



# Healthy London Partnership

**This paper is the final draft proposed to CCG and NHS England (London) for consideration by CCG Chief Officers and Chairs. Programme SROs, Payments and Funding Group and London Transformation Group have reviewed and endorsed this paper. Please see information about the review round below.**

**It should be noted that SPGs and CCGs are able to localise or align this paper to their own strategies as appropriate and also consider the paper without taking to full governing body meetings in line with local governance arrangements.**

## Executive Summary

This is a paper from the London Transformation Group, on behalf of CCGs and NHS England (London) and provides an update to the last paper circulated to CCG Governing Bodies and NHS England (London) between November 2015 and January 2016. An update is provided of the continued progress of programme delivery and the progress that has been made in planning for FY 2016/17 for consideration by accountable organisations.

On 2<sup>nd</sup> February 2016 the London Transformation Group agreed that a paper be considered by CCGs and NHS England (London) during February / March 2016 outlining:

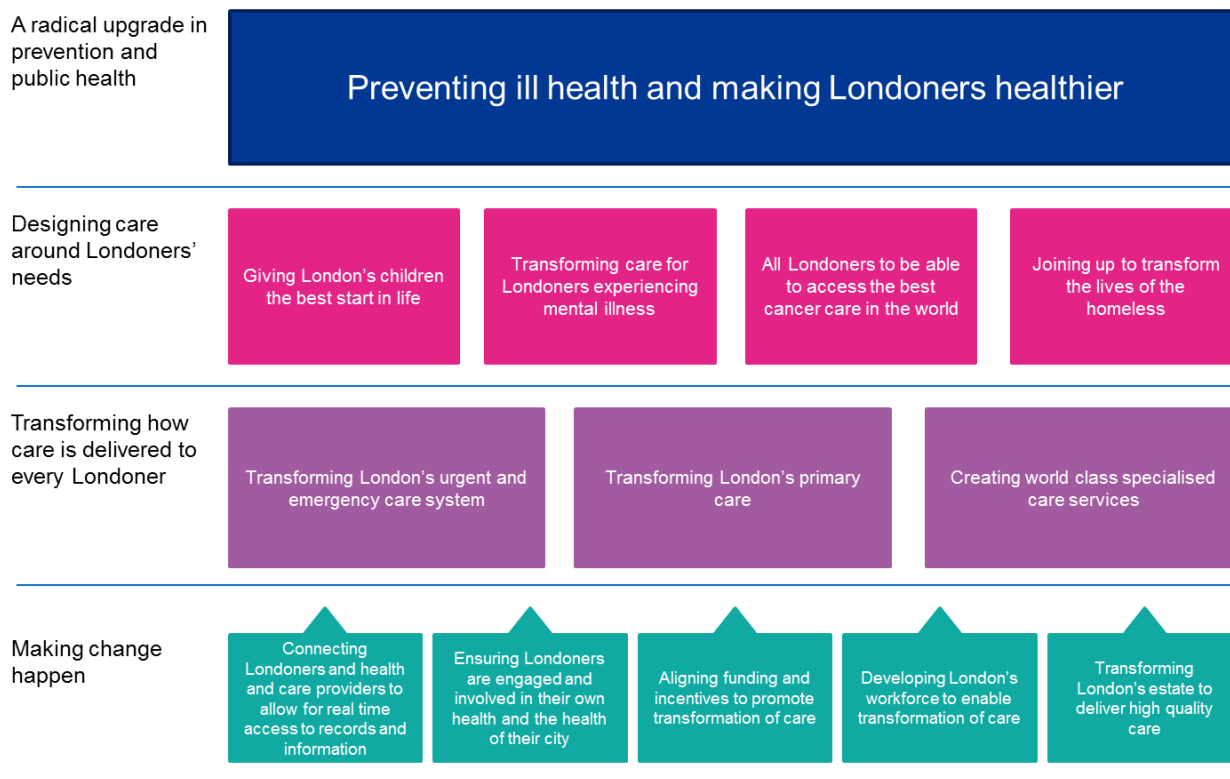
- Progress to date in the Healthy London Partnership
- The output of the planning process described in the previous paper
- A recommendation to proceed with the proposed programme plans for FY16/17 that have been developed during the planning process, on the basis of a 0.15% contribution per CCG based on 16/17 allocations, a contribution of £1.47m from NHS England (London), and a small level of associated risk to be managed in year.

### Information about the review round

Date	Forum	Outcome
21 Jan 2016	Programme SROs meeting	Endorsed the approach and update on progress
01 Feb 2016	Payments and Funding Group	Endorsed the approach and update on progress
02 Feb 2016	London Transformation Group	Endorsed the approach and update on progress
Feb / March 2016	Final paper considered by CCG governing bodies (or committees where appropriate) and NHS England (London)	

## 1. Context and background

From May 2015 onwards the 13 programmes shown below began mobilising to address London's priority transformation areas and needs:



Over the last 3 months, planning for the suite of Healthy London Partnership programmes for the Financial Year 2016/17 has been underway. At the onset of this process, in November-December 2015, the London Transformation Group shared a paper with CCG Governing Bodies asking them to:

- Note the progress to date of the Healthy London Partnership (March – September 2015)
- Agree to support longer term commitment to the Healthy London Partnership for 2016/17 and 2017/18
- Agree the proposed planning process and the financial planning assumption for 2016/17 and 2017/18
- Agree the proposed ongoing governance arrangements

This paper provides the next update to CCG Governing bodies and NHS England, London, outlining the most recent achievements by programmes, the final proposals that have been developed by programmes for what they will deliver in 2016/17, their associated resource requirements and the planned steps to ensure there is close alignment with STPs.

## 2. Summary of progress to date

Healthy London Partnership programmes have been progressing work at a pan-London level to support and enhance transformation at local and borough levels. When we initiated this partnership we committed to making positive change happen through prioritising key areas where working at a pan-London level would speed up improvements. As an illustration of the

success of this approach, the Services for Homeless People Programme completed its deliverables for the year and Central London and Lambeth CCG have been appointed joint Lead Commissioners.

Other highlights from this past quarter include successful partnership working in the Prevention Programme leading to a range of healthy pan-London initiatives from the 'The Walking Tube Map', increased uptake of NHS organisations in the Healthy Workplace Charter, to targeted interventions for inactive males through fanActive with London's footballs clubs.

A number of publications have highlighted opportunities to help streamline services, improve health outcomes and provide implementation guidance. Since our last update, a diabetes guide for schools, guidance to meet new access times for early intervention in psychosis, specifications for urgent and emergency care facilities across London, and draft standards for crisis care data (currently being considered to become national standards) have been produced.

In October, we co-hosted the One Year On anniversary event of Lord Darzi's London Health Commission highlighting the progress London Health Board partners (Greater London Authority, London Councils, Public Health England and Healthy London Partnership) are making towards helping our capital become the healthiest city in the world. Crucially the event was an opportunity to focus on the work we have yet to do before reaching our goal. In December Government signed and endorsed the London Health and Care Collaboration Agreement, representing a significant positive step for London. The approach that London partners proposed of developing and testing different elements of health and care devolution across the capital have given us a clear direction for making the improvements necessary to achieve positive change.

A full progress report is shared quarterly detailing progress which supplements the monthly progress reports for London Transformation Group that are shared widely and the eNews that provides updates to stakeholders every fortnight. The most recent quarterly progress report has been included as Appendix 2. Progress highlights include:

- Publication of three key documents by the Children & Young People programme; a London guide for teachers and parents of children and young people with diabetes; the emerging findings on crisis care in hours for children and young people; and London asthma standards for children and young people.
- A London estates database has been successfully delivered and a team of experts has been established to support CCGs and SPGs with their estates planning.
- SPG leads have approved an information sharing architecture based on the use of Integrating the Healthcare Enterprise (IHE) standards. The architecture has been developed so that information can be shared successfully across the capital and will help resolve compatibility issues between various IT systems across London.
- The Cancer programme has been establishing a London-wide programme of work to improve the resilience of diagnostics (gastroscopy, flexible sigmoidoscopy, colonoscopy, MRI, CT, non-obstetric ultrasound and cystoscopy) which will support operational delivery of the cancer targets and five year sustainability and transformation plans for each strategic planning group (SPG).

- Draft standards for a crisis care data set have been published and work has commenced with the Professional Record Standards Body to turn these into national standards.
- Mental health supported the implementation of new access and waiting time standards for early intervention in psychosis in London, which is a significant achievement for the programme. A shadow go-live date went ahead in November 2015 to ensure the system is prepared for the introduction of the target in April 2016. This has been supported by a range of data, training, education and quality improvement activities.
- Personalisation programme developed a case for change. The report outlines the value of a number of self-care interventions in terms of individual or self-reported benefits, clinical outcomes, cost benefit and operational impact, as well as supporting the argument to progress these at pace across London.
- Two schools in Tower Hamlets and Haringey and a housing estate in Hackney are developing solutions to childhood obesity for our Healthy Steps Together initiative. A *Commissioning for Prevention Guide* was published with a follow-up workshop on 11 January 2016.
- The Prevention programme partnered with the Greater London Authority (GLA) to host the first Workplace Health Charter event promoting the charter to trusts. The programme gained the commitment of a group of hospital charities to work together to support workplace health. This will include providing matched funding for the development of workplace health tools and resources in 2016/17.
- London-wide specifications for UEC facilities were developed and launched in November 2015. Building on the national UEC review and work to date in London, the programme coordinated wide ranging patient, public and clinical engagement to ensure the specifications responded to challenges and expectations.
- The innovative NHS 111 Patient Relationship Manager pilot successfully went live. It gives NHS 111 callers a better experience and more personalised care by using cloud technology to share data.
- A draft Workforce Strategic Framework for London has been developed to establish consistency and clarity around the most pressing workforce challenges in London. CCGs will be able to use the Framework to inform and build the workforce development plans that underpin their local transformation activities.

### 3. Planning update

CCG governing bodies and NHS England (London) have broadly supported the principle of continuing to support the Healthy London Partnership by providing a commitment to continue funding the partnership for the next two financial years. This paper provides an update on the outcome of the planning process that was described in the last paper to governing bodies.

The London Transformation Group committed the Healthy London Partnership to undertake a robust planning process, based on the same set of planning principles as were used in FY2015/16, reviewing priorities and programmes, agreeing programme deliverables beyond 2015/16, and indicating the required resources for 2016/17 and beyond. A financial planning

assumption based on a maximum contribution of 0.15% of 2016/17 and 2017/18 allocations (in line with that for 2015/16) was proposed for CCGs and for NHS England (London) the maximum planning assumptions for 2016/17 and 2017/18 are £1.47m and £1.51m respectively. Appendix 1 includes the agreed CCG and NHS England (London) allocations and contributions to HLP for FY15/16, 16/17 and 17/18 and the proposed allocation of resources across programmes and central functions.

### 3.1 Planning principles for 2016/17

The principles that were applied to the planning process for 2016/17 and 2017/18 are set out below:

- The planning process has been jointly led by CCG Chief Officers and NHS England Programme SROs and there will be significant engagement across London on the development of the programme priorities and plans
- Programme planning has been conducted on the basis that only activities that would add value when developed once for London or as a mechanism to facilitate local transformation will be agreed
- Engagement with CCG and SPG leads has continued throughout the process in order to align with their own planning processes and timetables.
- The planning process will be broadened to incorporate Strategic Clinical Network and Academic Health Science Network planning to ensure alignment is maximised to deliver against agreed London priorities and to minimise duplication across the system.
- A financial planning assumption of maximum 0.15% allocations as per 2015/16 was proposed for CCGs. The proposed planning assumption for NHS England was £1.3m.
- Healthy London Partnership is not a levy and programme budgets were built bottom up based on plans.
- The programme governance, specifically the Payments & Funding Group and the London Transformation Group, has been asked to consider and agree the proposed plans.

### 3.2 Planning process

A robust planning process has been followed over the last three months under the guidance of the London Transformation Group, London Chief Officers Group, Programme Boards and the Payments & Funding Group. Programme plans shown have been signed off by their respective Programme Boards, including their member SPG representatives.

Following the initial bottom-up development of programme plans a series of steps were taken to reduce the total Healthy London Partnership resource request for 2016/17. The steps included the de-prioritisation of resources that were not critical to the delivery of the programmes' core objectives, identification of items that could be funded through capital, identification of efficiencies for example through pooling common requirements and a series of financial evaluation by the Payments & Funding Group to challenge programmes on the required resources to deliver their objectives. These steps resulted in a ~30% reduction in the originally proposed resource requirement.

Appendix 3 contains the full detail of programme plans for 2016/17 and the associated financial breakdown per programme. These programme plans have been subject the consideration of the London Transformation Group.

As we move into the next financial year, programmes will continue to align their 2016/17 plans to emerging Sustainability and Transformation Plans (STPs) to ensure that their activities support the critical priorities identified by local areas for the coming year. It is expected that a further review of programme plans will be conducted during July 2016 upon completion and submission of STPs.

### **3.4. Final programme resource requirements**

The detailed programme plans in Appendix 3 set out the level of pay and non-pay resource associated with delivery of the programme objectives. The programmes within Healthy London Partnership have attracted a number of sources of funding in addition to the contributions made by CCGs and NHS England (London). These have included contributions from NHS England National and SCN funding, Health Education England and existing levy contributions. In addition the Digital programme is hoping to secure capital funding during 2016/17.

The total cost of Healthy London Partnership programmes to be funded jointly by CCG and NHS England (London) contributions is £18,002,692 which represents an average CCG contribution of £521,270. Appendix 1 contains the associated allocation broken down by CCG and for NHS England plus the proposed allocation of resources across programmes and central functions.

It was reported to Chief Officers that following discussions amongst Chief Financial Officers regarding the London Levies an affordability challenge remained, with a variance of £627,078 between items that were agreed to be funded and the total levies income of £6m. Programme SROs recommended that this variance should be considered alongside the Healthy London Partnership allocations. The HLP ask and levy variance amount to a total of £18,629,770 set against a total income of £18,152,640. The residual risk to be managed in year is £477,131 (on average this represents an assessed maximum risk of £15k per CCG).

At their meeting on 21 January 2016 the London Chief Officers supported the proposal from programme SROs that Healthy London Partnership would manage the resource ask within the 2016/17 allocation funding level, also covering the levy variance. Chief Officers and SROs considered that approximately £477k of risk is manageable in year within the context of total expenditure of £18 million and further resource opportunities that might exist as part of the 2016/17 Planning Round.

Further work will be done to develop a single budgetary framework to manage this residual risk across the HLP and existing levy arrangements. This will also potentially allow for CCGs to mainstream HLP initiatives, should they wish and agree to do so in future and to manage any transformational activities currently within the levies as part of HLP programme activities. The Payments and Funding Group has been asked to recommend an approach to this.

Oversight of the management and mitigation of the residual risk will sit with the London Transformation Board which will consider and agree with all partners the most appropriate actions in year. This would include options such as;

- Securing additional external resources
- Procurement and programme efficiency savings

- Unplanned slippage or underspends
- Delay or reduce programme spend in year

The London Transformation Group would be supported in this role by the Payments and Funding Group and regular reporting will be made available to CCGs.

#### **4. Recommendation**

CCG Governing Bodies and NHS England (London) are asked to agree that the programme planning process can be concluded on the basis that the programme plans were agreed by the Healthy London Partnership; that is Programme Boards, Payments & Funding Group and the London Transformation Group.

The London Transformation Group asks that CCG Governing Bodies reflect the financial planning assumptions for 2016/17 and 2017/18 recommended by Chief Officers on 21 January 2016 and agree to cover the levy variance of £627,078, accepting that the associated risk of £477,131 will be managed in year.

## **Appendices**

**Appendix 1 – Allocations by CCG and NHSE England (London) and proposed resource breakdown by programme**

**Appendix 2 – Healthy London Partnership Quarterly report Oct-Dec 2015**

**Appendix 3 – Final collated HLP 16/17 programme plans**



## Appendix 1. Allocations by CCG and NHS England (London) and proposed resource breakdown by programme

a) The associated allocations broken down by CCG and NHS England (London) are shown in the table below:

CCG	2015/16 allocation	0.15% contribution to HLP	2016/17 allocation	0.15% contribution to HLP	2017/18 allocation	0.15% contribution to HLP
Barking and Dagenham	£250,259,000	£375,389	£262,332,000	£393,498	£270,303,000	£405,455
Barnet	£431,762,000	£647,643	£457,630,000	£686,445	£469,972,000	£704,958
Bexley	£272,142,000	£408,213	£293,260,000	£439,890	£301,097,000	£451,646
Brent	£384,702,000	£577,053	£406,569,000	£609,854	£414,713,000	£622,070
Bromley	£398,737,000	£598,106	£421,490,000	£632,235	£430,892,000	£646,338
Camden	£342,429,000	£513,644	£354,671,000	£532,007	£355,250,000	£532,875
City and Hackney	£353,133,000	£529,700	£369,643,000	£554,465	£378,756,000	£568,134
Croydon	£434,164,000	£651,246	£467,031,000	£700,547	£479,050,000	£718,575
Ealing	£452,261,000	£678,392	£475,508,000	£713,262	£485,672,000	£728,508
Enfield	£360,706,000	£541,059	£385,869,000	£578,804	£396,778,000	£595,167
Hounslow	£308,948,000	£463,422	£330,098,000	£495,147	£338,839,000	£508,259
Greenwich	£336,735,000	£505,103	£359,356,000	£539,034	£367,702,000	£551,553
Hammersmith and Fulham	£249,577,000	£374,366	£259,170,000	£388,755	£260,917,000	£391,376
Haringey	£325,385,000	£488,078	£344,095,000	£516,143	£352,321,000	£528,482
Harrow	£257,460,000	£386,190	£280,748,000	£421,122	£288,768,000	£433,152
Havering	£315,795,000	£473,693	£342,047,000	£513,071	£352,441,000	£528,662
Hillingdon	£317,013,000	£475,520	£343,399,000	£515,099	£352,389,000	£528,584
Islington	£313,358,000	£470,037	£326,996,000	£490,494	£335,737,000	£503,606
Kingston	£207,790,000	£311,685	£217,326,000	£325,989	£223,132,000	£334,698
Lambeth	£431,061,000	£646,592	£451,428,000	£677,142	£461,374,000	£692,061
Lewisham	£384,876,000	£577,314	£405,174,000	£607,761	£415,400,000	£623,100
Newham	£399,222,000	£598,833	£418,341,000	£627,512	£429,441,000	£644,162
Redbridge	£314,163,000	£471,245	£335,688,000	£503,532	£345,428,000	£518,142
Richmond	£216,279,000	£324,419	£225,963,000	£338,945	£231,374,000	£347,061
Southwark	£375,544,000	£563,316	£393,667,000	£590,501	£403,327,000	£604,991
Merton	£225,977,000	£338,966	£237,592,000	£356,388	£243,309,000	£364,964
Sutton	£222,794,000	£334,191	£233,743,000	£350,615	£239,662,000	£359,493
Tower Hamlets	£335,940,000	£503,910	£353,213,000	£529,820	£364,541,000	£546,812
Waltham Forest	£321,004,000	£481,506	£338,723,000	£508,085	£346,651,000	£519,977
Wandsworth	£391,761,000	£587,642	£409,092,000	£613,638	£417,636,000	£626,454
West London (K&C & QPP)	£341,455,000	£512,183	£353,521,000	£530,282	£354,098,000	£531,147
Central London (Westminster)	£257,319,000	£385,979	£267,044,000	£400,566	£267,480,000	£401,220
NHS England		£1,371,999		£1,471,999		£1,505,500
<b>Total</b>	<b>£10,529,751,000</b>	<b>£17,166,634</b>	<b>£11,120,427,000</b>	<b>£18,152,640</b>	<b>£11,374,450,000</b>	<b>£18,567,175</b>

b) The proposed allocation of these resources across programmes and central functions is shown in the table below:

Programme	Resource ask		Sources of income						Total income	Core ask HLP core items	
	FY15/16 TOTAL programme charter budget	Total FY16/17 ask (includes all sources of funding)	HLP (CCGs and NHSE) income	NHSE	Levy	SCN	Capital	Other			
Prevention	£702,393	£1,645,691	£18,152,640						£18,152,640	£1,645,691	
Cancer	£2,073,270	£2,369,035				£896,000	£1,000,000			£1,896,000	£473,035
CYP	£667,268	£908,602					£266,268		£122,115	£388,383	£520,219
Mental Health	£1,439,001	£1,916,258					£330,299			£330,299	£1,585,959
Primary Care	£2,682,984	£2,224,987								£0	£2,224,987
U&EC	£483,951	£611,817					£23,650			£23,650	£588,167
U&EC 111	£651,125	£1,832,927			£90,000					£90,000	£1,742,927
Estates	£472,380	£460,286								£0	£460,286
Digital Programme	£2,428,711	£4,376,130						£1,800,000		£1,800,000	£2,576,130
Workforce	£825,442	£2,082,419							£1,100,354	£1,100,354	£982,065
Personalisation	£785,015	£644,205								£0	£644,205
Spec Comm	£0	£159,219								£0	£159,219
Homeless	£298,803	£298,803								£0	£298,803
Payments and Funding	£723,980	£95,700								£0	£95,700
Portfolio support function	£865,162	£871,828								£0	£871,828
Shared functions (graphic design and print, events management, website, modelling, evaluation, analytics, training)	n/a	£1,340,000								£0	£1,340,000
Elective Care	n/a	£22,500								£0	£22,500
Devolution	n/a	£200,000								£0	£200,000
Accountable Care Organisations	n/a	£120,950								£0	£120,950
Improvement collaborative	n/a	£495,000								£0	£495,000
Contingency	£715,515	n/a							n/a	n/a	
Non-pay on costs	£1,350,000	£955,020							£0	£955,020	
Levy variance										£627,078	
	£17,165,000	£23,631,378	£18,152,640	£90,000	£896,000	£1,620,217	£1,800,000	£1,222,469	£23,781,325	£18,629,770	
										Risk to manage £477,131	