APPENDIX 1. QIPP SCH	EME	REP	ORT MON	ГН 4				4						
									YTD		For	ecast Outto	urn	
Scheme Name	Lead	Ref	Is the scheme in DELIVERY?	Rating of scheme PRE- DELIVERY	IMPLEMEN TATION (Delivery start)	Immediate Key Risks	Mitgating Actions	Planned savings £000	Expected savings £000	Actual savings £000	Planned savings £000	Expected savings £000	Actual savings £000	Finance RAG rating
PRIMARY CARE														
DVT	ТМ	PC3	N	А	Oct-16	Risk to the delivery of savings alongside the current arrangements re. the hospital Ambulatory Care Unit block contract.	CCG Contracting and Finance teams to analyse cost and activity data to understand whether a Primary Care DVT pathway could deliver greater savings if another condition could be picked up in the Ambulatory Care Unit block contract.	0	0	0	17	0	0	R
Dermatology Indicative Budgets	soc	PC2	Y		Apr-16	None identified to date.	None required.	33	33	19	100	100	86	G
Anti-Coagulation service	ТМ	PC1	N	А	Aug-16	Risk to pace of schemes if Practice take up of the Anticoagulation contract and movement of patients out of the hospital service and into local GP services is not rapid enough to deliver the planned savings.	CCG to work with and provide support to Vale of York Clinical Network to encourage Practices to offer the service to their registered patients as quickly as possible.	13	0	0	118	91	91	А
Faecal Calprotectin	soc	PC4	N	R	Oct-16	Risk to delivery and savings due to lack of capacity in hospital labs.	Hospital labs vacancy has been advertised, and CCG to monitor progress of recruitment to the vacancy.	35	9	0	105	79	79	A
URGENT CARE														
Non Contracted Activity	AP	U4	N	G	TBC	Risk to implementation date due to need to undertake financial forecast.	Ensure analysis is completed within plan.	30	0	0	267	0	0	R
Paediatric Zero Length of Stay	AP	U1	N	G	Oct-16	None identified to date.	None required.	0	0	0	34	34	34	GA
RightCare - Trauma & Injuries	AP	U6	N		TBC	Not yet an active scheme, see report.		0	0	0	37	0	0	R
RightCare - Circulation (Heart Disease)	soc	U7	N	G	Oct-16	None identified to date.	None required.	0	0	0	70	70	70	R

									YTD		Forecast Outturn				
Scheme Name	Lead	Ref	Is the scheme in DELIVERY?	Rating of scheme PRE-DELIVERY	IMPLEMEN TATION (Delivery start)	Immediate Key Risks	Mitgating Actions	Planned savings £000	Expected savings £000	Actual savings £000	Planned savings £000	Expected savings £000	Actual savings £000	Financ RAG rating	
ED Front Door	AP	U2	Y		Jul-16			10	0	0	91	0	0	R	
Urgent Care Practitioners	AP	U3	Y		Apr-16			76	76	97	76	76	97	G	
INTEGRATION AND COMMUNITY					r -				-	-					
Review of community inpatient services	ТМ	IC2	N	А	Dec-16	Risk to implementation date due to the need to undertake extended public engagement.	Engagement with Partners and Stakeholders taking place. Ongoing joint partnership with Integrated Transformation Board.	0	0	0	333	333	333	R	
Integrated Care Team Roll-out	ТМ	IC1	N	А	Doc 16	Risk to achieving timescale for roll out, resulting in slippage in financial efficiencies from the out of hospital model	Weekly Programme Executive Group established as sub group of Provider Alliance Board- CCG now represented to support roll out and link to financial model.	0	0	0	378	378	378	А	
Wheelchairs & Community Equipment	ТМ	IC3	N	G	Jan-17	None identified to date.	None required.	0	0	0	118	118	118	GA	
RightCare - Respiratory (COPD)	soc	IC8	N		TBC	Not yet an active scheme, see report.		0	0	0	17	0	0	R	
Community Diabetes	soc	IC9	Y	O	Apr-16	Risk to the delivery as the Trust continue to fill capacity.	Full review of the scheme and associated activity.	50	0	0	149	75	75	А	

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								-	YTD		Forecast Outturn				
Scheme Name	Lead	Ref	Is the scheme in DELIVERY?	Rating of scheme PRE- DELIVERY	IMPLEMEN TATION (Delivery start)	Immediate Key Risks	Mitgating Actions	Planned savings £000	Expected savings £000	Actual savings £000	Planned savings £000	Expected savings £000	Actual savings	Finance RAG rating	
Community IV	AP	IC7	N	R	TBC	Risk to the planned savings of the scheme: Trust information indicates that this would be an additional cost to the CCG if implemented.	Further work required	10	0	0	50	0	0	R	
Patient Transport - contracting review	ТМ	IC5	Y	G	May-16	Risk to the scheme if the savings can not be evidenced as expected.	Full review of the new data and look for any patterns i.e. times/days that we can look to address and review the capacity of the extra on day crew from YAS.	25	25	0	92	92	92	GA	
Community Podiatry	TM	IC4	N	G	TBC	None identified to date.	None required.	0	0	0	0	0	0	R	
PRESCRIBING															
Branded generics	SOC	PS2	N	Α	Oct-16	Risk to achieving implemention date and savings, as amendments may be require following public conversations.	Evaluate impact of public conversation.	58	0	0	519	162	162	R	
Therapeutic switches	soc	PS1a	Y	G	Apr-16	None identified to date.	None required.	133	72	0	400	325	325	А	
Repeat prescriptions	LA	PS1b	N	R	Oct-16	Risk that the policy of reducing repeat prescriptions is not adhered to.	Visit or contact individual practices not adhering to policy and work with Vale of York Clinical Network to address variation in uptake.	133	0	0	400	200	200	R	
Gluco Rx - Diabetic Prescribing	soc	PS3	Z	R	Oct-16	Risk to delivery of scheme if practices do not take up the new policy re Gluco Rx.	Visit or contact individual practices not adhering to policy and work with Vale of York Clinical Network to address variation in uptake. Reduce funding by 2% for practices not compliant by 30/9/16.	99	17	0	297	156	156	А	
Minor Ailments Prescribing	SOC	PS7	N	G	Oct-16	None identified to date.	None required.	38	0	0	138	100	100	R	

APPENDIX 1. QIPP SCH	EME	REP	ORT MONT	ГН 4				4						
								7	YTD		For	ecast Outto	ırn	
Scheme Name	Lead	Ref	Is the scheme in DELIVERY?	Rating of scheme PRE-DELIVERY	IMPLEMEN TATION (Delivery start)	Immediate Key Risks	Mitgating Actions	Planned savings £000	Expected savings £000	Actual savings £000	Planned savings £000	Expected savings £000	Actual savings £000	Finance RAG rating
Continence & Stoma Care	SOC	PS4	Y	A	Jul-16	There is a risk to the scheme in that the savings are wihtin a block contract.	Meeting with the Trust arranged for 26 th Sep to discuss the current block payment and how we can proceed to ensure we realise the QIPP savings from the scheme.	4	4	0	38	52	48	А
SIP Feeds	soc	PS6	Y	G	Apr-16	None identified to date.	None required.	40	20	42	120	80	169	G
Dressings	soc	PS5	Y	G	Oct-16	There is a risk to the scheme in that the savings are wihtin a block contract.	Meeting with the Trust arranged for 26 th Sep to discuss the current block payment and how we can proceed to ensure we realise the QIPP savings from the scheme.	0	0	3	63	63	74	GA
PLANNED CARE														
High Cost Drugs & Devices Review	SOC	PL3	N	R	Apr-16	Risk of no delivery of scheme in year due to review of Biosimilars and potential gain share has shown potential for 2017/18 onwards.	No mitigating action in year. Action is to roll scheme forward to next year.	178	0	0	535	0	0	R
YTHFT follow up ratio		PL13	Y	R	Apr-16	Risk of limited delivery to scheme in year due to partial non-compliance to current conditions register.	Continue to raise profile of conditions register at Contract Management Board.	234	234	0	703	703	469	R
Biosimilar Etanercept (YTHFT)	soc	PL5	Y	G	Apr-16	None identified to date.	None required.	96	96	6	287	287	214	G
Biosimilar Infliximab & Etanercept (LTH)	soc	PL4	Y	G	Apr-16	None identified to date.	None required.	14	14	1	44	44	44	А
RightCare - Diabetes	soc	PL6	N			Scheme not going ahead - has been Scheme	preceded by the Community Diabetes	0	0	0	11	0	0	R

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									YTD		For	ecast Outtu	ırn	
Scheme Name	Lead	Ref	Is the scheme in DELIVERY?	Rating of scheme PRE- DELIVERY	IMPLEMEN TATION (Delivery start)	Immediate Key Risks	Mitgating Actions	Planned savings £000	Expected savings £000	Actual savings £000	Planned savings £000	Expected savings £000	Actual savings £000	Finance RAG rating
RightCare - Orthopaedics	ТМ	PL1	N	G	Oct-16	None identified to date.	None required.	0	0	0	192	192	192	R
ENT	soc	PL2	N	R	Jul-16	Risk to implementation date of scheme and financial viability if Trust costs increase.	Continue to raise at Contract Management Board.	6	6	0	58	58	58	R
POLCV - Hips & Knees	SOC	PL8	N	R	TBC	Risk to implementation date due to decision making processes and timescale. Delays to implementation will require additional schemes to be implemented. Contractual implications will arise and require addressing.	Best evidence will be presented and decisions taken at earliest opportunities.	0	0	0	0	348	348	Α
POLCV - Cataract Surgery	soc	PL9	N	R	TBC	Risk to implementation date due to decision making processes and timescale. Delays to implementation will require additional schemes to be implemented. Contractual implications will arise and require addressing.	Best evidence will be presented and decisions taken at earliest opportunities.	0	0	0	0	0	0	R
POLCV - Breast Reconstruction	soc	PL10	N	R	TBC	Risk to implementation date due to decision making processes and timescale. Delays to implementation will require additional schemes to be implemented. Contractual implications will arise and require addressing	Best evidence will be presented and decisions taken at earliest opportunities.	0	0	0	0	0	0	R
Direct Access Radiology	soc	PL11	N	G	TBC	Risk to delivery of schemes if limiting direct access radiology for some diagnostic tests does not achieve the desired efficiencies.	Ongoing analysis of variation by practice, challenge to individual practices where appropriate and work with VCN re clinical variation.	0	0	0	0	0	0	R
Review IVF commissioning		PL12						0	0	0	0	0	0	R
MENTAL HEALTH & CONTINUIN	G HEAL	THCA	ARE											
Reduction in section 117 spend	LB	M1	Y	R	Oct-16	Risk to delivery of scheme due to PCU capacity, and actual net savings post review stage.	Will be raised at PCU Management board.	83	83	0	250	250	250	R

									YTD		Foi	recast Outtu	ırn	
Scheme Name	Lead	Ref	Is the scheme in DELIVERY?	Rating of scheme PRE- DELIVERY	IMPLEMEN TATION (Delivery start)	Immediate Key Risks	Mitgating Actions	Planned savings £000	Expected savings £000	Actual savings £000	Planned savings £000	Expected savings £000	Actual savings £000	Financ RAG rating
Continence Supplies	LB	C1	N	А	Sep-16	Risk to delivery of scheme due to logistical issues - NHS supplier capacity and care homes storage space.	Logistical issues being addressed, 5.9.16 to commence new process.	11	0	0	33	16	16	R
CHC review	LB	C2	Y	А	Apr-16	Risk due to PCU capacity impacting on finance.	Will be raised at PCU Management board.	241	241	55	722	722	722	А
Respecification of May Lodge	LB	С3	N	R	Nov-16	Risk to achieving implementation date due to the need to complete outstanding service users need assessments.	Will be raised at PCU Management board.	4	4	0	12	12	36	R
RUNNING COSTS														
Running costs review & financial controls	TP	B1	Y		Feb-16			250	250	359	750	750	745	G
Total identified QIPP								1,904	1,185	583	7,620	5,962	5,777	
Additional YTHFT schemes			N	R	TBC	implemented. Contractual	Best evidence will be presented and decisions taken at earliest opportunities. Schemes will be prioritiesed for development and supported by PMO.	0	0	0	4,000	4,000	0	R
Unidentified QIPP			N	R	TBC	implemented. Contractual	Best evidence will be presented and decisions taken at earliest opportunities. Schemes will be prioritiesed for development and supported by PMO.	0	0	0	580	2,238	0	
Total QIPP requirement								1,904	1,185	583	12,200	12,200	5,777	
Planned savings' is the saving inc														
Expected savings' are the most up PRE-DELIVERY 'Operational' RA Meeting all milestones, risks mitiga	G ratin	g Key	,				opment of a business case or changes RAG rating key In delivery and on track	to assumpt	ions used in	the financ	cial plan			G
Unmitigated risks to achieving mile Slippage and failure to achieve mile	estones,	likely	or existing risk	of slippage	A R		In delivery, savings expected to be in li Finances fully worked up but delivery r Finances not yet fully worked up, busin	ot on track		ot yet evide	enced			GA A