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Dear members,

I am writing to update you regarding some of the most pertinent aspects of the 2021/22 NHS priorities and operational planning guidance. NHS England describes how it *"sets the priorities for the year ahead, against a backdrop of the challenge to restore services, meet new care demands and reduce the care backlogs that are a direct consequence of the pandemic, whilst supporting staff recovery and taking further steps to address inequalities in access, experience and outcomes."*

Firstly, it is worth stating that the overall financial settlement only covers the first six months of this financial year (21/22). Whilst "*the financial settlement for months 7-12 will be agreed once there is greater certainty around the circumstances facing the NHS going into the second half of the year."*

Commissioning/funding:

Secondly, we would also like to highlight some of the specific funding arrangements that are cited within the guidance, including:

* £55m care home premium to support PCNs delivery of the Enhanced Healthcare in Care Homes (EHCH) to be allocated to CCGs separately.
* BCF to continue in 21/22, CCG minimum contribution to BCF to increase by 5.3% to 4.26bn.
* NHS Standard Contract must be used when commissioning.
* System Oversight Framework being published for 21/22 with consistent expectations of systems.
* For the first six months of 21/22, the NHS has been given an additional £6.6 billion and £1.5 billion for Covid 19 costs above the original mandate.

Integrated Care Systems (ICSs)

More broadly, the Implementation Paper provides some interesting insight regarding the future operation of ICSs. Firstly, it says how ICSs four core purposes include:

* Improving outcomes in population health and healthcare
* Tackling inequalities in outcomes, experience and access
* Enhancing productivity and value for money
* Helping the NHS to support broader social and economic development

Whilst it also provided some further detail concerning the operation of ICSs within the health and care landscape:

* There will be one statutory ICS NHS Body and one statutory ICS Health and Care Partnership body. CCG functions will be subsumed into the ICS NHS body.
* The ICSs will 'forge deep relationships with local government'.
* ICS System Development Plans (SDPs) must be agreed upon by the end of Q1 and regularly reviewed and updated throughout the year.
* Mental health hubs being set up in each ICS to give occupational health and wellbeing support to NHS staff.
* Roll out 2-hour crisis community health response at home 8 am to 8 pm 7 days a week by April 2022.

In collaboration with its White Paper Working Group, Care England will continue to ensure that the care sector's voice is heard as these new health and care structures develop.

Learning Disability/mental health services:

The NHS Planning Guidance documents also places some welcome light on how the NHS will seek to improve mental health and services for people with LD and/or autism over the coming year.

* The prioritisation of Annual Health Checks for people with a learning disability is seen as one key mechanism for doing so. It states that "*It is vital to continue to make progress on our LTP commitments for people with a learning disability, autism or both. We need to make progress on the delivery of annual health checks for people with a learning disability*."
* All CCGs must, as a minimum, invest in mental health services to meet the Mental Health Investment Standard.
* Alongside, improved accuracy of GP LD registers and reduced reliance on inpatient care for people with LD.
* It is increasing community capacity to enable more people to receive personalised care.
* The aim is to tackle inequalities for people with LD by asking systems to implement the actions for the LeDeR reviews.100% of LeDeR reviews to be completed within six months of notification.

NTPS (National Tariff Payment System)

20/21 National Tariff Payment System (NTPS) remains in place from 1st April until the new 21/22 NTPS comes into force. NTPS should continue to be the basis for contracting and payment with non-NHS providers for services within the scope of the NTPS.

The [NTPS under consultation](about:blank) covers inflation and efficiency factors however, there are elements yet to be concluded and thus, we believe, CCGs should not start to implement fee uplifts until these matters are concluded and there has been consultation and engagement with providers.

Inflation/Efficiency points:

* NHS Pay has not been settled and thus the proposed uplift calculation needs revision pending that announcement/adjustment
* Efficiency Factor is based on work completed 5 years ago, which does not accurately reflect the non-acute sector (it is based on acute NHS hospitals) or reflect the changing platform post covid or that 70% of care home costs are pay related more closely tracking NMW than acute trusts pay.

The obligations remain unchanged for CCGs when determining prices to:

* Act in best interest of patients/residents
* Be Transparent
* Consult/Engage with providers

Upcoming developments:

Going forward, the documents indicate that several pieces of guidance are still to be issued, including:

* Those future developments surrounding Commissioning for Quality and Innovation (CQUIN). No 21/22 CQUIN scheme published at this stage. The NTPS consultation proposes CQUIN be brought within the scope of the NTPS.
* Given that the financial settlement only covers the first six months of this financial year, we expect further detail for months seven to twelve later this year.
* Further detail regarding hospital discharge reimbursement arrangements is expected.
* Governance arrangements will be confirmed in due course for the NHS and Health and Care Partnership bodies.
* The NHS is asking systems to review and refresh their people plans to reflect the progress made in 2020/21. In turn, this may have some impact on your local areas.

Finally, we would point members towards the planning documents themselves, which can be found at the following link: [NHS England](about:blank)

If you have any thoughts or worries, please contact [Rwilliams@careengland.org.uk](about:blank)

April 2021