

**NHS VALE OF YORK CLINICAL
COMMISSIONING GROUP**

SHADOW GOVERNING BODY MEETING



Meeting Date: 4 October 2012

Report Sponsor:

Rachel Potts
Chief Operating Officer

Report Author:

n/a

1. Title of Paper: NHS North Yorkshire and York Turnaround Initiatives

2. Strategic Objectives supported by this paper

5. Achieve financial balance

3. Executive Summary

At its meeting on 25 September NHS North Yorkshire and York Cluster Board discussed in detail the financial challenge to ensure the sustainability of the health and social care economy within North Yorkshire and York. The attached turnaround initiatives were agreed.

Clinical Commissioning Group Accountable Officers have been asked to attend the Cluster Board meeting on 23 October to provide an update on progress.

4. Evidence Base

Not applicable

5. Risks relating to proposals in this paper

Any risks related to this paper would be included within the organisation's risk register.

6. Summary of any finance / resource implications

All financial implications in relation to items mentioned in this report are being actively managed and monitored by the appropriate department/group.

7. Any statutory / regulatory / legal / NHS Constitution implications

In line with statutory processes.

8. Equality Impact Assessment

Any actions would be subject to the appropriate Equality Impact Assessment.

9. Any related work with stakeholders or communications plan

NHS North Yorkshire and York Cluster has produced a communications plan.

10. Recommendations / Action Required

The Shadow Governing Body is asked to note the turnaround initiatives.

11. Assurance

The Shadow Governing Body will be provided with regular financial and transformational change updates.

NHS North Yorkshire and York Turnaround Initiatives

Savings		Potential
		12/13
		£m
1	A review of elective activity	02.8
2	A review of outpatient follow up appointments in line with best practice	3.1
3	A review of Minor Injuries Units opening hours with a view to some closures	0.4
4	A review of community hospital beds with a view to some short term closures	0.4
5	A review of high cost treatments and drugs	0.6
6	Potential cessation of enhanced primary care service payments	0.6
7	A review of Mental Health and continuing health care placements	1.5
8	Ceasing expansion of health visitor implementation	0.2
9	Redesigning patient transport services.	0.4
Total potential savings built into financial forecasts		10.0