

Agenda Item 5 – Joint Forward Plan & Operational Plan for 2024/25, Our Transformation Priorities & How we Measure Progress

Annex A - Infrastructure supporting BLMK's Delivery of its Operational & Financial Plan

The financial plan that was submitted contained £105.7m of efficiencies and CIPS (ICB - £27.1m, BHFT - £54.8m and MKUH - £23.8m). Although the financial plan that was submitted was balanced, the planning process surfaced a number of risks, that if not addressed would prevent the BLMK system from achieving financial balance.

As a result, it is important these risks are fully mitigated in 2024/25, and that an environment is created within the BLMK system that encourages collaboration in both operational and financial planning and delivering going forward, that results in improved financial sustainability into 2025/26 and beyond.

To improve the chances of fully mitigating the risk in the BLMK system, it is important the BLMK system takes a 'financial recovery' type approach to delivering the financial plan.

This includes all BLMK system partners agreeing to a single approach to Operational and Financial Plan Delivery Governance

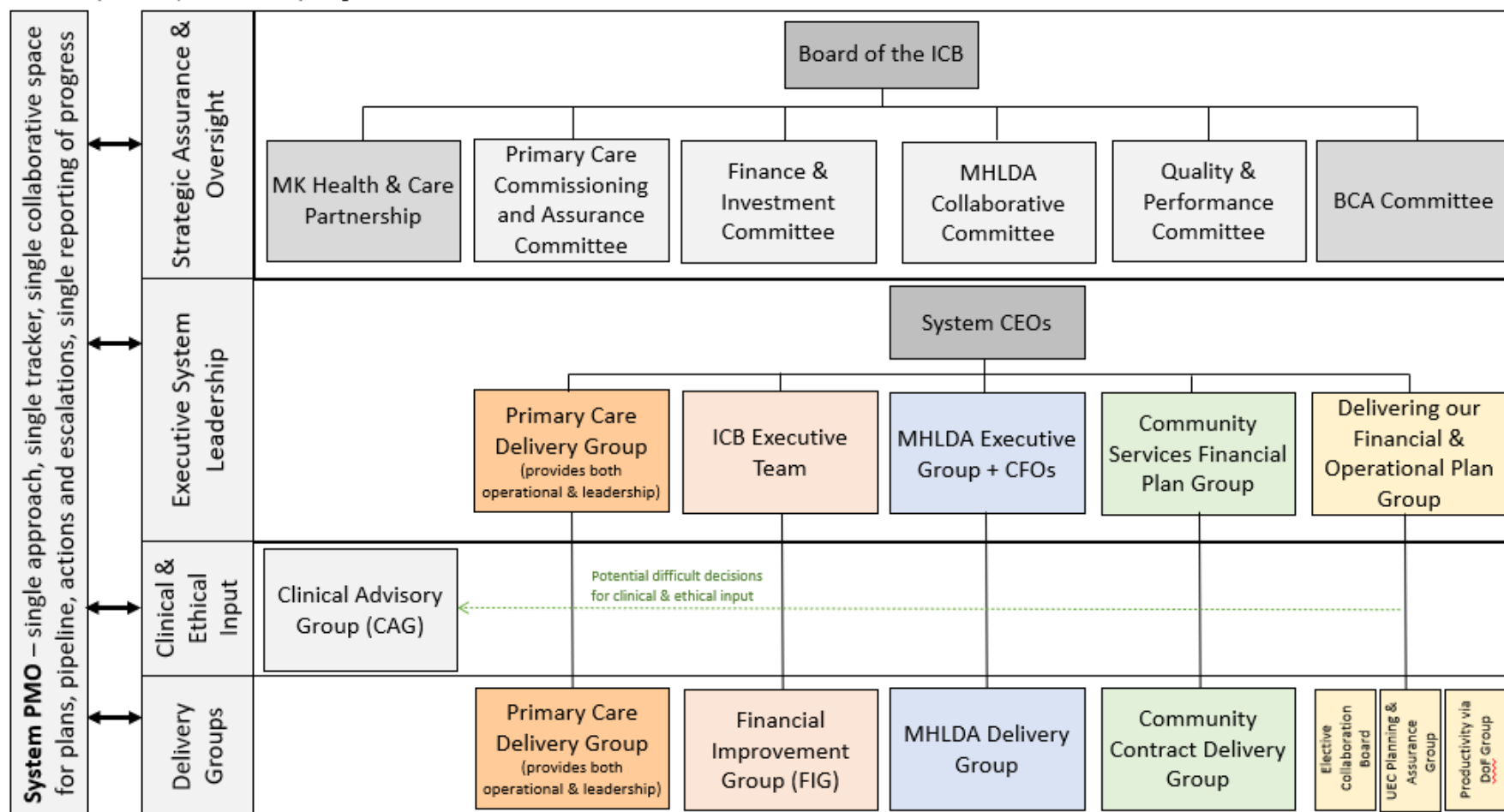
The accompanying document 'BLMK System Governance - Delivery of our Operational and Financial Plan' articulates how acute financial sustainability and productivity and efficiency delivery dovetails with the wider system ambition.

- The BLMK System governance for delivery of our Operational and Financial Plan brings together ICB, Acute, Primary Care, Community Services and MHLDA into one structure.
- Groups are focused on the successful delivery of existing efficiencies / CIP plans, generating more efficiency and productivity schemes to reduce financial risk, and to build a system collaborative environment (inc System PMO) for longer term financial sustainability (planning 2025/26 and beyond and the MTFT).
- Each key area of the BLMK system has an identified Delivery Group to generate and deliver efficiencies and productivity. Each key area of the BLMK system has an identified Executive Leadership Group for decision-making and escalation resolution.
- The BLMK system shares a single Clinical Advisory Group for clinical and ethical input.
- Progress on acute financial sustainability and productivity and efficiency delivery is channelled into the System CEO group.
- The structure is managed by a single system PMO (provided by the ICB)– which is responsible for consistent and robust generation of efficiency and productivity schemes, standardised reporting, tracking of progress, interdependencies management and the sharing of learning across the system.
- Lessons learnt will be captured and held centrally by the System PMO – any positive lessons from one areas will be replicated in another area (as we have seen from the good work in the MHLA collaborative between Oct-23 and now – and these lessons being used to build this governance structure).

BLMK System Governance - Delivery of our Operational and Financial Plan

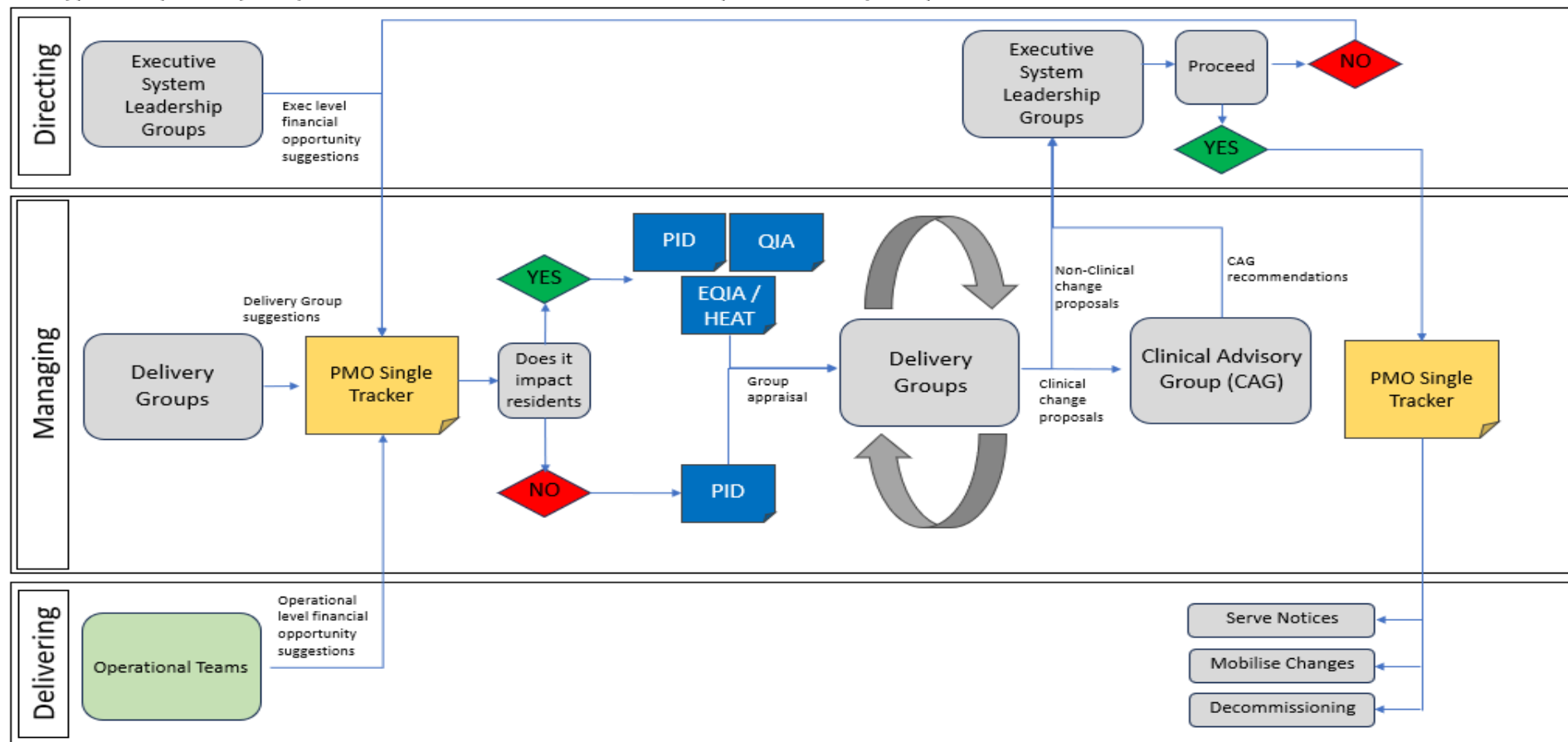
- The following network diagram shows how Operational & Financial Delivery in 2024/25 will be governed across BLMK – the five key areas being the ICB, Acutes, Primary Care, MHLDA and Community
- The Delivery Groups (bottom layer) provide the identifying, designing, initiating, agreeing and implementing of efficiencies and productivity schemes.
- Clinical and Ethical input is provided by the Clinical Advisory Group (CAG) – CAG reviews PIDS and QIAs and provides recommendations
- The Executive System Leadership groups (middle layer) provide the decision-making and escalation resolution
- The Strategic Assurance & Oversight Groups (top layer) provide the overall oversight of the work
- The System PMO (left-hand side) provides the consistency in generating efficiencies and productivity schemes, overall management, trackers, interdependencies, structure and reporting

Collaborative or Collective	Organisations Involved
ICB	ICB
Acute	ICB, BHFT & MKUH
Primary Care	ICB, GP Practices
MHLDA	ICB, ELFT & CNWL
Community Services	ICB, ELFT, CNWL & CCS



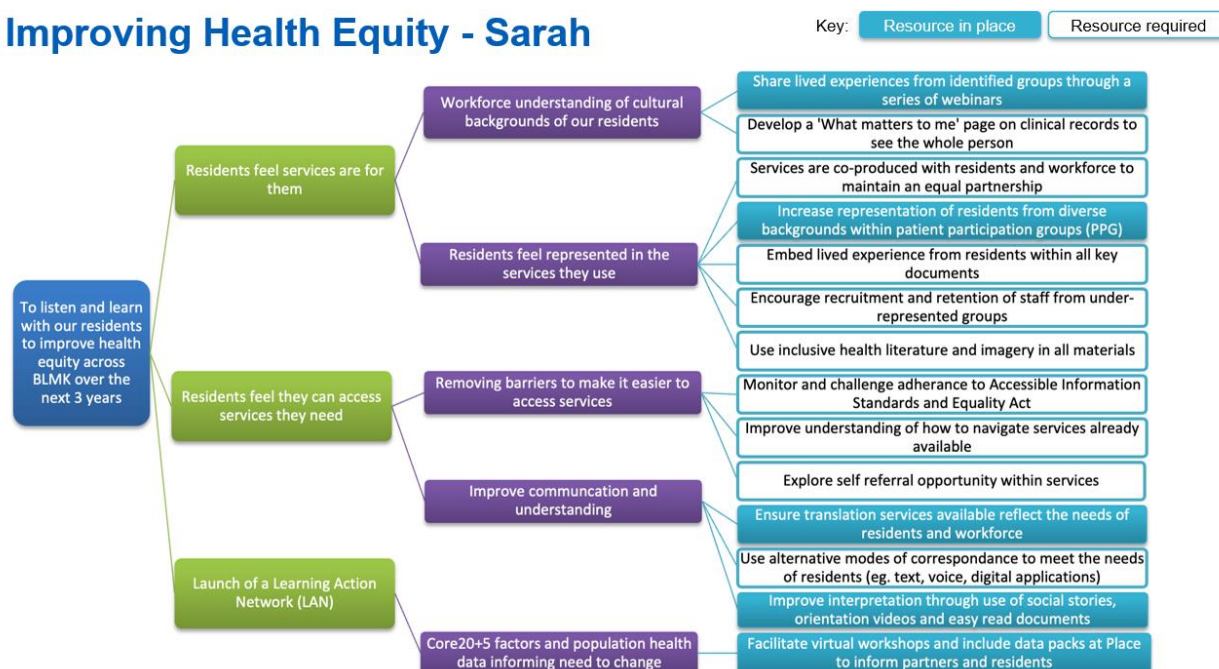
Process for identifying, designing, initiating, agreeing, implementing and operationalising efficiency and CIP schemes for addressing the financial risk/gap

- The following process flowchart shows how system efficiency and productivity ideas progress through design, initiation, agreement, implementation and into operational delivery.
- The process below ensures ideas to improve productivity and generate efficiencies are taken through appropriate due diligence using Project Initiation Documents (PIDs), Quality Impact Assessments (QIAs), Equality Impact Assessments (EQIAs) and Health Equity Assessment Tools (HEATs) – and that these are reviewed and appraised by Delivery Groups and CAG before a decision at the Executive System Leadership Groups.



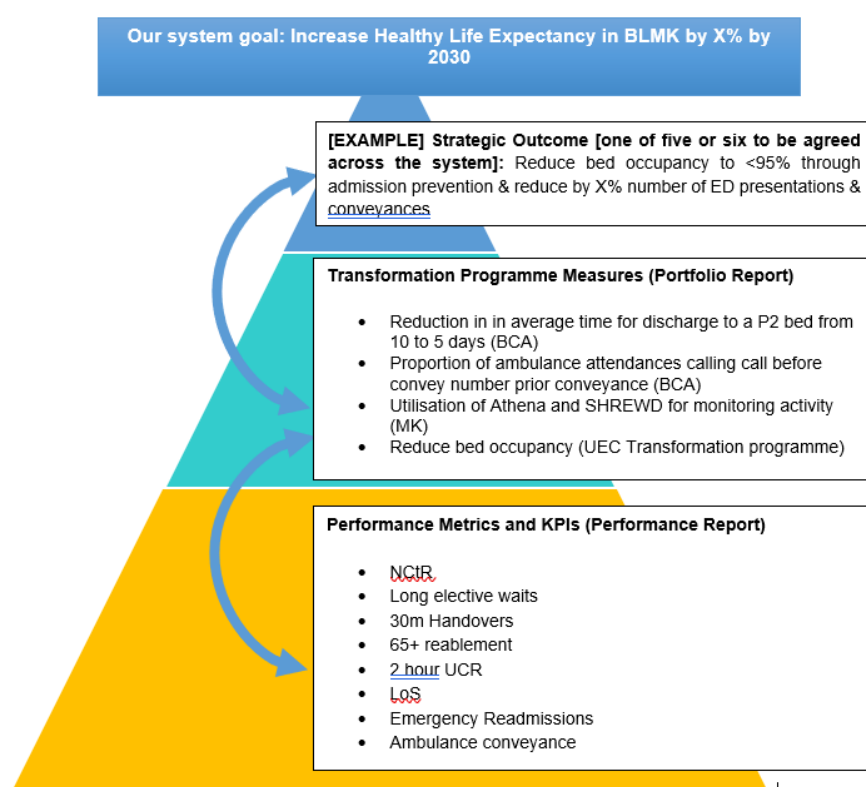
Annex B – ICB Transformation Priorities: Example Driver Diagram

1. Improving Health Equity - Sarah



Annex C – ICB Transformation Priorities: Example Data Pyramid, including BCA and MK

The Data Pyramid below demonstrates some of the connections between strategic outcomes, transformation programme measures and performance metrics and KPIs for the UEC programme and associated BCA and MK system programmes of work. All Performance and Outcome Measures will need to be SMART, and be agreed across the system.



Please note that **Annex D**, the BLMK Portfolio Report, is attached in the Reading Room