

2017/18 Quality, Innovation, Productivity and Prevention Programme

Governing Body meeting

Item 3

5 October 2017

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| Sponsor Director | Brian Hughes, Director of Commissioning and Performance |
| Purpose of Paper | |
| Governing Body signed off a Quality, Innovation, Productivity and Performance (QIPP) target of £21.6m in December 2016. This target was set in order to deliver NHS Sheffield Clinical Commissioning Group (CCG) commissioning intentions for 2017/18 and to meet our share of the Sustainability and Transformation Partnership (STP) CCG financial control total agreed with NHS England. This paper presents Governing Body with an update on the position against the QIPP target and agreed QIPP plan at month 5 2017/18. | |
| Key Issues | |
| <p>The QIPP plan was increased to £19.7m after Governing Body agreed to implement additional actions to manage the financial position in September 2017 and at Month 5 we have £1.9m of unidentified QIPP which contributes to the overall financial pressures on the CCG as presented in the Director of Finance's Report.</p> <p>As the QIPP programme is a "rolling programme" we continue to look for initiatives, particularly those which are a "win win" with our major partners in the city as we seek to ensure a sustainable health and social care system. The work streams underway under the new Accountable Care Partnership Framework which are designed to support delivery of the Sheffield Place Based Plan and should result in schemes which can be incorporated into the CCG's QIPP plan. However, most of these are likely to impact on 2018/19 and beyond.</p> | |
| Is your report for Approval / Consideration / Noting | |
| Noting | |
| Recommendations / Action Required by Governing Body | |
| The Governing Body is asked to note the year to date and forecast out turn positions for 2017/18 QIPP and identified risks and mitigation. | |
| Governing Body Assurance Framework | |
| <i>Which of the CCG's objectives does this paper support?</i> | |
| To ensure there is a sustainable, affordable healthcare system in Sheffield. | |

| Are there any Resource Implications (including Financial, Staffing etc)? |
|--|
| Yes as discussed in section 3 of the report. Need to focus clinical and managerial time on priority projects. |
| Have you carried out an Equality Impact Assessment and is it attached? |
| <p><i>Please attach if completed. Please explain if not, why not</i></p> <p>Not required as this is an update paper, individual programmes and projects will undertake assessment as part of their implementation process.</p> |
| <i>Have you involved patients, carers and the public in the preparation of the report?</i> |
| Increased clinical engagement and listening to our members has been agreed as a priority. Therefore, the Members Council meetings should include not just communication and information on the QIPP plan, but an opportunity for members to voice their ideas and experiences of where system improvements could bring about improved patient care within a reduced cash envelope. |

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1. Introduction

As part of the 2017-19 Operational and Financial Plan, NHS Sheffield Clinical Commissioning Group (SCCG) identified a gross savings target against the Quality, Innovation, Productivity and Prevention Programme (QIPP) of £21.6m.

Governing Body has received regular updates on the process undertaken to develop a QIPP programme for 2017/18 and the progress in implementation and delivery of the savings for agreed programmes and projects. This paper provides an overview of the position at month five, August 2017.

2. 2017/18 QIPP Plan

Following the Governing Body meeting on 7 September 2017, the QIPP plan stands at £19.7m. There remains a shortfall of £1.9m against the QIPP target at required. Table 1 below summarises the QIPP plan by area of spend.

Table 1: 2017/18 QIPP Programme by Area of Spend at September 2017

| Area of Spend | Annual Gross Savings £'000 | % QIPP Plan |
|-----------------------------------|-------------------------------|---------------|
| Child Health | (1,136) | 5.8% |
| Continuing Healthcare | (2,769) | 14.0% |
| Estates | (300) | 1.5% |
| Individual Funding Requests | (500) | 2.5% |
| Local Authority (see note 1) | 2,107 | -10.7% |
| Medicines Management | (3,265) | 16.6% |
| Mental Health | (1,240) | 6.3% |
| Planned Care | (5,083) | 25.8% |
| Primary Care & Community Services | (600) | 3.0% |
| Running Costs | (250) | 1.3% |
| Urgent Care | (6,682) | 33.9% |
| QIPP Plan | (19,718) | 100.0% |
| Unidentified | (1,861) | |
| QIPP Target | (21,579) | |

Note 1: The CCG and Sheffield City Council (SCC) have a joint programme to transform mental health services in the city. This should allow us to jointly make efficiency savings not

just from more effective services for people with mental health problems but also make savings from other areas of care e.g. hospital admissions by providing more effective treatment for example in community settings. The joint programme for 2017/18 is to make £4m of such efficiency savings with £1.5m attributable to the CCG and £2.5m to SCC. As most of the savings are planned to come from health as opposed to social care through the formal risk share arrangements which form part of the Section 75 Better Care Fund Agreement (approved by Governing Body), if we are fully successful in our plans the CCG will transfer £2.5m of resources to SCC by the end of the year. If no savings are made the CCG's risk and hence transfer of funds is capped at £0.8m. The CCG's QIPP plan encapsulates the total gross savings to be made from health services as part of this agreement and hence also includes the £2.5m as a positive figure to allow payment across to SCC. The figure shown in the table above is slightly less because we have other areas of our QIPP plan – mainly CHC where if we make the efficiencies planned the level of funding which will flow to SCC will be reduced.

3. Implementation and Delivery of 2017/18 QIPP Plan

Projects and Programmes are assessed each month to determine if they are meeting stated milestones for implementation and also whether they are delivering the savings and other changes anticipated. At month five, SCCG implemented a revised risk rating scheme including separate RAG ratings. Details of the revised risk rating criteria used in the current month can be found at appendix 1 to this report.

Table 2 below provides a summary of delivery of financial savings by area of spend at Month 5 and an assessment of the likely forecast out-turn position. The forecast outturn is split between over/(under) delivery reflected in the reported financial position and that which has been included in the risk assessment summarised in the Finance Report.

At moth 5, year to date net QIPP delivery is £324k under plan. However, as previously reported, the QIPP profile for 2017/18 is heavily back loaded and so, at month 5, 18% of the total plan is profiled for delivery year to date. At the current time QIPP is forecast to under deliver against plan by £6.6m net, of which £2.9m is reflected in the reported financial position.

Table 2: QIPP position by area of spend at month 5 2017/18

| Area of Spend | Annual Gross Savings Plan £'000 | Annual Net Savings Plan £'000 | Year to Date (Net) | | | Year End (Net) | |
|-----------------------------------|------------------------------------|----------------------------------|--------------------|-----------------|--------------------------------|---------------------------|--------------------------------|
| | | | Plan £'000 | Actual £'000 | (Over)/Under Delivery £'000 | Savings Forecast £'000 | (Over)/Under Delivery £'000 |
| Child Health | (1,136) | (993) | (225) | (188) | 37 | (574) | 419 |
| Continuing Healthcare | (2,769) | (2,769) | (667) | (534) | 133 | (2,219) | 550 |
| Estates | (300) | (300) | 0 | 0 | 0 | 0 | 300 |
| Individual Funding Requests | (500) | (500) | (210) | (380) | (170) | (741) | (241) |
| Local Authority | 2,107 | 2,107 | (36) | (56) | (20) | 2,058 | (49) |
| Medicines Management | (3,265) | (3,265) | (1,055) | (972) | 83 | (3,269) | (4) |
| Mental Health | (1,240) | (1,240) | 0 | 0 | 0 | (638) | 602 |
| Planned Care | (5,083) | (5,083) | (633) | (472) | 162 | (2,928) | 2,155 |
| Primary Care & Community Services | (600) | (600) | (63) | 0 | 63 | (350) | 250 |
| Running Costs | (250) | (250) | (75) | (75) | 0 | (320) | (70) |
| Urgent Care | (6,682) | (6,468) | (608) | (571) | 37 | (3,783) | 2,685 |
| QIPP Plan | (19,718) | (19,361) | (3,572) | (3,248) | 324 | (12,764) | 6,597 |
| Unidentified | (1,861) | 0 | 0 | 0 | 0 | 0 | 1,861 |
| QIPP Target | (21,579) | (19,361) | (3,572) | (3,248) | 324 | (12,764) | 8,458 |

The risk reporting summary for QIPP programmes is set out at table 3 overleaf.

Table 3: QIPP Programme Risk Rating Summary at Month 5

| RAG | | Delivery | | | | | |
|----------------|-------|----------|-----|----|----|---|-------|
| | | G | G/A | A | R | N | Total |
| Implementation | G | 29 | 3 | 9 | 11 | | 52 |
| | G/A | | | 1 | 1 | | 2 |
| | A | 1 | | 5 | 6 | | 12 |
| | R | | | | 6 | | 6 |
| | N | | | | | 2 | 2 |
| | Total | 30 | 3 | 15 | 24 | 2 | 74 |

At month 5, six projects are rated red for implementation and delivery *i.e.* there is 20% or less confidence of delivery in 2017/18, with a total financial value of £1.9m. These are:

- Estates Rationalisation – no opportunity identified to date
- Mental Health – council led project
- Mental Health Open Book Session – no additional opportunities identified
- Additional Childrens transformation projects – no projects identified
- Active Support & Recovery Respiratory – BCF – implementation delayed but has commenced
- Urgent Care in Primary Care GP Collaborative Redirection Stage 1 – scheme underway but no saving identified for 2017/18

Two projects are not rated as they reflect the joint programme agreement for mental health and investment for the delayed discharge project.

4. Further QIPP

Plans to implement peer review are in development and the consultation on Gluten Free Prescribing for Adults is underway and a final proposal will be presented to Governing Body in November for a decision.

The CCG is meeting with colleagues from the National QIPP Support Programme on 27 September 2017 to understand whether there are opportunities for colleagues from the programme to support the identification and implementation of additional projects both for 2017/18 and 2018/19.

5. Other Actions

The main focus remains on delivering the existing plan as far as possible. We are looking to concentrate resources (clinical and managerial time) on those schemes which have potential to achieve target or additional in year savings but potentially require additional resources. These include:

- Clinical variations in GP referrals and prescribing
- Delayed Transfers of Care
- Medicines management programme
- Mental health transformation programme
- CHC reviews particularly where reviews are over due
- Review of intermediate bed requirements
- Implementation of Commissioning for Outcomes South Yorkshire & Bassetlaw wide policy (approved by Governing Body in September 2017)
- Review of activity required to deliver 18 week plans

Aspyre, the new programme management software chosen by the CCG is being rolled out and in September all nominated programme and project leads have received training.

6. Development of 2018/19 QIPP plan

Work has commenced on refreshing the Operational and Financial Plans for 2018/19 in the light of current position in 2017/18 and any new national requirements. Programme leads have submitted early commissioning intentions and high level QIPP proposals. A first cut of the refreshed financial plan and QIPP implications will be presented to Governing Body in private session on 5 October 2017.

7. Recommendation

Governing Body are asked to note the reported position at month 5 and the actions being taken to manage the QIPP programme and develop plans for 2018/19.

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On behalf of: Brian Hughes, Director of Commissioning and Performance

26 September 2017

SCCG QIPP Risk Ratings

| RAG Ratings | | | |
|-------------|------------|---|--|
| RAG | Confidence | Implementation | Delivery |
| G | 100% | Strong delivery plan. Clear timescales and milestones for implementation. Full responsibility and ownership | In delivery or delivered Expect to deliver 100% of planned savings or savings fully achieved |
| GA | ≥ 90% | Delivery plan good. KPIs and metrics agreed. All major and most minor risks mitigated. | In delivery or delivered Expect to deliver at least 90% of planned savings |
| A | ≥ 80% | Plan in place but not considered strong, responsibility accepted, work has started Implementation progressing, no formal plans or minor risks highlighted. Work not due to start yet or some elements have minor slippage Some unmitigated risk to delivery | In delivery Expect to deliver at least 80% |
| R | <80% | No plan, no identified metrics, no accepted responsibility. Not commenced or commenced and significantly behind several milestones (4 weeks or more). Planned activities are at high risk of not delivering to timescale. Mitigating actions have not been implemented. Significant unmitigated risk to delivery. | Delivery not commenced or delivery commenced but achieved savings less than 80% of YTD plan. Forecast savings will not deliver more than 80% of plan. |