Health and Wellbeing Board

24th March 2014



Report of:Tower Hamlets Clinical Commissioning Group

Classification: Unrestricted

Operating Plan and QIPP

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Executive Summary

- Each year the CCG is required to submit an Operating Plan to NHS England.
 The Operating Plan outlines the key actions and outcomes the CCG expects
 to achieve that align to NHS England's key priorities as outlined in the annual
 Operating Framework. The CCG has submitted a draft submission on the
 14th February, with a final draft due on the 4th April.
- This paper also contains a summary of the draft Better Care Fund submission approved by the CCG executive in January
- Tower Hamlets CCG seeks to make improvements by developing programmes that focus on Quality, Innovation, Productivity and Prevention (QIPP).
- Our plan shows us working towards improvements on key outcomes, and achieving our planned surpluses over the next two years
- The CCG Governing Body signed off the operating plan and QIPP as part of the NHSE assurance process at the March Governing Body

Recommendations:

The Health and Wellbeing Board is recommended to:

Note the report

1. <u>DETAILS OF REPORT</u>

Each year the CCG is required to submit an Operating Plan to NHS England. The Operating Plan outlines the key actions and outcomes the CCG expects to achieve that align to NHS England's key priorities as outlined in the annual Operating Framework. The CCG has submitted a draft submission on the 14th February, with a final draft due on the 4th April.

There are four main sections to the Operating Plan submission:

- 1) Self-certification on key themes of quality
- 2) Trajectories for improved outcomes
- 3) Trajectories for measurement of the Quality Premium, including the identification of a local metric

The CCG is also required to submit a finance return giving a medium term financial plan over the next two years (see QIPP)

2. FINANCE COMMENTS

NA. The paper shows how the QIPP plans attach ensure delivery of planned surplus over the next two years

3. **LEGALCOMMENTS**

NA

None

6. <u>IMPLICATIONS TO CONSIDER</u>

NA			
Appendices			