

# Vale of York CCG Core Performance Dashboard October 2013

Report Compiled by: Business Intelligence, North Yorkshire and Humber Commissioning Support Unit

**Report Checked by:** Vale of York CCG Chief Operating Officer

Report Date: 25th October 2013

# **CONTENTS Page Summary assessment Performance and Quality Indicators Exception Report for National Quality and Performance Indicators** Domain 1: Preventing people from dying prematurely Domain 2: Enhancing quality of life for people with long term conditions Domain 3: Helping people recover from episodes of ill health or injury Domain 4: Ensuring that people have a positive experience of care Domain 5: Providing a safe environment and protecting from harm 7 **Key Performance Indicators (KPI's) supporting notes** 9 **Financial Performance Finance Executive Summary** 10 **Programme Costs** 12 **Programme Costs by Month** 13 **Programme Run Rate** 14 **Running Costs and Run Rate** 15 **Compliance with Code of Better Payment Practice** 16 **Outstanding Creditors and Aged Debtors Report** 17 **QIPP** 18

# **SUMMARY OF PERFORMANCE**

## Current assessment

Domain 1: Preventing people from dying prematurely	
--	--



Domain 2: Enhancing quality of life for people with long term conditions



Domain 3: Helping people recover from episodes of ill health or injury



Domain 4: Ensuring that people have a positive experience of care



Domain 5: Providing a safe environment and protecting from harm



Domain 6: Enhancing quality of life for people with Mental Health conditions



	VALE OF YO	RK CCG P	ERFOR	MANCE	AND Q	UALITY II	NDICATO	DRS CONTROL OF THE PROPERTY OF
Domain	Indicator	Objective	Coverage	Period Covered	Planned Performance	Actual Performance	RAG Rating	Assurance
	Ambulance response times: percentage of Red 1 999 calls responded to within 8 minutes.	Minimum of 75% during 2013-14	CCG	Aug-13	75%	73.2%	А	The Ambulance Trust breached the target for patient incidents occurring within the CCG geographical area by two patients. An action plan is in development as part of the winter resilience plan.
	Ambulance response times: percentage of Red 2 999 calls responded to within 8 minutes.	Minimum of 75% during 2013-14	CCG	Aug-13	75%	69.9%	R	The Ambulance Trust breached the target for patient incidents occurring within the CCG geographical area by 60 patients. Analysis has identified three key influences that are likely to impact on this indicator. These include: turnaround times in the Emergency Department; rural area response times; and seasonality. An action plan is in development as part of the winter resilience plan.
Domain 1: Preventing people from dying	Ambulance response times: percentage of Red 2 999 calls responded to within 19 minutes.	Minimum of 95% during 2013-14	CCG	Aug-13	95%	93.4%	A	The Ambulance Trust breached the target for patient incidents occurring within the CCG geographical area by 18 patients. An action plan is in development as part of the winter resilience plan.
prematurely	Percentage of patients urgently referred by a primary care professional for suspected cancer that are seen by a specialist within 14 days.	Minimum of 93% during 2013-14	CCG	Aug-13	93%	91.9%	А	In total, there were 55 breaches, however 49 were due to patient choice. The target would have been achieved if not due to patient choice.
	recentage of patients referred by a primary care professional for treatment/investigation of breast symptoms (excluding those where cancer is suspected) who are seen by a specialist within	Minimum of 93% during 2013-14	CCG	Aug-13	93%	91.8%	А	The 93% target was breached by 2 patients. In total, there were 8 breaches which were all reported as patient choice. This target would have been achieved if not due to patient choice.
	Percentage of patients that wait no more than 31 days to receive their second or subsequent stage of treatment for cancer where that treatment is drug therapy.	Minimum of 98% during 2013-14	CCG	Aug-13	98%	97.96%	А	Out of a total of 49 patients there were two breaches (one was due to waiting list and the second the Trust cancelled the surgery).
	Percentage of patients referred by an NHS Screening Service that wait no more than 62 days from the date of referral to receive their first stage of treatment for cancer.	Minimum of 90% during 2013-14	CCG	Aug-13	90%	75%	R	Out of a total of 8 patients, two patients waited more than 62 days. The reasons reported were one breach required diagnostic testing prior to the first treatment and the other breach was due to patient choice.
	Number of patients still waiting for treatment where they have waited 52 weeks or more after referral by their GP or other healthcare professional.	Zero	CCG	Aug-13	0	3	R	The latest position reported by York Teaching Foundation Trust are that there are currently no over 52 week waits still waiting in October.
	Percentage of patients that waited over 6 weeks for a diagnostic test.	<1% of patients	CCG	Aug-13	<1%	1.1%	А	The less than 1% target was breached by 4 patients.
Domain 4: Ensuring that people have a positive experience of care	Percentage of patients that wait no longer than 4 hours in Accident and Emergency (A&E) from arrival to either discharge or admission.		Host provider	Sep-13	95%	92.8%	А	The 95% target was breached by 878 incidents. This underperformance does not appear to be caused by either increased activity or patient flows through the department, however the cause appears to be influenced by addressing the backlog during busy periods out of hours. The staffing levels are therefore being reviewed.
	Proportion of GP referrals to first outpatient appointments booked using Choose and Book	70%	CCG	Aug-13	70%	24.6%	R	Choose and book has been discussed in the Governing Body and while performance against the target for use of the choose and book system is poor, the CCG is reasonably assured that GPs do discuss and offer choice to patients. Development of a referral support service will further this commitment.
	Total number of Methicillin Resistant Staphylococcus Aureus (MRSA) bacteraemia cases allocated to the CCG.	No target	CCG	Aug-13	0	1	R	This breach relates to a community based incidence of MRSA. A root cause investigation is underway.
Domain 5: Providing a safe environment and protecting from harm	Total number of Clostridium difficile cases allocated to the CCG.	No more than 71	CCG	Aug-13	No more than 6	7	R	Of the 7 Cdiff cases, 3 were hospital attributed and 3 community attributed in York, and 1 hospital attributed case occurred at Leeds. A new local forum is being established to triangulate primary, community and acute acquired Cdiff to better understand the root causes and share learning.
	Number of hospital attributed Clostridium difficile cases allocated to Provider	No more than 43	Host Provider	Aug-13	No more than 4	6	R	A new local forum is being established to triangulate primary, community and acute acquired Cdiff to better understand the root causes and share learning.
	Delayed Transfers of Care.	Maximum Delay of 7.5%	CCG	Aug-13	7.5%	11.2%	R	The rate of delayed discharges in August is 11.2%. This represents a small percentage reduction from 11.8% last month. Access to local specialist residential placements remains a concern. Leeds York Partnership Trust and Local Authority clinicians continue to work closely together to address the issue. Delays continue to be closely monitored by the Contract Management Board.
Domain 6: Enhancing quality of life for people with Mental Health conditions	Proportion of patients on Care Programme Approach (CPA) discharged from inpatient care who are followed up within 7 days.	95%	CCG	Aug-13	95%	93.5%	А	The current performance is at 94.1%. The service's clinical IT system cannot send out reminders to care coordinators who are at risk of breaching a CPA review. The Informatics Team is developing a report to enable clinical staff to better anticipate CPA review dates. Now established a new IT Group, with senior membership by the Informatics Service. The provision of timely and accurate activity reports will be one of the group's key objectives.
	Proportion of people who have depression and/or anxiety disorders who receive psychological therapies (IAPT).	4.1% for 2013-14	CCG	Jun/Aug-13	1%	-	R	The performance is not being accurately recorded due to a poor data quality extract and submission process provided by Leeds Yorkshire Partnership Foundation Trust. A reconciliation process is being addressed with the Trust. Accurate data should be available for the next report.

# VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

				Latest Performance				
Objective	Coverage	Period Covered	Planned Performance	Actual Performance	RAG Rating	Date		
ng premature	ely							
Minimum of 75% during 2013-14	CCG	Aug-13	75%	73.2%	А	71.9%		
Minimum of 75% during 2013-14	CCG	Aug-13	75%	69.9%	R	73.6%		
Minimum of 95% during 2013-14	CCG	Aug-13	95%	97.3%	G	97.3%		
Minimum of 95% during 2013-14	CCG	Aug-13	95%	93.4%	А	94.8%		
Minimum of 93% during 2013-14	CCG	Aug-13	93%	91.9%	Α	94.4%		
Minimum of 93% during 2013-14	CCG	Aug-13	93%	91.8%	Α	93.9%		
Minimum of 96% during 2013-14	CCG	Aug-13	96%	98.1%	G	98.6%		
	CCG	Aug-13	98%	97.96%	А	99.2%		
Minimum of 94% during 2013-14	CCG	Aug-13	94%	97.6%	G	96.4%		
Minimum of 94% during 2013-14	CCG	Aug-13	94%	100.0%	G	99.5%		
Minimum of 85% during 2013-14	CCG	Aug-13	85%	88.2%	G	87.5%		
Minimum of 90% during 2013-14	CCG	Aug-13	90%	75.0%	R	94.1%		
Minimum of 90% during 2013-14	CCG	Aug-13	90%	n/a	G	100%		
	Minimum of 95% during 2013-14  Minimum of 75% during 2013-14  Minimum of 95% during 2013-14  Minimum of 95% during 2013-14  Minimum of 93% during 2013-14  Minimum of 93% during 2013-14  Minimum of 96% during 2013-14  Minimum of 96% during 2013-14  Minimum of 94% during 2013-14  Minimum of 95% during 2013-14  Minimum of 90% during 2013-14  Minimum of 90% during 2013-14	Minimum of 75% during 2013-14   CCG	Objective         Coverage         Covered           Og prematurely           Minimum of 75% during 2013-14         CCG         Aug-13           Minimum of 75% during 2013-14         CCG         Aug-13           Minimum of 95% during 2013-14         CCG         Aug-13           Minimum of 95% during 2013-14         CCG         Aug-13           Minimum of 93% during 2013-14         CCG         Aug-13           Minimum of 96% during 2013-14         CCG         Aug-13           Minimum of 96% during 2013-14         CCG         Aug-13           Minimum of 94% during 2013-14         CCG         Aug-13           Minimum of 94% during 2013-14         CCG         Aug-13           Minimum of 85% during 2013-14         CCG         Aug-13           Minimum of 90% during 2013-14         CCG         Aug-13           Minimum of 90% during 2013-14         CCG         Aug-13           Minimum of 90% during 2013-14         CCG         Aug-13	Objective         Coverage         Period Covered         Planned Performance           19 prematurely         Minimum of 75% during 2013-14         CCG         Aug-13         75%           Minimum of 75% during 2013-14         CCG         Aug-13         75%           Minimum of 95% during 2013-14         CCG         Aug-13         95%           Minimum of 95% during 2013-14         CCG         Aug-13         95%           Minimum of 95% during 2013-14         CCG         Aug-13         93%           Minimum of 93% during 2013-14         CCG         Aug-13         93%           Minimum of 96% during 2013-14         CCG         Aug-13         96%           Minimum of 94% during 2013-14         CCG         Aug-13         94%           Minimum of 94% during 2013-14         CCG         Aug-13         94%           Minimum of 85% during 2013-14         CCG         Aug-13         94%           Minimum of 90% during 2013-14         CCG         Aug-13         95%           Minimum of 90% during 2013-14         CCG         Aug-13         90%           Minimum of 90% during 2013-14         CCG         Aug-13         90%	Objective         Coverage         Period Covered         Planned Performance         Actual Performance           Optimize Type Institute	Objective   Coverage   Period   Planned   Performance   RAG   Rating		

Domain 1 - Overall Red/Amber/Green (RAG) rating

VALE LIE VURN		)	
VALE OF TOTAL	OOO I EINI O		UALITY INDICATORS

				Latest Po	erformance		Year to
Indicator	Objective	Coverage	Period Covered	Planned Performance	Actual Performance	RAG Rating	Date
Domain 2: Enhancing quality of life for	rtuting						
Proportion of people with a long term condition who are "supported by people providing health and social care services to manage their condition".	Top Quartile	CCG	Q4 12/13	Top Quartile	88.6%	G	-
Unplanned hospitalisation for chronic ambulatory care sensitive conditions (adults).	Same or fewer admissions	CCG	Apr 2012-Mar 2013	Same or fewer admissions	Same	G	-
Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19's	Same or fewer admissions	CCG	Apr 2012-Mar 2013	Same or fewer admissions	Same	G	-
Domain 2 - Overall RAG rating						G	

Domain 3: Helping peop	le recover from	episodes o	f ill health d	or injury
Domain of Helping peop	10 1000 101 110111	opioodoo o	i ili ilouitii t	zi iiijaiy

poopio rocetto mon	. opioodoo o	· ···· ······	. Oja	٠ ٫			
Emergency admissions for acute conditions that should not usually require hospital admission.	Same or fewer admissions	CCG	Apr 2012-Mar 2013	Same or fewer admissions	Better	G	-
Percentage of stroke patients that spend at least 90% of their time in hospital on a dedicated stroke ward.	Minimum of 80%	Host ProvComm	Q4 12/13	80%	83.9%	G	85.7%
Percentage of non-admitted patients, who have a Transient Ischaemic Attack and a higher risk of stroke, who are treated (including all relevant investigations) within 24 hours of contacting a healthcare professional.	Minimum of 60%	Host ProvComm	Q4 12/13	60%	77.6%	G	80.8%
Domain 3 - Overall PAG rating		•	•		•	G	

Domain 3 - Overall RAG rating

Domain 4: Ensuring that people have a positive experience of care recentage of patients admitted for hospital treatment within 18 weeks of referral by neir GP or other healthcare professional.

Minimum of 90% during 2013-14

CCG Aug-13

Percentage of patients admitted for hospital treatment within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 90% during 2013-14	CCG	Aug-13	90%	91.4%	G	-
Percentage of non-admitted patients treated by a consultant (or consultant led service) within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 95% during 2013-14	CCG	Aug-13	95%	95.5%	G	-
Percentage of patients still waiting for treatment within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 92% during 2013-14	CCG	Aug-13	92%	92.7%	G	-
Number of patients still waiting for treatment where they have waited 52 weeks or more after referral by their GP or other healthcare professional.	Zero	CCG	Aug-13	0	3	R	-
Percentage of patients that waited over 6 weeks for a diagnostic test.	<1% of patients	CCG	Aug-13	<1%	1.11%	Α	-
Percentage of patients that wait no longer than 4 hours in Accident and Emergency (A&E) from arrival to either discharge or admission.	Average of 95% over 2013-14	Host provider	Sep-13	95%	92.8%	А	-
Mixed Sex Accommodation Breaches per 1000 finished consultant episodes (FCE) (No of breaches)	<1 per 1000 FCEs	CCG	Aug-13	<1	0.3 (2)	G	-
Proportion of GP referrals to first outpatient appointments booked using Choose and	70%	CCG	Aug-13	70%	24.6%	R	-

Domain 4 - Overall RAG rating

R

VALE OF YORK CC	G PERFORMANCE AND Q	UALITY INDICATORS

				Latest Performance				
Indicator	Objective	Coverage	Period Covered	Planned Performance	Actual Performance	RAG Rating	Date	
Domain 5: Providing a safe environmer	nt and proted	cting fron	n harm					
Total number of Methicillin Resistant Staphylococcus Aureus (MRSA) bacteraemia cases allocated to the CCG.	0	CCG	Aug-13	0	1	R	4	
Total number of Clostridium difficile cases allocated to the CCG.	No more than 71	CCG	Aug-13	No more than 6	7	R	38	
Number of hospital attributed Clostridium difficile cases allocated to Provider	No more than 43	Host Provider	Aug-13	No more than 4	6	R	31	
Percentage of adult inpatients who have a Venous Thrombosis Embolism (VTE) risk assessment on admission.	90%	Host provider	Jul-13	90%	95.5%	G	94.9%	
Summary Hospital Mortality Index	As expected or better	Host provider	Q3 12/13	As expected or better	As expected	G	As expected	
Total Never Events reported	0	CCG	Sep-13	0	0	G	0	
Total Number of Serious Incidents	-	CCG	Sep-13	-	3		20	

Domain 5 - Overall RAG rating

VALE LIE VURN		)	
VALE OF TOTAL	OOO I EINI O		UALITY INDICATORS

				Latest Performance			
Indicator	Objective	Coverage	Period Covered	Planned Performance	Actual Performance	RAG Rating	Date
Domain 6: Enhancing quality of life for	people with	<b>Mental</b> H	lealth co	onditions			
Delayed Transfers of Care.	Maximum Delay of 7.5%	CCG	Aug-13	7.5%	11.2%	R	-
Number of newly diagnosed cases of first episode psychosis for whom early intervention is provided.		CCG	Aug-13	18	21	G	21
Proportion of admissions to inpatient services that were gate kept by the crisis resolution home treatment teams.	95%	CCG	Aug-13	95%	100%	G	-
Proportion of patients on Care Programme Approach (CPA) discharged from inpatient care who are followed up within 7 days.	95%	CCG	Aug-13	95%	93.5%	Α	-
Proportion of people who have depression and/or anxiety disorders who receive psychological therapies (IAPT).	4.1% for 2013-14	CCG	Jun/Aug-13	1.03%	-	R	-
Proportion of IAPT service users who complete treatment who are moving to recovery.	50%	CCG	Jun/Aug-13	50%	64.4%	G	-
Number of Mental Health episodes of Mixed Sex Accommodation (MSA).	0	CCG	Aug-13	0	0	G	0
Number of Mental Health Never events.	0	CCG	Aug-13	0	0	G	0

Domain 6: - Overall RAG rating

# **KEY PERFORMANCE INDICATORS (KPI's) - SUPPORTING NOTES**

#### RAG (red/amber/green) rated performance for latest performance

Green = achieved planned performance for current period

Amber = within 5% of planned performance for current period

Red = under-performing against planned performance by more than 5%

For items based on quartiles, Green = Upper quartile, Amber = Inter-quartile range, and Red = Lower quartile

For items based on trend, Green = gradient in line with objective, Amber = gradient is "flat", Red = gradient is opposite to objective.

For mortality, Green = either "as expected" or "lower than expected", Red = "higher than expected".

#### Key Performance Indicator (KPI) level scoring

The RAG rating for each indicator is converted into a score for each item: Green = 3 points, Amber = 1 point, and Red = 0 points.

However, in some cases the indicators are grouped to provide a better balance between different areas. The scoring matrix column indicates where groups exist.

In these cases, the combined score is derived from a matrix of possible combinations of RAG. The combinations are as follows:

Red in any individual indicator results in Red overall for the group

If two indicators are grouped, then a Green and Amber combination results in Amber overall.

If three indicators are grouped, then if two indicators are Amber the group is Amber, if one indicator is Amber, the group is Green.

Groups where the individual indicators are wholly Green, Red or Amber, retain the same overall RAG.

#### Domain Level Scoring

The scores are summed across the Performance and Quality categories and expressed as a percentage of the total maximum possible score for each domain.

As there are a varied number of indicators within each domain, it is necessary to apply different scoring criteria to attribute an overall RAG rating which is presented in the summary assessment. The scoring criteria is as follows:-

Domains 1, 4 & 6 Green = 90% or higher

Amber = 75% or higher, but less than 90%

Red = Less than 75%

Domains 2, 3 Green = 80% or higher

Amber = 65% or higher, but less than 80%

Red = Less than 65%

Domain 5 Green = 85% or higher

Amber = 70% or higher, but less than 85%

Red = Less than 70%

#### Coverage

The data presented is available in a number of formats regarding coverage. The following sets out a brief explanation of the terms used:

CCG - the data are based on the registered patients of the relevant CCG practices, regardless of provider.

Patch - this is an area that approximates to the CCG geographical coverage, normally based on the former PCG/PCT "patches" e.g. Selby & York.

Host Provider - this data relates to all the patients of a provider "hosted" by the CCG regardless of which practice they are registered with e.g. YHFT is hosted by VoYCCG.

Host ProvComm - this data relates to the Host provider as described above, but is limited to patients that are the responsibility of NHS North Yorkshire and York (not exclusively the CCG).

## **FINANCE - EXECUTIVE SUMMARY**

#### **EXECUTIVE SUMMARY FOR AUGUST 2013/14 (MONTH 6)**

This report presents the financial position for Vale of York CCG to the end of September 2013 (Month 6).

#### **Allocations**

The table below records the changes to allocations since month 5.

	Programme Costs £'000	Running Costs £'000
Allocation at Month 5	356,575	8,333
Allocation changes in month:		
GP IT Funding	1,071	
Specialised services	-439	
Mid Yorks Critical Care	113	
PCT deficit re - calculation	5	
Sub Total	357,235	8,330
Transfer from Running Costs to Programme Costs	1,733	-1,733
Allocation at Month 6	359,058	6,597

Other than a minor reduction to the 2012/13 debt repayment of £5k, the other adjustments in month are intended to be financially neutral on the CCG's income and expenditure bottom line as there is a corresponding impact in the actual operating position.

**GP IT Funding** - In preparation for the new commissioning framework introduced in 2013/14 funding for the provision of GP IT Systems was transferred from CCG predecessor organisations (PCT's) to NHS England; CCG's however remained both financially and operationally responsible for commissioning such services and the transfer of £1.1m to the CCG merely reflects the CCG's on-going responsibilities to be passed over to the CSU.

Specialised Services - Two adjustments have been actioned in month, effective from 1st April 2013. In regard to Critical Care the CCG will now be financially responsible for the provision of services provided by Mid Yorkshire Hospitals NHS Trust, whilst a further transfer of resources to out of area Specialised Services has also been actioned.

#### Expenditure - Programme Costs

The overall financial position on Programme costs to Month 6 shows an under spend of £2.9m. This includes £1.0m towards delivery of the revised 0.57% surplus.

A mid-year financial review has been undertaken covering contracts, reserves expenditure and allocations. The review has confirmed that the CCG remains on target to deliver financial balance and a 0.57% surplus at the year end.

Prior to undertaking this review, financial pressures which could not be anticipated when the 2013/14 Plan was re-balanced had emerged e.g. overtrading on York Acute FT, Prescribing overspend and it was no longer certain that financial balance and a recurrent surplus could be achieved.

### FINANCE - EXECUTIVE SUMMARY (continued)

The Programme Cost statement reflects the outcome of this review and the key issues included in the restatement are discussed below:

Acute Services – York Acute FT was previously forecast to over perform by £3.0m against the original contract value of £166m. £2m of this related to the original QIPP plans that will no longer deliver and this has now been adjusted back into the contract value. The balance, £1.0m, is the genuine over trade after taking account of contract challenges and penalties. However, a further £1.2m of new QIPP schemes have now been forecast and off-set the over trade.

Mental Health – This budget area is now forecasting a benefit of £2.6m. Almost half of this relates to the legacy agreement with Leeds Partnership accounting for £1.2m, which has now been postponed until 2014/15. A further £300k is from the delay in implementing the new Section 136 suite. The balance relates to a forecast QIPP of £0.3m with regards to out of area placements achieved through stronger negotiation on package prices and repatriation of patients currently placed out of the area. The remainder is based on the information received to date that suggests we are having to accommodate fewer patients outside of the main NHS contracts. We anticipate this trend should continue, but there is a risk it could increase and the CCG will need to fund the most appropriate placement subject to patient demand.

Continuing Care – The current year budget was set using a forecast generated from expenditure to Month 8 in 2012/13. Following an in – depth review it has been confirmed that this forecast overstates the budget requirement for Continuing Care, consequently a significant underspend is being recorded and is forecast to continue to the year end.

**Prescribing** – The original overspend on prescribing has been extensively analysed and it has been discovered that the CCG was being charged the cost of drugs and vaccines, which are no longer the responsibility of the CCG to fund: Funding was transferred to Local Authorities alongside the Public Health function. A recharge for these drugs and vaccines is now being made reducing the previous forecast by £600k. The remaining overspend remains the responsibility of the CCG and originates from the cost of centrally prescribed drugs. This will be picked up as a cost pressure in the budget setting process for 2014/15.

QIPP – Achievement of the 0.57% surplus is dependent upon delivering £1.5m of additional QIPP savings by 31st March. Schemes totalling £1.2m have been identified and included in the York Acute FT forecast outturn with a further £300k against Specialist Mental Health as described above.

There remain significant financial risks within the system which are summarised below:

- York Acute FT and Other Acute Contracts Access to flex / freeze data to validate the forecast outturn, apply contract challenges and penalties and manage future adverse trends.
- Specialist Mental Health services The budget was set based upon the Month 8 forecast outturn. It is not clear whether the under spend is arising from the budget being overstated, a change in patient flows or the ledger not fully capturing all commitments.
- Prescribing The prescribing QIPP savings are phased towards the end of the year. The current forecast is therefore based on the assumption that the planned savings can be delivered.
- Specialised Services Since completing the mid-year financial review, two adjustments have been actioned in respect of Specialised Services backdated to 1st April. Although intended to be financially neutral, this is not certain and further analysis is underway.

#### **Expenditure - Running Costs**

The CCG continues to underspend against its running cost budget and is £41k underspent to Month 6, attributable solely to underspends on the pay budgets. A breakeven position is currently forecast for the year end. A review of the non-pay budgets and forecast expenditure will need to be undertaken. At the start of the financial year, it was only possible to set non-pay budgets based on estimates of likely expenditure, unlike the pay budgets which were based on actual agreed structures.

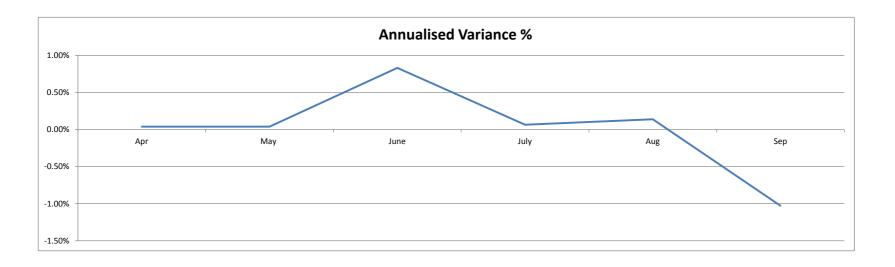
#### **Aged Creditors**

The CCG's compliance with the Code of Better Payment Practice (COBP) remains mixed. The target is to pay all non NHS creditors within 30 days of receipt of goods or a valid invoice (whichever is later) unless other payments terms have been agreed. The CCG is compliant with the COBP in paying 99.6% of NHS Creditors by value within the target time, however, performance is below target when considering the number of invoices paid within target. In regard to non NHS Creditors, the CCG is not compliant. The value of outstanding creditors has increased from £2.2m at Month 5 to £28.7m at month 6. This is a significant increase, but is due entirely to the early su bmission of October invoices, Month 7, by Scarborough & Ryedale CCG, York Acute FT and Leeds Teaching Hospitals. The increase in outstanding creditors is not therefore an issue of concern with regards to the actual invoice processing and will be managed within the cash plan.

## **FINANCE PROGRAMME COSTS**

Area	Cum	nulative To Date		Fo	recast Outturn		
	Budget	Actual	Variance	Budget	Actual	Variance	
Commissioned Consisse	0003	£000	000£	0003	0003	£000	
Commissioned Services							
Acute Services	04.400	04.777	505				
York Teaching Hospitals NHS Foundation Trust	84,182	84,777 5,714	595	168,364	168,355	-9	
Yorkshire Ambulance Service NHS Trust Leeds Teaching Hospitals NHS Trust	5,714	3,617	0	11,429	11,429	(	
	3,617		103	7,234	7,234		
Hull and East Yorkshire Hospitals NFT Harrogate and District NHS Foundation Trust	1,898 668	1,796 669	-102	3,796	3,592	-20-	
Mid Yorkshire Hospitals NHS Trust	633	806	173	1,337	1,337	0.44	
South Tees NHS Foundation Trust	537	537	1/3	1,267	1,613	34	
			112	1,074	1,022	-5:	
North Lincolnshire & Goole	375 2,027	263 1,752	-112 -274	750	530	-22	
Non Contracted Activity	3,870	4,039	169	4,054	3,798	-25 7:	
Ramsay Nuffield Health	1,470	1,586	115	7,740	7,812	11:	
Other Private Providers	302	221	-81	2,941 604	3,053 604	11.	
	105,295		484	210,590	210,379	04	
Sub Total	105,295	105,778	484	210,590	210,379	-21	
Mental Health Services							
Leeds & York Partnerships NHS Foundation Trust	15,149	14,424	-725	30,299	28,850	-1,449	
Humber NHS Foundation Trust	1,125	1,125	0	2,249	2,200	-49	
Tees Esk and Wear Valleys NHS Foundation Trust	661	661	0	1,323	1,387	6	
Mental Health Specialist Services	2,291	1,296	-994	4,581	3,427	-1,154	
Other Mental Health	129	129	0	258	258	(	
Sub Total	19,355	17,636	-1,719	38,710	36,123	-2,588	
Community Services							
York Hospitals NHS Foundation Trust - Community	8,936	8,936	0	17,522	17,522	(	
York Hospitals NHS Foundation Trust - MSK	1,054	1,054	0	2,107	2,107		
Harrogate and District NHS Foundation Trust - Community	3,977	3,980	3	7,954	7,954		
Hospices	596	600	4	1,192	1,192		
Other Community	22	22	0	1,192	1,192	(	
Sub total	14,585	14,592	7	28,819	28,819		
	14,000	14,502		20,010	20,010		
Other Services							
Continuing Care	11,620	9,203	-2,417	23,240	21,528	-1,71	
Funded Nursing Care	2,228	1,983	-245	4,457	4,457		
Partnerships	1,074	1,074	0	2,149	2,149	(	
Patient Transport - Yorkshire Ambulance Service NHS Trust	972	971	-2	1,945	1,945		
GP IT	536	536	0	1,071	1,071		
Property Services	129	129	0	295	295	(	
NHS 111	132	332	200	264	665	40	
Other Services	90	91	1	180	192	12	
Sub total	16,782	14,319	-2,463	33,601	32,302	-1,299	
Primary Care							
Prescribing	23,010	23,477	467	45,289	46,559	1,270	
Enhanced Services	723	722	0	1,445	1,445	(	
Oxygen	151	136	-15	301	276	-25	
Other Primary Care	150	130	-20	300	300	(	
Sub Total	24,033	24,465	432	47,335	48,580	1,245	
Trading Position	180,049	176,790	-3,259	359,054	356,202	-2,852	
_							
Reserves	0	0	0	800	800	(	
Contingency	520	0	-520	1,040	0	-1,040	
Unallocated QIPP	-1,946	0	1,946	-3,892	0	3,892	
Reserves	-1,426	0	1,426	-2,052	800	2,85	
Florestel Beetsten	470.000	470.700	4 000	257.000	257.000		
Financial Position	178,623	176,790	-1,833	357,002	357,002		
Requirement to Generate Recurrent Surplus							
Surplus - recurrent	1,028	0	-1,028	2,056	0	-2,056	
Overall Financial Position							
CCG Financial Position Including recurent Surplus	179,651	176,790	-2,861	359,058	357,002	-2,056	
<u> </u>		• •		•	•	,	

# FINANCE PROGRAMME RUN RATE



	Apr £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'000	Oct £'000	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000	Total £'000
Planned Spend													
Per Month	29,278	29,278	30,026	30,177	29,610	30,255							357,002
Cumulative	29,278	58,555	88,581	118,758	148,368	178,623							
Actual spend													
Per Month	29,289	29,289	30,746	29,511	29,739	28,216							
Cumulative	29,289	58,578	89,324	118,835	148,574	176,790							
Variance against plan													
Variance in month - £'000	12	12	720	(666)	129	(2,039)							
Cumulative Variance - £'000	12	23	743	77	206	(1,833)							
Variance in Month %	0.04%	0.04%	2.47%	0.26%	0.70%	-6.06%							
Annualised Variance %	0.04%	0.04%	0.83%	0.06%	0.14%	-1.03%							

## FINANCE PROGRAMME COSTS BY MONTH

						Cumula	tive actuals I	ov month					
Area	Apr - 13	May - 13	Jun - 13	Jul - 13	Aug - 13	Sept - 13	Oct - 13	Nov - 13	Dec - 13	Jan - 14	Feb - 14	Mar - 14	Year to Date
Alea	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000	£000
Commissioned Services													
Acute Services													
	13,219	13,219	15,792	14,048	14,228	14,272							84,777
Yorkshire Ambulance Service NHS Trust	910	910	1,038	952	952	952							5,714
Leeds Teaching Hospitals NHS Trust	559	559	691	669	536	603							3,617
Hull and East Yorkshire Hospitals NFT	325	325	154	338	377	276							1,796
Harrogate and District NHS Foundation Trust	109	109	98	71	156	125							669
Mid Yorkshire Hospitals NHS Trust	91	91	91	197	177	158							806
South Tees NHS Foundation Trust	102	102	54	108	74	98							537
North Lincolnshire & Goole	63	63	63	(84)	119	41							263
Non Contracted Activity	283	283	306	66	162	653							1,752
Ramsay	609	609	724	861	494	742							4,039
Nuffield Health	272	272	190	314	291	248							1,586
Other Private Providers	216	216	107	(350)	396	(364)							221
Sub Total	16,758	16,758	19,307	17,191	17,961	17,804	0	0	0	0	0	0	105,778
Mental Health Services													
Leeds Partnerships NHS Foundation Trust	2,714	2,714	2,559	2,723	2,709	1,005							14,424
Tees Esk and Wear Valleys NHS Foundation Trust	116	116	116	115	116	547							1,125
Humber NHS Foundation Trust	91	91	369	183	183	(255)							661
Mental Health Specialist Services	0	0	0	780	324	192							1,296
Other Mental Health	7	7	62	59	(111)	105							129
Sub Total	2,927	2,927	3,106	3,861	3,221	1,594	0	0	0	0	0	0	17,636
Community Services													
York Hospitals NHS Foundation Trust	1,477	1,477	1,427	1,461	1,460	1,636							8,936
York Hospitals NHS Foundation Trust - MSK	166	166	195	185	166	175							1,053
Harrogate and District NHS Foundation Trust	764	764	295	863	643	652							3,980
Hospices	99	99	99	292	4	6							600
Other Community	0	0	0	0	0	22							22
Sub Total	2,505	2,505	2,016	2,800	2,273	2,491	0	0	0	0	0	0	14,591
Other Services													
Continuing Care	1,938	1,938	1,967	571	1,493	1,295							9,203
Funded Nursing Care	371	371	371	418	122	329							1,983
Partnerships	384	384	391	(490)	171	234							1,074
Patient Transport - Yorkshire Ambulance Service NHS Trust	154	154	116	174	191	183							971
GP IT	0	0	0	0	0	536							536
Property Services	0	0	0	86	22	22							129
NHS 111	0	0	0	222	55	55							332
Other Services	0	0	0	0	0	91							91
Sub Total	2,848	2,848	2,845	980	2,054	2,744	0	0	0	0	0	0	14,319
Primary Care													
Prescribing	3,999	3,999	3,541	4,445	4,059	3,434				İ			23,477
Local Enhanced services / Other primary Care	144	144	72	121	120	120				İ			722
Oxygen	25	25	25	13	26	23		1	1	1		1	136
Other Primary Care	0	0	0	100	25	5				İ			130
Sub Total	4,168	4,168	3,638	4,679	4,230	3,582	0	0	0	0	0	0	24,465
Reserves													0
Sub Total	0	0	0	0	0	0	0	0	0	0	0	0	0
CCG Financial Position net of required recurrent surplus	29,206	29,206	30,912	29,511	29,739	28,216	0	0	0	0	0	0	176,790

# **FINANCE RUNNING COSTS & RUN RATE**

#### RUNNING COSTS

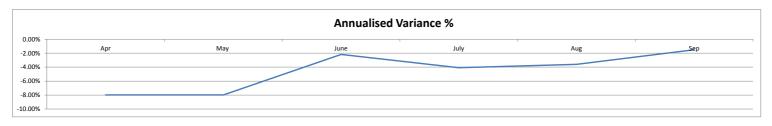
	С	umulative to Da	te
Area	Budget £000	Actual £000	Variance £000
Expenditure			
Pay Budgets	1,351	1,309	(41)
Non Pay Budgets			
- North Yorkshire & Yorkshire CSU	918	926	7
- Other Non Pay Budgets	442	435	(7)
Contingency	0	0	0
Transfer to Programme	0	0	0
Reserve	0	0	0
Transfer to Programme	0	0	0
Total expenditure	2,711	2,670	(41)
Total	2,711	2,670	(41)

	Forecast	
Budget £000	Actual £000	Variance £000
2,726	2,726	0
1,837 836	1,837 836	0 0
833 (833)		833 (833)
2,098 (900)	1,198	900 (900)
6,597	6,597	0
6,597	6,597	0

#### RECONCILIATION OF RUNNING COST ALLOCATION

Ī	Notified allocation at month 4	8,330
	Less - Resource transfer to Programme Costs	
	- Contingency	(833)
	- Reserve	(900)
	Total - Running Costs	6,597

#### **RUNNING COSTS RUN RATE**



	Apr £'000	May £'000	June £'000	July £'000	Aug £'000	Sept £'001	Oct £'002	Nov £'000	Dec £'000	Jan £'000	Feb £'000	Mar £'000
Planned Spend												
Per Month	454	454	454	433	475	440						
Cumulative	454	909	1,363	1,796	2,271	2,711						
Actual spend												
Per Month	418	418	497	389	468	480						
Cumulative	418	836	1,333	1,722	2,190	2,670						
Variance against plan												
Variance in month - £'000	36	36	43	44	7	40						
Cumulative Variance - £'000	36	73	30	74	81	41						
Variance in Month %	-7.98%	-7.98%	9.41%	-10.21%	-1.47%	9.14%						
Annualised Variance %	-7.98%	-7.98%	-2.18%	-4.07%	-3.59%	-1.51%						

## FINANCE COMPLIANCE WITH CODE OF BETTER PAYMENT PRACTICE

#### NON-NHS CREDITORS

Month	Total paid n	Invoices paid on time n	paid within target %	total paid £	value paid on time £	paid withir target %
Apr-13	51	51	100.0%	985,004	985,004	100.0%
May-13	134	130	97.0%	1,070,939	1,059,594	98.9%
Jun-13	183	161	88.0%	2,068,828	2,014,690	96.9%
Jul-13	199	175	87.94%	2,184,748	2,014,690	96.09%
Aug-13	353	297	84.14%	2,339,380	2,172,621	92.87%
Sep-13	182	161	88.46%	1,099,704	1,004,410	91.33%
Oct-13				,,	, ,	
Nov-13						
Dec-13						
Jan-14						
Feb-14						
Mar-14						

#### NHS CREDITORS

Month	Total paid n	Invoices paid on time n	paid within target %	total paid £	value paid on time £	paid withi target %
Apr-13	12	12	100.0%	20,107,497	20,107,497	100.0%
May-13	18	14	77.8%	21,107,430	20,993,947	99.5%
Jun-13	35	29	82.9%	22,007,192	21,940,575	99.7%
Jul-13	182	175	96.15%	23,120,732	23,069,670	99.78%
Aug-13	326	312	95.71%	16,010,782	15,877,055	99.16%
Sep-13	249	232	93.17%	25,393,252	25,291,675	99.60%
Oct-13						
Nov-13						
Dec-13						
Jan-14						
Feb-14						
Mar-14						

#### **OUTSTANDING CREDITORS AS AT MONTH 6**

	1-4 weeks	1-4 weeks £	5-8 weeks	5-8 weeks £	Over 9 weeks	Over 9 weeks	Total n	Total £
As at 30 September 2013	256	28,628,632	42	312,026	78	285,915	376	29,226,573

# **FINANCE AGED DEBTORS REPORT**

		Days Overdue						
	Current	0-30	31-60	61-90	91-180	181-360	361+	Total
Aged Debt by Organisation - Summary	£	£	£	£	£	£	£	£
	344,314.97	0.00	0.00	0.00	0.00	0.00	0.00	344,315
CCG's	166,120.73	0.00	0.00	0.00	0.00	0.00	0.00	166,121
Councils	345,653.54	0.00	0.00	0.00	0.00	0.00	0.00	345,654
	856,089	0	0	0	0	0	0	856,089
		Days Overdue						
	Current	0-30	31-60	61-90	91-180	181-360	361+	Total
	£	£	£	£	£	£	£	£
Aged Debt by Organisation								
	344,314.97	0.00	0.00	0.00	0.00	0.00	0.00	344,315
NHS Commissioning Board NHS Scarborough CCG	344,314.97 166,120.73	0.00 0.00	0.00 0.00	0.00 0.00	0.00	0.00 0.00	0.00 0.00	166,121
NHS Commissioning Board NHS Scarborough CCG North Yorkshire County Council			0.00 0.00	0.00 0.00	0.00 0.00	0.00 0.00	0.00 0.00	
Aged Debt by Organisation  NHS Commissioning Board  NHS Scarborough CCG  North Yorkshire County Council  City of York County Council	166,120.73	0.00	0.00	0.00	0.00	0.00	0.00	166,121

# **QUALITY, INNOVATION, PRODUCTIVITY AND PREVENTION (QIPP)**

Scheme    CYE   FYE   CYE   FYE   CYE   FYE   CYE   FYE   CYE   FYE   Performance against project milestones   Performance against financial savings   CYE   FYE   Performance against project milestones   Performance against financial savings   FYE   FY		Oviginal Torget Revised Torget A-t				Λ-4-	.al				OT.
Setter Care Better Values First to 3,002 3,000 3	Scheme	Original Target		Revised Target		Actual					
Return Care Return Values First to Tollow-Up Ratios   945 945 945 945 945 945 222 222 - Schemes ledrified   Provider new leave presented for CCG clinical review   Provider New leave presented for New leave presented for New leave p								Performance against project milestones	Performance against financial savings		£'000s
Provider review presented for CCG clinical review — Provider have requested recognition of work done and payment for work undertaken — Provider have requested recognition of work done and payment for work undertaken — Provider have requested recognition of work done and payment for work undertaken — Provider have requested recognition of work done and payment for work undertaken — Provider have requested recognition of work done and payment for work undertaken — Provider have requested recognition of work done and payment for work undertaken — Provider have requested recognition of work done and payment for work undertaken — Provider have requested recognition of work done and payment for work undertaken — Provider review the fifted from Q4 — Policy requested recognition of work done and payment for work undertaken — Provider review the fifted from Q4 — Policy requested recognition of work done and payment for work undertaken — Provider recognition of work done and payment for work undertaken — Policy requested recognition of work done and payment for work undertaken — Policy requested recognition of work done and payment for work undertaken — Policy requested recognition of work done and payment for work undertaken — Policy requested recognition of work done and payment for work undertaken — Policy requested recognition of work undertaken — Policy requested recognition of work undertaken — Policy requested recognition of work undertaken — Policy requested recognition of work undertaken — Policy requested recognition of work undertaken — Policy requested recognition of work undertaken — Policy requested recognition of work undertaken — Policy requested recognition of work undertaken — Policy requested recognition of work undertaken — Policy requested recognition of work undertaken — Policy requested recognition of work undertaken — Policy recognition of work undertaken — Policy recognition of work undertaken — Policy recognition of work undertaken — Policy recognition of work undertaken — Policy recognition of	Retter Care Retter Values First to							- Agreed with provider and actioned in contract	- Actioned within contract, slightly under trajectory for O1 and O2 f0 8m		
Prescribing   945   94		3,032	3,302	3,302	3,203	3,302	3,302			3,302	3,50
Persisting	Tollow-op Ratios							- Provider review presented for CCG clinical review	•		
Prescribing 945 945 945 945 945 222 222 222 35hemes identified											
Incentive scheme approved by Governing Body  Incentive scheme approved by Foreithade Contract  Incentive scheme approved by Foreithade Contract  Incentive scheme approved by Contract schemes  Incentive scheme approved by Contract schemes  Incentive scheme approved by Contract schemes  Incentive scheme approved by Contract schemes  Incentive scheme approved by Contract schemes  Incentive scheme approved by Contract schemes  Incentive scheme approved by Contract schemes  Incentive scheme approved by Governing Advanced  Incentive scheme approved by Contract schemes  Incentive scheme approved by Contract schemes  Incentive scheme approved by Contract schemes  Incentive scheme approved by Con	Prescribing	945	945	945	945	232	232	- Schemes identified		945	945
Simoking Thresholds 1,70 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0										- 1.	
Pathology	Smoking Thresholds	1.710	0	0	0	0	0		- Non recurrent with effect from O4	500	
Pathology 500 500 500 1,200 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		-/	_	_		_					
Contracting - Lucentis drug discount 100 400 400 400 400 400 400 400 400 400	Pathology	500	500	500	1,200	0	0	-Benchmarking exercise on track	, ,	450	700
Dut of area 125 0 125 375 0 0 0 Risk sharing with other CCGs 1250 150 300 150 300 0 0 Risk sharing with other CCGs 1250 150 150 300 150 300 0 0 Risk sharing with other CCGs 1250 150 150 300 0 0 Risk sharing with other CCGs 1250 150 150 150 300 0 0 Risk sharing with other CCGs 1250 150 150 150 150 150 150 150 150 150 1	Contracting - Lucentis drug discount	100	400	400	400	400	400	- Agreed with drug company and now in contract		400	400
Procedures of Limited Clinical Value 300 150 300 0 0 - RSS now live, all practices to be on by end of Nov be quantified in Dec be quantified in Dec be quantified in Dec be quantified in Dec be quantified in Dec be quantified in Dec be quantified in Dec can be quantified	5										
Home Oxygen 101 133 100 200 0 0 0 Not on Choose and Book Reliant on single member of staff who has now handed in notice  Dermatology 189 186 0 0 0 0 0 0 Procurement now halted. Work on-going with current provider to optimise and reserve the delivery model or potential and reserve the staff who has now handed in notice  Post-Or Cataract Service 187 130 0 0 0 0 0 Not And, No savings expected from procurement.  Post-Or Cataract Service 187 130 0 0 0 0 0 Not And, No savings expected from procurement.  Post-Or Cataract Service 187 130 0 0 0 0 0 Not And, No savings expected from procurement.  Post-Or Cataract Service 187 130 0 0 0 0 0 Not And, No savings expected from procurement.  Post-Or Cataract Service 187 130 0 0 0 0 0 Not And, No savings expected from procurement.  Post-Or Cataract Service 187 130 0 0 0 0 0 Not And, No savings expected from procurement.  Post-Or Cataract Service 187 130 0 0 0 0 0 Not And, No savings expected from procurement.  Post-Or Cataract Service 187 130 0 0 0 0 0 Not And, No savings expected from procurement.  Post-Or Cataract Service 187 130 0 0 0 0 0 Not And, No savings expected from procurement.  Post-Or Cataract Service 187 130 Not And Not And No savings expected from procurement.  Post-Or Cataract Service 187 130 Not And Not And No savings expected from procurement.  Post-Or Cataract Service 187 130 Not And N	Out of area	125	0	125	375	0	0	- Risk sharing with other CCGs	- Savings identified, but split with other CCGs to be confirmed	300	400
Home Oxygen 101 133 100 200 0 0 0 Not on Choose and Book skellant on Single member of Staff who has now handed in notice 189 186 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Procedures of Limited Clinical Value		300	150	300	0	0	- RSS now live, all practices to be on by end of Nov	- Early indications are that we already sending referrals back. This needs to	250	400
Permatology 189 186 0 0 0 0 0 - Procurement now halted. Work on-going with current provider to optimise and refresh the delivery model 9 - Procurement now halted. Work on-going with current provider to optimise and refresh the delivery model 9 - Prost-Op Cataract Service 187 130 0 0 0 0 0 0 - On hold. No savings expected from procurement. 9 - On hold. Prost-Op Cataract Service 187 130 0 0 0 0 0 0 - On hold. Pending final review. No savings expected from community model 9 - Prost-Op Cataract Service 187 257 0 0 0 0 0 0 - Work on-going. No savings this year, but potential efficiencies in 2014/15 9 - Prost-Op Cataract Service 187 257 0 0 0 0 0 0 - On hold. To be reviewed for 2014/15 9 - Prost-Op Cataract Service 187 257 0 0 0 0 0 0 - On hold. To be reviewed for 2014/15 9 - Prost-Op Cataract Service 187 257 0 0 0 0 0 0 - On hold. To be reviewed for 2014/15 9 - Prost-Op Cataract Service 187 257 0 0 0 0 0 0 0 - On hold. To be reviewed for 2014/15 9 - Prost-Op Cataract Service 187 257 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									be quantified in Dec		
Dermatology 189 186 0 0 0 0 - Procurement now halted. Work on-going with current provider to optimise and refresh the delivery model optimise and refresh to the delivery model optimise and refresh to the delivery model optimise and refresh to the delivery model optimise and refresh to the delivery model optimise and refresh to the delivery model optimise and refresh the delivery model optimise and refresh to the delivery model optimise and refresh to the delivery model optimise and refresh to the delivery model optimise and refresh to the delivery model optimise and refresh to the delivery model optimise and refresh to the delivery model	Home Oxygen	101	133	100	200	0	0	- Not on Choose and Book	- Analysing data to quantify savings	25	100
optimise and refresh the delivery model  Post-Op Cataract Service								- Reliant on single member of staff who has now handed in notice			
Pain Management Service 22 81 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Dermatology	189	186	0	0	0	0	- Procurement now halted. Work on-going with current provider to			
Post-Op Cataract Service 187 130 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								optimise and refresh the delivery model			
Diabetes 87 257 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Pain Management Service	22		0	0	0	0	- On hold. No savings expected from procurement.			
Diabetes 87 257 0 0 0 0 0 - Work on-going. No savings this year, but potential efficiencies in 2014/15  Heart Failure 35 71 0 0 0 0 0 - On hold. To be reviewed for 2014/15  Rapid Response - Cellulitis 105 0 0 0 0 0 0 - Scheme currently being worked up with a view to making efficiencies for final quarter and 2014/15  Psychiatric Liaison 150 300 0 0 0 0 - Under review, but not expected to make any savings this year  Neurology 300 0 0 0 0 - Deep dive information pack expected mid-October, to be reviewed then for potential saving  Frailty / Care Home initiative 150 0 0 0 0 0 - Project underway to review future model or primary care support to reduce emergency admissions  Urgent Care Review 300 0 0 0 0 0 0 0 - Ol tender now approved to progress. No in-year savings, but efficiencies expected in future years  High Impact Users 200 0 0 0 0 0 0 - Project being scoped to reduce number of high impact users on emergency pathways  Respiratory Review 350 0 0 0 0 0 0 - Info pack expected by end of month with review for potential schemes to be completed	Post-Op Cataract Service	187	130	0	0	0	0	- On hold. Pending final review. No savings expected from community			
Heart Failure 35 71 0 0 0 0 0 0 - On hold. To be reviewed for 2014/15  Rapid Response - Cellulitis 105 0 0 0 0 0 0 0 - Scheme currently being worked up with a view to making efficiencies for final quarter and 2014/15  Psychiatric Liaison 150 300 0 0 0 0 0 - Under review, but not expected to make any savings this year  Neurology 300 0 0 0 0 0 0 Deep dive information pack expected mid-October, to be reviewed then for potential saving  Frailty / Care Home initiative 150 0 0 0 0 - Project underway to review future model or primary care support to reduce emergency admissions  Urgent Care Review 300 0 0 0 0 0 0 - OOH tender now approved to progress. No in-year savings, but efficiencies expected in future years  High Impact Users 200 0 0 0 0 0 - Project being scoped to reduce number of high impact users on emergency pathways  Respiratory Review 350 0 0 0 0 0 0 0 Info pack expected by end of month with review for potential schemes to be completed											
Rapid Response - Cellulitis  105  0  0  0  0  0  0  0  0  0  0  0  0	Diabetes	87	257	0	0	0	0	- Work on-going. No savings this year, but potential efficiencies in 2014/15			
Rapid Response - Cellulitis  105  0  0  0  0  0  0  0  0  0  0  0  0											
final quarter and 2014/15  Psychiatric Liaison 150 300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Heart Failure				0	0	0				
Psychiatric Liaison 150 300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Rapid Response - Cellulitis	105	0	0	0	0	0				
Neurology 300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0											
for potential saving  Frailty / Care Home initiative  150 0 0 0 0 0 0 - Project underway to review future model or primary care support to reduce emergency admissions  Urgent Care Review  300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	-1		300	0	0	0	0	, , ,			
Frailty / Care Home initiative 150 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Neurology	300	0	0	0	0	0				
reduce emergency admissions  Urgent Care Review 300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0											
Urgent Care Review 300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Frailty / Care Home initiative	150	0	0	0	0	0				
efficiencies expected in future years  High Impact Users  200 0 0 0 0 0 0 0 - Project being scoped to reduce number of high impact users on emergency pathways  Respiratory Review 350 0 0 0 0 0 0 - Info pack expected by end of month with review for potential schemes to be completed											
High Impact Users  200 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Urgent Care Review	300	0	0	0	0	0				
emergency pathways  Respiratory Review 350 0 0 0 0 0 0 - Info pack expected by end of month with review for potential schemes to be completed	ne ta a a a	200	0								
Respiratory Review 350 0 0 0 0 0 - Info pack expected by end of month with review for potential schemes to be completed	High Impact Users	200	U	0	0	0	0				
be completed	Pagniratary Payiou	250		-	_	0					-
	Respiratory Review	350	U	U	U	0	U				
745 . ECP 250 0 200 800 0 0 0 1 PIIOT PROJECT GEING WORKEG UP IN YEAR TO SUPPORT WINTER PRESSURES AND	VAS - FCD	250	_	200	900	_					1
languar town to vaduce attendances to ARF	TAS : ECF	250	U	200	800	0	U				
	Total	0.000	7 205	6 222	0.433	4 524	4 534	longer term to reduce attendances to A&E		6 773	6,847