

One CCG with 3 separate and strong localities, but variations in the quality of primary care
450,000 population, CCG Budget of £553m, 2013/14 QIPP challenge of £18.6m

Strategic Context	Local Purpose and Vision	Strategic priority area	NHS Outcomes Framework domains	Strategic priority initiatives	Delivery Priorities	QIPP and Transformational Change 13/14	2014/15 Future vision
Significant deprived communities	"Working together to improve the NHS"	Primary care quality and safety	2, 3, 4	Peer support, with focus on LTC; targeted support Ongoing development of integrated teams and promotion of telehealth	Delivery of NHS Constitution / NHS Mandate / Everybody Counts Effective planning and delivery of joint strategic priorities with health and wellbeing boards Effective Delivery of Quality, Innovation, Prevention and Productivity across the Local Health Economy Delivery of performance improvement for A&E waits, ambulance turn around times, Delayed Transfers of Care and CAMHS waiting times	LTC	Patients confidence that information about themselves is shared between clinicians accurately and in a timely manner Greater integration of health and social care- positive impact for frail elderly Reduction in health inequalities People with long term conditions managed more effectively and able to self manage Improvements in life chance for children and young people NHS Trusts supported to improve quality and efficiency Culture of excellence in relation to patient experience
Increasing no. of patients with LTC		Frail (older) people	2, 3, 4	Integrated end of life services Reduce Fractured Neck of Femurs/access to appropriate rehab Consider specialist integrated gerontology assessment service		urgent care planned care EOL mental health community services referral management	
Increasing no. over 75s req. support		Wellbeing in mental health	1, 2, 3, 4	Promote shared care models. CPN interface with integrated teams Reduce waiting times for CAMHS assessment and treatment Improve access to IAPT services Improve physical health/wellbeing of people with long term mental health conditions Improve mental health and wellbeing of LTC patients		medicines use prescribing	
Large variation in Life		Best practice in acute hospital care	2, 3, 4, 5	Timely and effective discharge and post-discharge support Enhanced Recovery pathways implemented Streamline patient pathways (using new technologies) Ensure choice within maternity services/reduce still and low weight births Implement recommendations of the WM stroke care review Embedding patient quality/safety tools		Confirm new QIPP initiatives	
High rate of hip		Healthy Living and Lifestyle Choices (LA lead)	1	Encourage GP promotion of healthy living initiatives incl MECC and health checks Ensure good uptake of training by practice staff Infectious Diseases service review		Sustainable specialities programme	
Rapid increased in birth rate in most						Frail older people's transformation	
High level of alcohol related admissions	Improve the health and wellbeing of our community						
Lower cancer screening uptake	Provide the best possible patient experience						
high level of infectious diseases	Ensure choice, value for money and high quality care						
<p>Specific Targets to be met from NHS Constitution and NHS Mandate</p> <p>RTT Admitted 90% within 18 weeks RTT Non-admitted 95% within 18 weeks RTT Open Pathways 92% within 18 weeks No over 52 week patients on open pathways Diagnostic tests 99% within 6 weeks</p> <p>A&E Patients 95% dealt with seen within 4 Hours No waits from decision to admit to admission in A&E over 12 hours</p> <p>Cancer 93% of urgent referrals seen within 2 weeks Cancer 96% patients have first treatment from diagnosis within 31 days Cancer 85% patients have first treatment from GP referral within 62 days</p> <p>Ambulance 75% of Category A calls arriving within 8 minutes All handovers between ambulance and A & E must take place within 15 minutes</p> <p>Zero Unplanned Sex Accommodation Breaches</p> <p>Cancelled operations on the day, to be offered another binding date within 28 days No urgent operation to be cancelled for a 2nd time</p> <p>Mental Health (CPA) 95% of patient followed up within 7 days of discharge</p> <p>3-2% reduction in potential of years life lost from amenable mortality No growth in emergency admissions year on year Health acquired infections to show year on year improvement Improvement in patient experience as reported in the Family and Friends Test</p>							