

BOARD MEETING

Title	Update on our approach to 2024/25 strategic, operational and financial planning		
Paper Date:	5 January 2024	Board Meeting Date:	16 January 2024
Purpose:	Information / Discussion /	Agenda Item:	11
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Executive Summary

At the public board meeting of Buckinghamshire, Oxfordshire and Berkshire West (BOB) Integrated Care Board (ICB) in November, the executive planning leads agreed to provide the Board with a formal update on the 2024/25 planning process in January.

This paper provides:

- A short update on the national 2024/25 operational planning priorities, as currently understood, given the formal guidance has not yet been published.
- An update on how we plan to work with system colleagues to ensure appropriate input to the planning and priority setting.
- An update on the development of a set of shared system goals which we propose will be the prioritised over 2024/25 including the summary of feedback received from system colleagues, a rationale for each proposed goal and the initial draft deliverables.

The planning process will continue through January, February and March. Subsequent iterations of the strategic, operational, and financial plans will be presented to the ICB Board, with an expectation of final sign off in March 2024.

Action Required

The ICB Board are asked to:

- Review and provide additional guidance on the proposed approach to engaging with partners for the 2024/25 planning process.
- Review and provide feedback on the proposed system goals, including any additional content that should be included.

Conflicts of Interest:

Conflict noted: conflicted party can participate in discussion and decision

The goals outlined in this paper inform the prioritisation of the use of NHS resources. This will have an impact on organisations that members of the board lead/work for. The perspective of these members remains an important aspect to development and delivery of our priorities and plans.

Date/Name of Committee/ Meeting, Where Last Reviewed:

N/A

Our approach to 2024/25 strategic, operational and financial planning with partners in BOB

Our planning context

1. At the public board meeting of Buckinghamshire, Oxfordshire and Berkshire West (BOB) Integrated Care Board (ICB) in November, the executive planning leads agreed to provide the Board with a formal update on the 2024/25 planning process in January.
2. This paper provides:
 - a. A short update on the national 2024/25 operational planning priorities, as currently understood.
 - b. An update on how we plan to work with system colleagues to ensure appropriate input to the planning and priority setting.
 - c. An update on the development of a set of shared system goals which we will focus on across BOB over 2024/25

National Planning Guidance

3. NHS England wrote to the ICB on 22 December the letter outlined that discussions with Government on operational guidance remain live, and NHSE will therefore not be able to publish the 2024/25 priorities and planning guidance until the new calendar year.
4. The letter goes on to state the priorities and objectives set out in 2023/24 planning guidance and the published recovery plans on urgent and emergency care, primary care access, and elective and cancer care will not fundamentally change.

Local Planning Process

5. The planning process has been developed to encourage input from our system partners including NHS organisations, local authorities, and others. The following groups already have been or will be used to shape our approach to planning and contribute to our emerging plans and priorities.
 - a. **System Programme Leads** - The ICB has commenced planning work, holding initial meetings with ICB and wider programme leads with outputs including;
 - A clear set of actions to support delivery of the BOB ICB System Goals in 2024/25.
 - Initial details of the investment required to support delivery of the plans.
 - Cost pressures relating to 2024/25 and existing commitments from 2023/24.
 - Productivity opportunities.
 - b. **Individual Trust** – Bi-lateral Trust and ICB planning meetings with ICB are underway with discussions focused on the 2024/25 System Goals, service delivery issues and a review of initial contract baselines.
 - c. **NHS System Leaders** – A regular opportunity for senior leaders to understand latest planning positions across the system. Financial planning principles and assumptions have been shared and reviewed with Chief Finance Officers, Chief Operating Officers and Chief Executive Officers across NHS Partners. A sub-group has been established with cross organisational NHS membership which met on 10 January to promote alignment between system goals and organisational plans.
 - d. **Local government** – We are currently working with local council partners to identify the best ways to share emerging plans with colleagues with a view to promoting collaboration where appropriate.

- e. **Integrated Care Partnership** – The ICP was engaged on the initial draft system goals and will have an opportunity to provide additional feedback on the next iteration on 17 January 2024.
- f. **Trust planning leads** – To support the coordination of the detailed requirements in relation to operational delivery, workforce and financial planning.
- g. **Place based partnerships** and **provider collaboratives** will be included to support integrated working and promote subsidiarity where possible.

Update on the development of BOB System Goals

6. For the financial year 2024/25, we are seeking to define a set of system goals which will enable us to align around a limited number of strategic priorities and deliver improvements for our residents, people and wider system.
7. The system goals are closely aligned to the ambitions articulated in the Integrated Care Strategy and the Joint Forward Plan (JFP), both developed in 2023. These documents continue to provide the strategic framework for our long-term ambition in BOB.
8. The updated JFP guidance for 2024/25 supports integrated care boards (ICBs) and their partner NHS trusts and foundation trusts to further develop and/or revise the JFP first published last year. Systems continue to have the same flexibility to determine their JFP’s scope and how it is developed and structured. For the majority of ICBs, revised plans are likely to reflect a continuation of the priorities set out in the previous year’s JFP.
9. In BOB we remain committed to the high-level ambitions of the JFP agreed by the ICB and system partners in July 2023. For 2024/25, we are seeking to identify the areas within the JFP, that as a system we want to prioritise delivery of over the next year – our 2024/25 System Goals.
10. In November 2023, we brought a paper to the BOB ICB Board setting out a draft of 13 goals for discussion, which were drawn from our Integrated Care Strategy and the Joint Forward Plan, alongside input from System Leadership Forum discussion.
11. Following this, through November, we engaged widely on the draft goals, receiving feedback from partners across primary care, local government, public health, acute, community, mental health, voluntary, community and social enterprise (VCSE) sector, research partners and the public, alongside discussions including the Integrated Care Partnership and with regional and national colleagues.
12. The feedback from these discussions is summarised in the table below:

Summary of Feedback Received	
Key Message	Detail
Partners welcome the overall approach	<ul style="list-style-type: none"> • System priorities: The approach to prioritising what we deliver by working together as a system was welcomed by partners. • Growing collaboration: The opportunity to use this process to develop our system ways of working and increased collaborative behaviours was noted, alongside the more tangible delivery of the outcomes. • Collaborate widely: It was recognised that we should aim to identify goals that can only be achieved through collaboration across the system and that this collaboration should include our partners across NHS, Local Government, VCSE, Research and communities who are impacted by the goals.
We need to focus in on a	<ul style="list-style-type: none"> • Combine goals: A common theme was to reduce the number of goals from 13 to a smaller number of more focused goals. It was noted that this could be achieved by combining several of the goals.

<p>small number of priorities</p>	<ul style="list-style-type: none"> • Focus on where the system adds value: In focusing on a smaller set of system goals, we should be clearer about where a system-wide approach adds value beyond what should be designed and led locally at Place or Provider level. The value of scale should be clear in each goal.
<p>We need to be clear about what successful delivery and oversight looks like</p>	<ul style="list-style-type: none"> • Shared focus: It was often noted that to be successful, we will need to be disciplined about focusing on these goals, both within individual organisations and at system level and will need a clear approach to tracking and overseeing delivery. • SMART: We need to ensure our goals are SMART (specific, measurable, achievable, realistic, and time-bound) as we finesse them. • Resource: We acknowledge that the system continues to operate services under high pressure, and we will need to be strategic and impactful with our resource as we move to a different way of working. • Clear governance: We need to be clear on where the programme governance and oversight for each goal sits before it reports into each public ICB Board meeting in 2024/25.

13. In light of this feedback, we have worked to reduce the goals into six areas of focus. These have been prioritised using the following principles:

The BOB System Goals should be:

- **Strategically aligned** – Support the delivery of national, regional, or local priorities.
- **System Orientated** – They address a known area of challenge where we are not yet collectively achieving the outcomes that we want to, and value can be added beyond a place-based or provider led approach. They are areas where working across the system will allow us to address inequity, maximise the benefits of scale, allow for a single coherent blueprint/approach or support us to go further faster by aligning resource, sharing learning and best practice.
- **Impactful** – Will enable us to deliver benefits in year and set us up for further benefits in future years.
- **Collaborative** – Each goal will help us to deliver tangible benefits for our residents, people, or system, in addition to strengthening our collaborative ways of working and approach to sharing learning, resource and expertise across the system.

14. In line with these principles, we have developed our BOB System Goals into the following revised draft. The first graphic shows the goals at a high level, while the table which follows set outs the rationale and indicative measures, which we are now developing with partners to ensure each goal is SMART and supported by a clear programme oversight and delivery approach.


BOB System Goals 24/25 DRAFT



Improve outcomes for our population health and healthcare

1 Provide more **joined up, proactive and accessible care**, by bringing together teams and resources across organisations into Integrated Neighbourhood Teams

2 Improve the mental wellbeing of **children and young people** by working together to pilot and scale preventative approaches and improvements, including within the neurodiversity pathway



Tackle inequalities in outcomes, experience and access

3 Extend healthy life expectancy by **preventing strokes and heart attacks**, through working together to improve CVD pathways and prevention and targeting action to where it will have most impact

4 Accelerate our provider collaboratives (Acute & Mental Health) to **tackle variation** to drive increased equity of access, outcome and experience



Enhance **productivity and value for money**

5 Deliver savings through **adopting a system-wide approach to procurement and estates (One Public Estate)** across our places and providers

Enabled by System Digital & Data Programmes

- **Digitise:** Reaching a core level of digitisation across the system.
- **Connect:** Connecting care settings across organisations and sectors
- **Transform:** Targeting our resource through population health management to better meet the needs of our population



Help the NHS support broader **social and economic development**

6 Develop a more unified approach to **supporting and retaining our people**, reducing temporary staffing, supporting local employment and supporting the health and wellbeing of our people

BOB SYSTEM GOALS – WORKING DRAFT

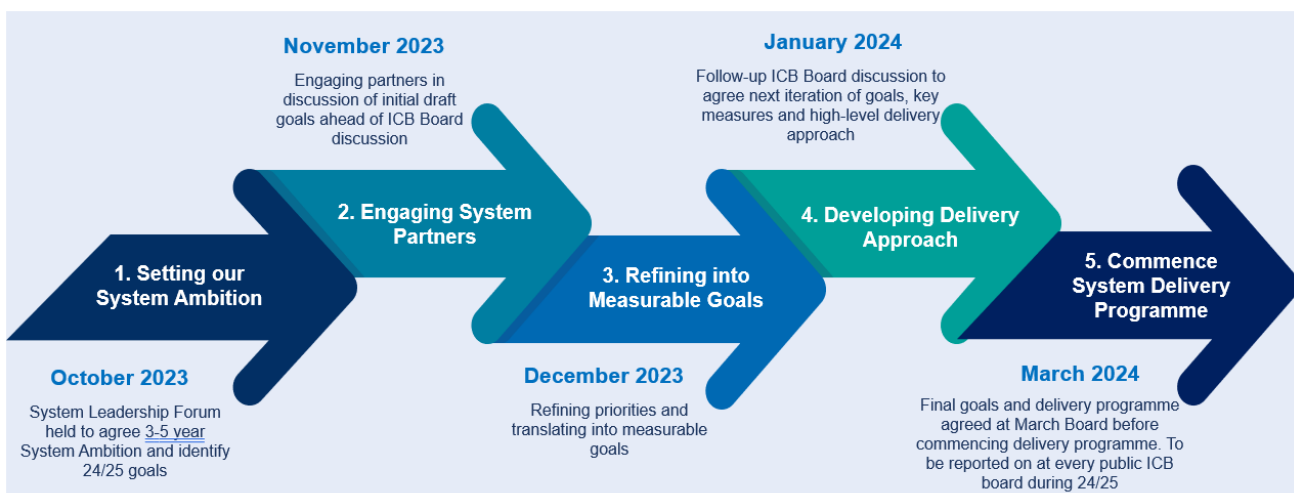
Goal	Rationale	Indicative Deliverables (<i>being refined with partners</i>)
Improve Outcomes in Population Health and Healthcare		
<p>Provide more joined up, proactive and accessible care, by bringing together teams and resources across organisations into Integrated Neighbourhood Teams</p>	<ul style="list-style-type: none"> • Key deliverable from national Fuller Stocktake and BOB Primary Care Strategy. • Expected to deliver improvements for patients, particularly those with complex long-term conditions by providing holistic joined up support to those with greatest needs. • Builds a more resilient model of primary care that relies on cross organisation and sector working to manage demand for primary care services and UEC services. 	<ul style="list-style-type: none"> • Developing BOB-wide blueprint/set of principles to be met in each Place. • Mapping of in scope teams across acute, community, mental health, and primary care. • Piloting within each place and formalising approach within year ahead of 2025/26 planning round.
<p>Improve the mental wellbeing of children and young people (CYP) by working together to pilot and scale preventative approaches and improvements, including within the neurodiversity pathway</p>	<ul style="list-style-type: none"> • Nationally, the number of children and young people with MH disorders has increased since 2017. This trend is mirrored in BOB with 32% growth in demand for CYP MH services. • BOB had nearly 5,300 referrals to Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD) assessment services adding to a waiting list of more than 9,400 children and young people (Aug 2023). • Accessing the right support can be complex, confusing and inconsistent. Children, young people, and their families could be better helped through earlier needs led support offers. 	<ul style="list-style-type: none"> • Scaling up preventative support in schools and early intervention parenting and family support. • Improved support offer for children and young people who are already within our clinical pathways and may be waiting for assessments. • Pilot schemes for early needs-based support are piloted in BOB (e.g. SHaRON, SPENCER3D) working with wider system partners including the VCSE and education sectors.
Tackle Inequalities in Outcomes, Experience, and Access		
<p>Extend healthy life expectancy by preventing strokes and heart attacks, through working together to improve CVD pathways and prevention and targeting action to where it will have most impact</p>	<ul style="list-style-type: none"> • Opportunity to prevent cardiac events and deaths across the system (e.g., 200 heart attacks, 300 strokes, 150 deaths) through scaling up effective blood pressure control and lipid management alongside broader measures such as health checks. Significant opportunity to prevent acute demand by working upstream and deliver cost savings (c. £4m) to the system (both health and social care). • There is currently significant variation between our three places and more locally between Primary Care Networks. • Data shows direct impact of deprivation and ethnicity on rates of cardiovascular disease. 	<ul style="list-style-type: none"> • Roll out of NHS Health Checks at scale, using population health management to target communities most at risk incl. those with Severe Mental Illness (SMI). • Tackle variation in blood pressure control in primary care supporting practices to achieve to target. Increase blood pressure checks delivered in community pharmacy and other community settings. • Increase % of at-risk patients on Lipid lowering therapies and ensure effective optimisation of treatment. Greater focus on lipid management in patients on stroke and cardiology pathways and (inpatient/outpatient/rehab). • Acute trusts to target smoking cessation support in stroke and cardiac wards.
<p>Accelerate our provider collaboratives (Acute & Mental Health) to tackle variation to drive increased equity of access, outcome and experience</p>	<p><i>Acute</i></p> <ul style="list-style-type: none"> • 6000 patients waiting over 52 weeks for treatment, with variation in access and times across acute providers. • There is existing unwarranted variation between providers and opportunities to improve outcomes and identify productivity savings. • We are achieving 70% against our target of 95% of patients receiving a diagnostic test within six weeks. 	<p><i>Acute</i></p> <ul style="list-style-type: none"> • Zero patients waiting over 52 weeks by March 2025; reduce long waits by utilising capacity and mutual aid opportunities across the system. • Waiting lists analysed by deprivation/IMD scale. • 95% of patients to receive a diagnostic test within 6 weeks by March 2025.

	<p><i>Mental Health</i></p> <ul style="list-style-type: none"> • People with Serious Mental Illness (SMI) have a 15 to 20 years shorter life expectancy than the general population with annual health check still not meeting the national target. • Patients with complex support needs require an integrated and preventative approach to improve outcomes. • There are variations in the provision of crisis support across BOB providers leading to inconsistencies in experience and outcomes. • Out of area placements are frequently associated with poorer user experience and outcomes than users able to stay connected to their local support networks. 	<p><i>Mental Health</i></p> <ul style="list-style-type: none"> • Increase the number of people with SMI who receive an annual physical health check. • Improve outcomes for people with complex needs by focusing on integrated working and prevention. • Improve timely access to support for mental health crisis and develop alternative sustainable models which may include increased crisis in-home support and the expansion of safe havens for crisis pathway. • Reducing inappropriate out of area placements.
<p>Enhance Productivity and Value for Money</p>		
<p>Deliver savings through adopting a system-wide approach to procurement and estates (One Public Estate) across our places and providers</p>	<ul style="list-style-type: none"> • Joint procurement activity before and during the pandemic demonstrated the value of collaboration between NHS Trusts to deliver improved value for money. • Opportunities have been identified to deliver additional savings over the next 3 years from joined up procurement activities across BOB. • The proportion of BOB's trust managed non-clinical space is the third highest in the country (37.4%), with limited space shared between organisations. There are considerable opportunities to adopt a 'One Public Estate' approach with local authority and NHS partners. 	<ul style="list-style-type: none"> • Initiate the ICS efficiencies Collaboration Group (IECG) workstream and drive the identified procurement benefits (£ TBC). • Join up of facilities management procurement across our estate to drive efficiencies and standardisation. • Identify opportunities in corporate services to ensure future sustainability, standardisation and best practice. • Develop BOB approach to 'One Public Estate'. Rationalise non-clinical estate through the identification of shared opportunities and move closer to the peer median (30.3%) and reduce running costs.
<p>Help the NHS Support Broader Social and Economic Development</p>		
<p>Develop a more unified approach to supporting and retaining our people, reducing temporary staffing, supporting local employment and supporting the health and wellbeing of our people</p>	<ul style="list-style-type: none"> • Opportunity to join up staff banks across the system, to deliver efficiencies, align terms and conditions and create the conditions for a flexible staffing model across organisations. • All organisations across BOB have a shared focus on improving staff health and wellbeing, developing our approach to Equality, Diversity and Inclusion, tackling the cost-of-living crisis for staff and ensuring a robust response to key priorities such as reducing violence and aggression. In these areas, working at scale will allow us to pool resources, share learning and deliver improvements for our people. 	<ul style="list-style-type: none"> • Development of BOB-wide Collaborative Bank, to go live in 2025. • System-wide approach to Equality, Diversity and Inclusion. • System-wide approach to reducing violence and aggression. • Joining up staff health and wellbeing offers, including support with cost of living and roll out of NHS Health checks for staff.

15. Our proposed approach in terms of programme delivery and oversight will be as follows, with more detail on each of these areas to be provided within our next Board update:

- **Measures** – Throughout January and February, we will refine the system goals, the key measures and delivery approach with partners and subject matter experts across our system.
- **Alignment of resource** – Ahead of the next financial year we will continue conversations with partner organisations about how we might best align resource (people, budgets, and expertise) to support the delivery of the system goals. Within the NHS planning round, this is being taken up through a working group of finance, operations, and strategy leaders to ensure that Trust budgets for 2024/25 reflect the priorities. We are also working to identify opportunities for similar discussions in other parts of the system – for example, a sub-group of Local Authority leaders.
- **Governance** – Each goal will report into an existing system programme board (apart from CVD, for which a new programme board will be set up), before reporting into the ICB executive. Progress on our System Goals will be a standing item in our public ICB Board meetings during 2024/25, with deep dives into one of the goals within each meeting.
- **Supporting and tracking delivery** – The delivery and reporting of the system goals will be coordinated through a small delivery unit within the ICB to develop a unified approach to delivery and reduce the reporting burden on teams within the system.
- **Improvement approach** – The delivery of the system goals will be framed by the principles of continuous improvement, within the wider framework of the NHS IMPACT approach (as outlined earlier under item 10). More information on this will be shared in March.

16. In March, the final version of the system goals and wider delivery approach will be brought to the ICB Board for approval and sign off in line with the timeline below.



Asks of the Board:

17. The ICB Board are asked to:

- a. Review and provide additional guidance on the proposed approach to engaging with partners for the 2024/25 planning process.
- b. Review and provide feedback on the proposed system goals, including any additional content that should be included.

Next Steps

18. The respective ICB executive leads will continue to meet on a regular basis to ensure alignment between the different planning processes (strategic, financial and operational).
19. Continue with ongoing engagement across the system to ensure alignment with other planning processes and priorities.
20. Subsequent iterations of the strategic, operational, and financial plans will be presented to the ICB Board, with an expectation of final sign off in March 2024.