

HEALTH AND WELLBEING BOARD



TO:	Blackburn with Darwen Health and Wellbeing Board
FROM:	Debbie Nixon
DATE:	2 nd September 2014

SUBJECT: Annual Resilience Planning

1. PURPOSE: To provide an update to Health and Wellbeing Board members on the development of the Pennine Lancashire Annual Resilience Plan

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD:

Health and Wellbeing Board members are requested to:

- Note the content of this report and progress to date in relation to system resilience including agreed Pennine Lancashire governance arrangements.

3. BACKGROUND:

NHS England (NHSE) System Resilience guidance published on 13th June; sets out the requirements for operational resilience and capacity planning in 2014/15 (attached at Appendix 1). The guidance outlines a new collaborative approach to system resilience and expands upon current plans and infrastructure already in place. This includes expanding the remit of system resilience to elective care as well as urgent care and introduces how the Better Care Fund could bring further opportunities to work more widely across health and social care and the voluntary sector.

The Guidance outlines the below key actions to be undertaken by the CCG:

- **Establish a System Resilience Forum** - with representatives from across the health and social care system to undertake regular planning for service delivery. The guidance sets out the need to implement a System Resilience Group (SRG) which will provide overall system coordination and oversight at the highest level. It has been agreed that the Pennine Lancashire Chief Executive Officers Group will fulfil this function
- Commissioner and providers to complete a **System Resilience Planning Summary Templates for Elective and non-elective care for first submission on 30th July** this identifies how the non-recurrent resource will be prioritised to deliver the required resilience (attached at appendix 2)
- Agree and 'sign off' a **System Resilience Plan** by September 23rd September

4. RATIONALE:

Following the operational pressure experienced by the NHS during the winter of 2012/13 a tripartite agreement (NHS England, NHS Trust Development Agency, Monitor and Directors of Adults Social Services) established Urgent Care Working Groups. These groups were established around acute provider systems and brought together health and social care commissioners and providers to focus on urgent care resilience and capacity, especially during the winter period. At a local level this was reflected in the development of Annual Resilience Groups which included representatives from across the health, social care and third sector organisations across Pennine Lancashire. The meetings are led by the CCG and bring partners and stakeholders together to develop joint Annual Resilience and Escalation Plans and

exploring opportunities for joined up approach to manage services and the overall system at period of pressure. There is a need to establish sustainable year round delivery of the health and care system to ensure that patients receive the best outcome, performance targets are met and standards within the NHS constitution are achieved.

5. KEY ISSUES:

Funding

Non-recurrent funding available is £1,085,905 for Blackburn with Darwen. This will be allocated via the CCG following submission of the template and system resilience plan.

System Resilience plan

The CCG are responsible for working with partners across the health and social care system to jointly refresh the Annual Resilience Plan each year which sets out the steps that are being undertaken across the Blackburn with Darwen and East Lancashire (Pennine Lancashire) health and social care community to ensure that appropriate arrangements are in place to provide high quality, safe and responsive services throughout the year. As part of this plan there is a range of supporting provider and health economy wide plans which concentrate on key areas such escalation and capacity and demand management policies.

System Resilience Planning Template

The new guidance has outlined a new collaborative approach to system resilience and includes the remit of elective and non elective care. The planning template provides assurance on the local plans and arrangements in place to utilise the non-recurrent funding against key priorities and development opportunities to support pressure points in the system. An outline of the proposed approach and an outline of potential business cases have been included within the planning template. Commissioners have worked with partners and providers to further develop business cases by the end of August. Reporting arrangements dictate that there is transparency of financial arrangements and a clear presentation on the agreed use of the 70% marginal tariff funding. Funding for Plans will be released by NHS England on 15th September 2014, following a rigorous assurance process by the Lancashire Area Team (LAT).

The System Resilience Planning template for Non Elective (Unscheduled/Urgent) Care concentrates on 7 day working, identification and management of high intensity users of Emergency Department, minimise delayed discharges, admission avoidance, NWAS Ambulance Project and additional capacity for Primary Care. From an Elective (Scheduled) Care perspective the areas outlined in the plan are referral management and review of specialist patient pathways, triage, open access pilot and training and education across the system.

The Plan also requires key partner organisation, CCG, Trust and Local Authority Director level agreement and signatures by the end of August.

Governance

The Pennine Lancashire Health Economy has agreed to the following arrangements to ensure effective governance is in place to support resilience.

- The newly formed Pennine Lancashire Chief Executive Steering Group will become the SRG and Terms of Reference (ToR) have been agreed.
- The Pennine Lancashire Unscheduled Care Group (PLUCG) will provide strong leadership in relation to the Unscheduled Care Services and System and will continue to drive forward the necessary plans for health and social care redesign and delivery. This will exception report any key issues monthly to the Pennine Lancashire Chief Executive Officers Group (SRG)
- A subsequent arrangement for a meeting for managing the Scheduled Care service and system has now been established. The first meeting with providers will take place in September with a draft Terms of Reference and membership being agreed.
- Clinical priorities will be supported by the Pennine Lancashire Clinical Transformation Board and informed by the CCGs commissioning intentions.

Timescales for submission

- Review and authorisation by Pennine Lancashire Chief Executive Officers Group (SRG) on 26th August.
- Draft Resilience Plan template to be agreed and shared with Area Team at PLUCG meeting on 4th Sept.
- Updated Resilience Plan to be discussed at the CCG Commissioning Business Group on 10th September.
- Scheduled Care Resilience Meeting on 20th Sept to review and agree Plan template and submit relevant documents include TOR.
- Final submission date to Area Team is 23rd Sept.

6. POLICY IMPLICATIONS: The development of the Resilience plan aligns to a number of national policy drivers including the Better Care Fund, reducing Emergency Admissions, & the national Referral to Treatment (RRT) 18 week standard

7. FINANCIAL IMPLICATIONS: There are no financial implications for Health and Wellbeing Board as a result of the annual resilience plan. Any financial requirements of additional service development will be met by the non-recurrent funding set out within the plan.

8. LEGAL IMPLICATIONS: N/A

9. RESOURCE IMPLICATIONS:

There are no additional resource requirements for the HWBB in relation to this development.

10. EQUALITY AND HEALTH IMPLICATIONS:

The aim of the resilience plan is to improve access to services and ensure that standards within the NHS constitution are met.

11. CONSULTATIONS

VERSION:	2
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CONTACT OFFICER:	Debbie Nixon
DATE:	2 nd September 2014
BACKGROUND PAPER:	



