access to health services, education and training of staff, and by making necessary reasonable adjustments for people with a learning disability or autism.
15	Timetable	<p>Row 13: New text added:</p> <ul style="list-style-type: none"> Submission of summary level 2017/18 to 2018/19 operational financial plans (commissioners only) <p>Row 16: Correction to the date in the table for:</p> <ul style="list-style-type: none"> Providers to respond to initial offers from commissioners (CCGs and direct commissioners) had been incorrectly given as 4 November. The correct date is 11 November 2016. That is reflected in the corrected version. <p>A footnote has been added to that effect.</p> <p>Row 16 footnote: The date 4 November for Providers to respond to initial offers from commissioners (CCGs and direct commissioners) was incorrect. It has been corrected to 11 November.</p>

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23	49	<p>Corrected text: Improving value in the NHS is at the heart of the Five Year Forward View. Over the course of this year NHS England has used the Best Possible Value (BPV) framework to make investment decisions for year two of vanguard funding and for transformation funding for mental health, cancer and maternity. The BPV framework is a structured approach to assessing the value of a particular project. It uses logic models and success hypotheses to estimate both quality benefits as well as financial return on investment and provide a robust mechanism for tracking the delivery of these benefits. For 2017/18 and 2018/19, the BPV framework will be used to assess most applications for transformation investments that are available for the NHS. We expect all STPs to have adopted value-based decision making processes based on the BPV framework, embedded from April 2017.</p> <p>Original text: Improving value in the NHS is at the heart of the Five Year Forward View. Over the course of this year NHS England has used the Best Possible Value (BPV) framework to make investment decisions for year two of vanguard funding and for transformation funding for mental health, cancer and maternity. The BPV framework is a structured approach to assessing the value of a particular project. It uses logic models and success hypotheses to estimate both quality benefits as well as financial return on investment and provide a robust mechanism for tracking the delivery of these benefits. For 2017/18 and 2018/19, the BPV framework will be used to assess all applications for transformation investments that are available for the NHS. We expect all STPs to have adopted value-based decision making processes based on the BPV framework, embedded from April 2017.</p>
29	69	<p>Corrected text: CCGs and Upper Tier Councils will need to agree a joint plan to deliver the requirements of the Better Care Fund (BCF) for 2017/18 and 2018/19 via the Health and Wellbeing Board. The plan should build on the 2016/17 BCF plan, taking account of what has worked well in meeting the objectives of the fund, and what has not. CCGs will be advised of the minimum amount that they are required to pool as part of the notification of their wider allocation. BCF funding should explicitly support reductions in unplanned admissions and hospital delayed transfers of care. Further guidance on the BCF will be provided later in the autumn.</p> <p>Original Text: CCGs and Upper Tier Councils will need to agree a joint plan</p>

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		<p>to deliver the requirements of the Better Care Fund (BCF) from 2017/18 via the Health and Wellbeing Board. The plan should build on the 2016/17 BCF plan, taking account of what has worked well in meeting the objectives of the fund, and what has not. CCGs will be advised of the minimum amount that they are required to pool as part of the notification of their wider allocation. BCF funding should explicitly support reductions in unplanned admissions and hospital delayed transfers of care. Further guidance on the BCF will be provided later in the autumn.</p>

Final