

2016/17 Quality, Innovation, Productivity and Prevention (QIPP) Programme

Item 1

Governing Body Information Pack

12 January 2017

Author(s)	Sandie Buchan, Head of Programme Management Office Diane Meddick, Deputy Director of QIPP Jackie Mills, Deputy Director of Finance
Sponsor	Matt Powls, Director of Commissioning & Performance
Is your report for Approval / Consideration / Noting	
Noting	
Are there any Resource Implications (including Financial, Staffing etc)?	
n/a	
Audit Requirement	
<u>CCG Objectives</u>	
<p><i>Which of the CCG's objectives does this paper support?</i> To ensure there is a sustainable, affordable healthcare system in Sheffield.</p>	
<u>Equality impact assessment</u>	
<p><i>Have you carried out an Equality Impact Assessment and is it attached?</i> Not required as this is an update paper.</p>	
<u>PPE Activity</u>	
<p><i>How does your paper support involving patients, carers and the public?</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.</p>	
Recommendations	
<p>Governing Body is asked to note the revised forecast in relation to the total amount that is due to be achieved in 2016/17 and the work that has been completed in order to realistically forecast the year-end total savings that will be achieved.</p> <p>Governing Body is asked to note the work that has been completed to develop the 2017/18 QIPP Programme and supporting processes.</p>	

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1. Context

- 1.1. NHS Sheffield CCG's QIPP programme for 2016/17 QIPP has a gross savings target of £19.4m
- 1.2. Each month the Governing Body receives an update on the achievement against the plan and also address any issues that were raised during the previous meeting's discussion.
- 1.3. At the December 2016 meeting, the Governing Body was advised of growing concerns in terms of the achievement of the QIPP savings that have been identified for 2016/17. This month, the Deputy Director of QIPP, Head of PMO and the QIPP Finance Manager have worked with the Lead Directors to agree a realistic forecast for all of the 2016/17 schemes. Work has also been completed on the development of the 2017/18 QIPP programme due to the requirement for the CCG's operational and financial plan to NHS England to be submitted on 23rd December 2016.
- 1.4. This paper provides the Governing Body with an overview of the position as at the end of November and the work that has been undertaken over the last four weeks on both the current year's programme as well as 2017/18.

2. Current Position

- 2.1. The month 8 year to date gross savings position is £7.83m. This means that we are £2.409m behind plan at this point in the year, which is a deteriorated position of £283k compared to last month. Table 1 details this shortfall by areas of spends.
- 2.2. The work that has been undertaken during the last month has been split between reviewing the current year's schemes, as well as planning for next year. The QIPP Finance Manager has been working with scheme leads to determine a realistic forecast position for their schemes. Information in relation to mobilisation, as well as review of impact measures were considered in order to provide a forecast for this month's reporting. Following this exercise, the overall year end forecast has unfortunately deteriorated and we anticipate achieving £13.852m, which is a shortfall of £5.639m from the CCG's overall gross QIPP target. It is felt that with activity pressures over the winter months, this position has the potential to deteriorate further. However, all of the scheme leads continue to work hard to ensure programmes are delivered. Table 2 details the forecast as owned by the Lead Directors and subsequently equates to achievement of over 70% of the original (gross) QIPP plan.
- 2.3. Whilst the CCG will not achieve the full savings target of £19.4m in 2016/17, work continues to ensure as much of this target is achieved in the remainder of FY 2016/17. In parallel the CCG's Director of Finance is leading work to ensure that the CCG can still deliver against its financial plan of a 0.5% surplus, including through the use of contingency reserves and deferment of investment.

Table 1: Year to Date (Month 8) position by area of CCG expenditure

Area of CCG Expenditure	Gross Savings Plan Full Year	Gross Savings Plan M8	Gross Savings Actual M8	Gross Savings Variance M8	Investment M8	Net Saving M8	Net Variance M8
	£'000	£'000	£'000	£'000	£'000	£'000	£'000
Child Health	-1,405	-676	-283	393	0	-283	393
Community Healthcare	-1,475	-867	-15	853	0	-15	853
Continuing Healthcare	-1,650	-1,028	-1,082	-54	0	-1,082	-54
Elective Care	-4,762	-2,301	-1,698	603	240	-1,458	437
High Cost Drugs	-1,043	-627	-294	332	163	-131	290
Mental Health	-470	-307	-303	4	0	-303	4
Other	-350	-67	-100	-33	0	-100	-33
Prescribing	-2,330	-1,443	-1,421	22	103	-1,318	-118
Urgent Care	-6,006	-2,924	-2,634	290	93	-2,541	274
Total	-19,491	-10,239	-7,830	2,409	600	-7,230	2,045

Table 2: QIPP Year End Forecast against Plan based on M8 results

Area of CCG Expenditure	Gross Savings Plan Full Year	Gross Savings Forecast M8	Gross Savings Variance M8	Investment Forecast M8	Net Saving Forecast M8	Net Saving Variance Forecast M8
	£'000	£'000	£'000	£'000	£'000	£'000
Child Health	-1,405	-584	821	0	-584	821
Community Healthcare	-1,475	-288	1,187	0	-288	1,187
Continuing Healthcare	-1,650	-2,151	-501	0	-2,151	-501
Elective Care	-4,762	-2,719	2,043	469	-2,249	1,836
High Cost Drugs	-1,043	-574	469	269	-305	429
Mental Health	-470	-459	11	0	-459	11
Other	-350	-100	250	0	-100	250
Prescribing	-2,330	-2,770	-440	377	-2,393	-462
Urgent Care	-6,006	-4,208	1,798	177	-4,031	1,413
Total	-19,491	-13,852	5,639	1,291	-12,560	4,984

2.4. As part of the planning for 2017/18 QIPP programme, a review of the CCG's programme management process was completed. This was to ensure that a uniform approach was adopted from the onset and all scheme leads know what information is required to be produced. Appendix 1 details the process and as such, as part of the development of the 2017/18 schemes, project briefs have been completed. The process has been worked up in collaboration with colleagues across the organisation to ensure a whole systems approach is adopted. This also compliments the matrix way of working which will be incorporated within the organisation in January 2017. The programme management process will be considered by the QIPP Sub-Group in January 2017.

2.5. The 2017/18 financial plan submitted to NHS England on 23rd December 2016 includes a £21.6m QIPP requirement in order to meet the CCG's share of the combined South Yorkshire & Bassetlaw CCG's control total as part of STP arrangements and to meet other

business rules, the CCG's expected contractual commitments and other financial pressures. The QIPP plan is quite well developed but there remains substantial work over the next 3 months to ensure that we have schemes in excess of the above value ready to implement from April 2017. Schemes that have been developed to date are based on a combination of the following:

- Full year effect from 2016/17 schemes;
- Expansion of existing schemes established in 2016/17;
- New schemes that have either been identified by the Commissioning Portfolios or by recommendations using the Right Care Packs and methodology;
- Deep dives of contracts;
- Service Reviews.

2.6. The work that has been completed across the organisation to develop the 2017/18 QIPP Programme has ensured that the list of schemes have been linked to the Commissioning Intentions that formed part of the contract negotiations with Providers, as well as the CCG's internal operational plan that was submitted to NHS England on 23rd December 2016. We have also ensured that the schemes are in line with the work being completed by the STP and the wider South Yorkshire programme of work. Full triangulation has been completed to create a fully collaborated and signed up programme for 2017/18. The process that has been completed in the last month as well as reviewing the programme management process, means that the CCG has a more efficient and robust system to manage, monitor and deliver the 2017/18 QIPP programme moving forward.

3. Next Steps

3.1. As already highlighted in this document re. the current 2016/17 QIPP Programme, the Deputy Director of QIPP and Head of PMO will continue to work directly with the Director Leads and Programme Leads in order to support the delivery of the schemes as far as possible in quarter 4. All avenues of efficiency are being investigated to ensure that we maximise 2016/17 QIPP delivery.

4. Recommendation

4.1. Governing Body is asked to note the revised forecast in relation to the total amount that is due to be achieved in 2016/17 and the work that has been completed in order to realistically forecast the year-end total savings that will be achieved.

4.2. Governing Body is asked to note the work that has been completed to develop the 2017/18 QIPP Programme and supporting processes.

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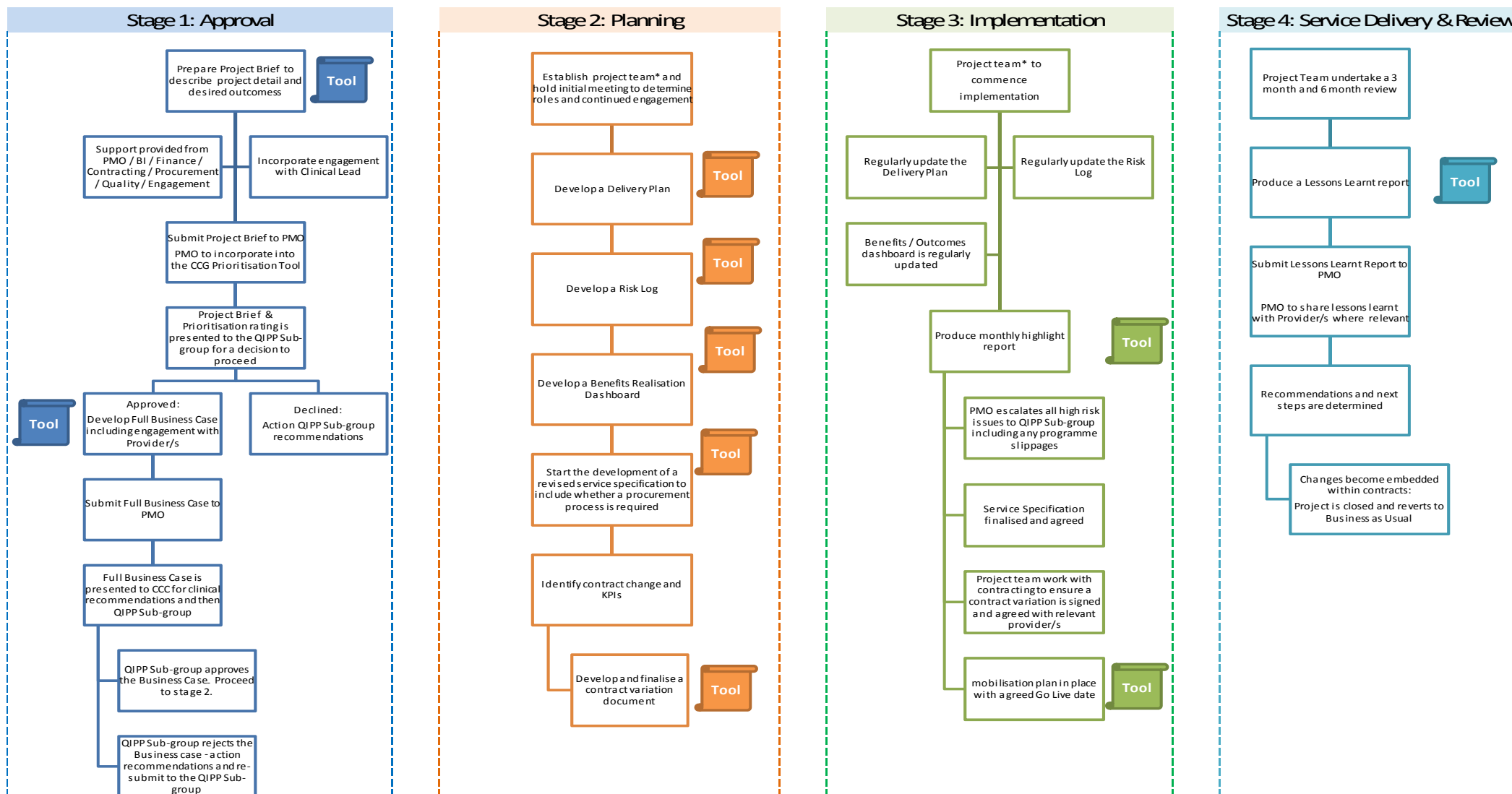
On behalf of: Matt Powls, Director of Commissioning

January 2017

Appendix 1: Programme / Project Approval & Delivery Process

Programme / Project Approval & Delivery Process

(Final version 12th Dec 16)



*Where applicable, the project team should include a Provider representative.