

2019/20 Quality Innovation Productivity and Prevention (QIPP) Programme Update Report

Governing Body meeting

5 September 2019

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Purpose of Paper	
<p>NHS Sheffield Clinical Commissioning Group (SCCG) has an agreed QIPP target of £15.24m for 2019/20. This paper provides the Governing Body with an overview of the position as at month 4 and an update on the progress of delivery by year end.</p>	
Key Issues	
<p>At month four, we are reporting delivery of £4.4m against a year to date target of £4.7m, therefore achieving 95% of plan at this point.</p> <p>In relation to year end delivery, we have risk rated ten programmes as red as well as nine programmes as amber. These programmes will be monitored on a monthly basis to assist in the achievement of savings. The forecast for year end is therefore reported to achieve 90% of the target. This equates to a total forecast of £13.7m against a target of £15.2m.</p>	
Is your report for Approval / Consideration / Noting	
Consideration	
Recommendations / Action Required by Governing Body	
<p>The Governing Body is asked to consider the reported month 4 QIPP position and the year end forecast position.</p>	
What assurance does this report provide to the Governing Body in relation to Governing Body Assurance Framework (GBAF) objectives?	
<p>Which of the CCG's Objectives does this paper support?</p> <p>To ensure there is a sustainable, affordable healthcare system in Sheffield.</p>	
Description of Assurances for Governing Body	
<p>Principle Risk 4.3: Unable to deliver the QIPP (efficiency) savings plan due to lack of internal capacity and lack of engagement by key partners.</p>	

Assurances in place:

Monthly monitoring and review of programme plans and delivery by the Integrated QIPP Working Group.

Monthly reports to Governing Body and more in depth reporting to Integrated QIPP Working Group. (Internal)

Are there any Resource Implications (including Financial, Staffing etc)?

Yes, there is a focus of clinical and managerial time on priority projects.

Have you carried out an Equality Impact Assessment and is it attached?

Not required. Individual programmes and projects will undertake assessment as part of their implementation process as appropriate.

Have you involved patients, carers and the public in the preparation of the report?

Increased clinical engagement and listening to our members has been agreed as a priority. Therefore, the Governing Body 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

- 1.1. The NHS Sheffield CCG (SCCG) QIPP programme for 2019/20 has a gross savings target of £15.24m as part of delivering the CCG's overall commissioning and financial plans for the current year. This paper provides the Governing Body with an overview of the position as at month 4 and an update on the progress of delivery by year end.

2. Current Position

- 2.1. Table 1 below provides an overall summary of the 2019/20 QIPP Programme by commissioning portfolio as at month 4.
- 2.2. In terms of the year to date position, we are reporting delivery of £4,443k against the year to date target of £4,685k and so 95% delivery has been achieved at month 4. This is an improvement from the 81% delivery reported at month three, mainly due to additional savings reported in relation to our running costs.
- 2.3. In terms of forecast outturn, we are currently anticipating that despite the slippage to date, there are opportunities for some of this slippage to be recovered/halter. As a result, the forecast under-delivery is estimated at £1.583m which equates to 90% delivery.
- 2.4. Appendix 1 details the individual schemes within the QIPP programme. There are currently ten programmes risk rated as red at month four, as well as nine rated as amber. Whilst a limited level of slippage is forecast, as noted above, further actions are required in order to secure delivery of this position. As a result there is a level of risk that further slippage/under delivery could materialise. If the additional actions do not have the required impact, the additional financial risk at year end has been estimated at an £0.5m. This level of financial risk has been incorporated into the Director of Finance's assessment of overall financial risk, included in the separate Finance Report briefing.
- 2.5. The QIPP programme continues to be monitored on a monthly basis to assist in the achievement of savings, and any remedial actions supported. In addition, the Programme Management Office (PMO) will continue in dialogue with Portfolios to identify additional potential schemes or actions that may be available to offset any under-delivery against the current QIPP programme.

Table 1: 2019/20 QIPP Plan by Commissioning Portfolio

Area of Spend	Annual Gross Savings Plan (£'000)	Annual Gross Savings Forecast (£'000)	Annual Gross Savings Forecast Variance (£'000)	Year to Date Gross Savings Plan (£'000)	Year to Date Gross Savings Actual (£'000)	Year to Date Gross Savings Variance (£'000)
Care Outside of Hospital	(2,210)	(1,510)	700	(596)	(244)	352
Children & Young People	(113)	(103)	10	(16)	(13)	3
Elective Care	(1,894)	(1,409)	485	(525)	(285)	240
Medicines Optimisation	(4,861)	(4,531)	330	(1,512)	(1,512)	0
Mental Health	(1,532)	(1,532)	(0)	(575)	(520)	55
Ongoing Care	(1,980)	(1,880)	100	(661)	(734)	(73)
Urgent and Emergency Care	(850)	(850)	0	(200)	(200)	0
Other Commissioning	(800)	(100)	700	(268)	0	268
Running Costs	(1,000)	(1,394)	(394)	(332)	(797)	(465)
Other Adjustment	0	(348)	(348)	0	(138)	(138)
Grand Total	(15,240)	(13,657)	1,583	(4,685)	(4,443)	242
% Achievement		90%			95%	

3. Recommendations

- 3.1 The Governing Body is asked to consider the reported month 4 QIPP position and the year end forecast position.

Paper prepared by: Sandie Buchan, Deputy Director of Commissioning & Performance
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On behalf of: Brian Hughes, Director of Commissioning and Performance

5 September 2019

Appendix 1: 2019/20 QIPP Programme

Integrated QIPP Working Group - Monthly Monitoring Report - By Portfolio

Portfolio	Programme	Phasing		2019/20 Plan				Month 4 Position			Financial Delivery RAG
		Start	End	Savings Plan £'000	Forecast Outturn £'000	Forecast Outturn Variance £'000	Forecast Movement from previous Month	Year to Date Gross Savings Plan £'000	Year to Date Gross Savings Actual £'000	Year to Date Gross Savings Variance £'000	
Care Outside of Hospital	AS&R - Community Equipment	1	12	(400)	(300)	100	0	(132)	0	132	A
	AS&R - Community IV	4	12	(200)	0	200	200	(22)	0	22	R
	AS&R - Complex Wound Care	1	12	(50)	(40)	10	0	(16)	0	16	A
	AS&R - Complex Wound Care - Prescribing	1	12	(200)	0	200	200	(64)	0	64	R
	Clinical Model (PARA) Year 1	7	12	(250)	(250)	0	0	0	0	0	G
	Community Efficiencies (inc. ARC, TOC, AR)	1	12	(300)	(300)	0	(60)	(100)	(100)	0	G
	CVD Prevention & Diagnosis	4	12	(50)	(50)	0	0	(6)	(6)	0	G
	Enhanced Health in Care Homes	1	12	(300)	(150)	150	150	(100)	(50)	50	R
	NICE Guidance COPD	1	12	(260)	(260)	0	0	(88)	(88)	0	G
	QUIT	1	12	(200)	(160)	40	40	(68)	0	68	A
Care Outside of Hospital Total				(2,210)	(1,510)	700	530	(596)	(244)	352	
Children & Young People	Daycase to OPP	7	12	(13)	(13)	0	0	0	0	0	G
	Review Short Breaks	7	12	(50)	(50)	0	0	0	0	0	G
	Safeguarding	1	12	(50)	(40)	10	10	(16)	(13)	3	A
Children & Young People Total				(113)	(103)	10	10	(16)	(13)	3	
Elective Care	Commissioning for Outcomes	1	12	(50)	(50)	0	0	(16)	(16)	0	G
	Gastro NTFCC	1	12	(143)	(143)	0	0	(48)	(48)	0	G
	GP Variation	1	12	(500)	(400)	100	0	(168)	(101)	67	A
	Integrated Community Cardiology	6	12	(18)	(5)	14	14	0	0	0	R
	Integrated Community ENT	10	12	(16)	(16)	0	0	0	0	0	G
	Integrated Community Gynaecology - procedure	3	12	(110)	(55)	55	55	(12)	0	12	R
	Integrated Community Gynaecology - standard	3	12	(83)	(42)	41	41	(9)	0	9	R
	Integrated Community Skin Services	6	12	(167)	(42)	125	125	0	0	0	R
	Lower GI	1	12	(500)	(400)	100	0	(168)	(101)	67	A
	NFTFC schemes	1	12	(57)	(57)	0	0	(20)	(20)	0	G
Elective Care Total				(1,894)	(1,409)	485	235	(525)	(285)	240	
Medicines Optimisation	Adalimumab	1	12	(400)	(400)	0	0	(132)	(132)	0	G
	Move to Avastin post NICE guidance	7	12	(330)	0	330	165	0	0	0	R
	Prescribing Efficiencies	1	12	(1,300)	(1,300)	0	0	(432)	(432)	0	G
	Prescribing Quality Improvement Scheme (PQIS) extension	1	12	(500)	(500)	0	0	(168)	(168)	0	G
	Promote the use of Biosimilar Drugs (MSK)	1	12	(1,765)	(1,765)	0	0	(588)	(588)	0	G
	Promote the use of Biosimilar Drugs (Other Specialties)	1	12	(416)	(416)	0	0	(140)	(140)	0	G
Medicines Optimisation Total				(4,861)	(4,531)	330	165	(1,512)	(1,512)	0	
Mental Health	Council share	1	12	998	998	0	0	336	336	0	G
	Dementia Care Pathway	1	6	(200)	(307)	(107)	(107)	(133)	(133)	0	G
	Developing a Psychiatric Decision Unit	2	12	(290)	(232)	58	58	(81)	(65)	16	A
	IAPT full year effect	1	12	(400)	(400)	0	0	(132)	(132)	0	G
	Learning Disability Services	1	12	(280)	(280)	0	0	(92)	(92)	0	G
	Mental Health IFR	1	3	(40)	(40)	0	0	(40)	(40)	0	G
	Promoting Independence	1	12	(593)	(593)	0	0	(196)	(196)	0	G
	Reducing Anti-Depressant Use	1	12	(98)	(49)	49	49	(32)	0	32	R
	Review inappropriate high cost long term care for dementia cases	1	12	(133)	(133)	0	0	(44)	(42)	2	G
	Review inappropriate high cost long term care for SMI cases	1	12	(267)	(267)	0	0	(88)	(84)	4	G
Mental Health Total				(1,532)	(1,532)	(0)	(49)	(575)	(520)	55	
Ongoing Care	Care at Night - Re - tendering	1	12	(68)	(68)	0	0	(21)	(21)	0	G
	CHC FYE of 1819 QIPP - not included in original plan	1	12	(750)	(750)	0	0	(252)	(252)	0	G
	CHC Package Reviews	1	12	(500)	(500)	0	0	(168)	(168)	0	G
	Complex Child - Continuing Care	1	12	(262)	(262)	0	0	(88)	(88)	0	G
	Deprivation of Liberty (DOLs)	1	12	(200)	(200)	0	0	(68)	(205)	(137)	G
	Removal of 28 day notice on change in eligibility	1	12	(200)	(100)	100	100	(64)	0	64	A
Ongoing Care Total				(1,980)	(1,880)	100	100	(661)	(734)	(73)	
Other Commissioning	Estates	1	12	(800)	(100)	700	400	(268)	0	268	R
Other Commissioning Total				(800)	(100)	700	400	(268)	0	268	
Running Costs	Running Costs	1	12	(1,000)	(1,394)	(394)	(117)	(332)	(797)	(465)	G
Running Costs Total				(1,000)	(1,394)	(394)	(117)	(332)	(797)	(465)	
Urgent and Emergency Care	Reduce ED attendances	1	12	(100)	(100)	0	0	(32)	(32)	0	G
	Reduce Number of Excess Bed Days	1	12	(500)	(500)	0	0	(168)	(168)	0	G
	Same Day Emergency Care	7	12	(250)	(250)	0	0	0	0	0	G
Urgent and Emergency Care Total				(850)	(850)	0	0	(200)	(200)	0	
Other Adjustment	Adjustment for Blended Contract			0	(348)	(348)	(348)	0	(138)	(138)	G
Other Adjustment Total				0	(348)	(348)	(348)	0	(138)	(138)	
Grand Total				(15,240)	(13,657)	1,583	926	(4,685)	(4,443)	242	
% Achieved						90%	10%		95%	5%	

RAG		Confidence		Implementation		Financial (Savings) Delivery		F+O1
G	> 95%	Strong implementation plan. Clear timescales and milestones. Full responsibility and ownership. Work on target, current milestones met/no delays. All risks mitigated.	In delivery or delivered	Expect to deliver 95-100% of planned savings or savings fully achieved	> 95%			
GA	80-95%	Implementation plan good. KPIs and metrics agreed. All major and most minor risks mitigated.	In delivery or delivered	Expect to deliver at least 80% of planned savings	80-95%			
A	50-80%	Plan in place but not considered strong, responsibility accepted, work has started OR Implementation progressing but medium/minor risks and/or some minor slippage (1 to 3 months) highlighted. Some unmitigated risk to delivery.	In delivery	Expect to deliver between 50 and 80% planned savings	50-80%			
R	< 50%	Scheme significantly delayed; no detailed scheme capable of implementation; Scheme stopped.	Savings likely to be 50% or much lower than plan because scheme not progressing, significantly delayed or savings not materialising as expected	< 50%				

Non ISFE RAG Ratings	
G	> 95%
A	75 - 95%
R	< 75%