Report	ing Period: February 2017	Stage 2 - Project Development								Stage 3 - Implementation											Primary Care - Dashboard. Exec Sponsor:					
Total v	alue				1						of s (revie	ted value cheme ewed by ce Lead)		TAF (Gatewa	FIRMED RGET ay 2 sign ff)		SAVING Year to D (2016/1	ate	Forecast Outturn							
Ref	Project title	Exec Sponsor	Clinical Lead	Prgrmm Lead	GATEWAY 1	Plan on a page completed	Milestones defined KPIs defined	Financial phasing by month	Risks ID'd and quantified	Impact assessments done Key stakeholders engaged	16/17 (£000			16/17 (£000)		YTE Plar (£000	Actua	l Var	16/17 (£000)	Milestones on track	KPI's on track	Financial benefits on track Risk Management	Impact assessment man.	Stakeholder management	Overall RAG	Comments for the attention of the [Senior Management Team] A Minor issues that may result in full benefits not being realised R Significant project issues likely to result in full benefits not being realised
PC1	Anti-coagulation		Tim Maycock	Shaun Macey	-								1	65			-	-	- 36		•	•	•	•	A	GREEN to AMBER due to: The CCG has been contacted by the hospital to explain that some patients who have transferred to general practice services have since come back into the hospital as they have have not been satisfied with the new service. In an attempt to understand any issues driving this the CCG has contacted all practices to ask whether they have the INRStar software installed, the near patient test kits ready, and have started to invite patients to attend their clinics. As of February 2017, feedback from practices suggests that whilst many have the software and kit, far fewer than expected have started to pull patients across from the hospital service. In addition there are some concerns from the hospital team around cinal protocols. These issues and delays will have a detrimental effect on the projected savings. Actions to resolve: On 13th February the CCG met with various representatives from the hospital to discuss future plans around the Anti-coagulation Service. It was agreed in principle that this should transfer in full to primary care at pace. Another meeting will be arranged to work on the pathway and clinical protocols to ensure that patients can be safely transferred to the primary care service.
PrC.18	Primary Care Transformation Fund (ETTF) [non-QIPP]		Tim Maycock	Shaun Macey	1								[mm/pp]							•	•	•	•	•	4	RED to AMBER due to: NHSE has confirmed small amounts of funding to enable some schemes to proceed. The revenue impact for these schemes is minimal. Actions to resolve: Awaiting feedback from NHSE regarding any further capital funding. Only progress if funding identified at NHSE, CCG and practice levels.
069	GP Workforce Review Phase 2 [non-QIPP]		Tim Maycock	Shaun Macey	-								[dd/mm]							•	•	•		•	4	Remains AMBER due to: Outline schemes have been received from CAVA and SHIELD to undertake more work around Workforce and Demand Management. These need to be signed off before the end of March. Actions to resolve: SM to confirm internal authorisation process in time to sign off for end of March.
PrC.20	GP Education and Engagement 2016-17 [non-QIPP]		Tim Maycock	Shaun Macey	1								[mm/pp]							•	•	•	•		3	Remains GREEN due to: Finance team have confirmed availability of funding to continue work next year Actions to resolve: Phil Mettam will speak to Primary Care Commissioning Committee on 28th February regarding protected time for care
PrC.21	GP Forward View: Delivery Plan for STP submission		Tim Maycock	Shaun Macey	1								1							•	•	•	•		3	Remains GREEN due to: Plan submitted and awaiting feedback from NHSE. Actions to resolve: Any amendments to be made as advised by NHSE. Actions under plan to be managed via project 067 GP Forward View Delivery, but no further information yet received.
067	GP Forward View Delivery		Tim Maycock	Shaun Macey	-								1							•	•	•			3	From AMBER to GREEN due to: Practices contacted to submit invoices for reception and clerical training (£31k total). The CCG has also agreed £88k funding with NHSE for practice resilience schemes. Currently working through details around moving this funding to practices. £3 per head investment being discussed at CoR on 16 February. Actions to resolve: SM to continute to update on GPFV Delivery each month at CoR.
	Main Programme schemes				-								[mm/pp]													
	(sub total)											-	1	65	-		-	-	- 36							
	Other Programme schemes		6								-	-		-	-		-		-							
Total v	alue											-	-	65			•	-	- 36							