

## 2021/22 NHSE/I Operational Planning Guidance

### Public Board

20 May 2021

<b>Presented for:</b>	Information
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<b>Previous Committees:</b>	NONE

Trust Goals	
The best for patient safety, quality and experience	✓
The best place to work	✓
A centre for excellence for research, education and innovation	
Seamless integrated care across organisational boundaries	✓
Financial sustainability	✓

Trust Risks (Type & Category)				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Tolerance
Workforce Risk				
Operational Risk				
Clinical Risk	✓	Capacity Planning	Cautious	↔ (same)
Financial Risk	✓	Revenue Funding and Liquidity	Cautious	↔ (same)
External Risk				

Key points	
1. This paper updates the Board on the Trust's draft submission in response to 2021/22 NHSE/I Operational Planning Guidance.	Information

## 1. Summary

This paper sets out the context to the 2021/22 NHSE/I Operational Planning Guidance and assurance that the Trust has submitted our draft return.

## 2. Background

The Board signed off the Trust's internal annual plan for 2021/22 in December 2020. At this time it was unclear if a national planning exercise would take place having been suspended during the pandemic.

In April 2021 the new planning guidance was released by NHSE/I indicating a limited exercise in projecting activity, finance and workforce for the first six months of 2021. The financial arrangements were largely kept in "steady state" until the autumn as the government assessed the effect of the vaccine programme.

A number of specific documents were requested:

1. Activity trajectory - Trust level activity against different delivery areas (inpatients, outpatients etc.) measured against Elective Recovery Fund (ERF) trajectories where stated.
2. Workforce return - Whole time equivalent by category
3. System finance plan submission - ICS level financial plan
4. Narrative plan submission - Narrative describing the Trust submissions

The planning returns have been requested on a geographic basis with the ICS leading the West Yorkshire and Harrogate submission. The Trust was therefore asked to prepare a number of schedules by the 29<sup>th</sup> April to support the ICS's draft submission to NHSE/I on the 6<sup>th</sup> May. The table below details the national timeline:

Date	Milestone
<b>12 April</b>	COMPLETE - Provider capital and cash plan submission
<b>w/c 26 April</b>	COMPLETE - ICS planning checkpoint meetings with place senior leads
<b>30 April*</b>	COMPLETE - Draft Place Plan submission to ICS core team, including: <ul style="list-style-type: none"> <li>• Draft activity, workforce (primary and secondary care) and MH workforce</li> <li>• Draft narrative plan submission</li> <li>• System finance plan submission</li> <li>• Mental Health finance submission</li> </ul>
<b>4 May</b>	COMPLETE - Update on final ICS Plan to System Leadership Executive Group
<b>6 May</b>	COMPLETE - Draft ICS Plan submission to NHSE/I
<b>w/c 24 May</b>	Non-mandated provider organisation finance plan submission
<b>w/c 24 May</b>	ICS planning checkpoint meetings with place senior leads
<b>28 May</b>	Final Place Plan submission to ICS core team, including: <ul style="list-style-type: none"> <li>• Final activity, workforce and MH workforce numerical submission</li> <li>• Final narrative plan submission</li> </ul>
<b>1 June</b>	Update on final ICS Plan to System Leadership Executive Group
<b>3 June</b>	Final ICS Plan submission to NHSE/I

### 3. Proposal

The Trust's submission details our activity plans with reference to the required activity increases to access the £1bn Elective Recovery Fund. The threshold for this funding is set against the baseline value of elective activity delivered in 2019/20 and is set at 70% for July 21 rising by 5 percentage points in subsequent months to 85%.

Modelling of forecasted activity within LTHT will deliver the following activity levels against the parameters outlined in the operational planning guidance.

Activity Type		April 21	May 21	June 21	July 21	Aug 21	Sept 21
Outpatient	Gateway	70%	75%	80%	85%	85%	85%
	LTHT Forecast	89%	90%	90%	91%	91%	92%
Elective	Gateway	70%	75%	80%	85%	85%	85%
	LTHT Forecast	75.5%	75%	80%	85%	85%	85%

Feedback to the ICS from NHSE/I on the WYHICS submission has been positive and no major changes are required prior to the final submissions on 3 June 2021.

### 4. Financial Implications

An analysis of the current submission suggests that the Trust would be able to have access to £10m of ERF funds due to our proposed trajectories.

### 5. Risk

The draft response to the NHSE/I operational planning guidance for 2021/22 affects the following level two risk categories:

- Capacity planning
- Revenue funding and liquidity

The Board's agreed risk appetite in regard to capacity planning is cautious. Risk in the external environment has increased markedly over the last 12 months due to the effects of the pandemic increasing NHS waiting lists. However, it is considered that this proposal does not change the Trust's risk position since we forecast we will achieve national planning requirements.

The Board's risk appetite in regard to revenue funding and liquidity is cautious. The implication of this proposal is that, subject to achieving the ERF gateways as an Integrated Care System the Trust will receive £10m of ERF funding. The Leeds system is forecasting a balanced financial position therefore the Trust's risk position is unchanged by this submission.

### 6. Communication and Involvement

The development of the Trust's submission has been communicated with corporate teams across the Trust with sign off of individual elements led by respective teams.

### 7. Equality Analysis

There is not thought to be any equality analysis required at this stage.

**8. Publication Under Freedom of Information Act**

This paper has been made available under the Freedom of Information Act 2000

**9. Recommendation**

This paper updates the Board on the Trust's draft submission in response to 2021/22 NHSE/I Operational Planning Guidance.

**10. Supporting Information**

None

Robert Hakin

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12 May 2021