

Better Together Alliance PMO Report

Alliance Leadership Board

Period of Report: May 2017

Date of Report: 21st June 2017

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1. Executive Summary

1.1 Introduction

This is first draft of the monthly Alliance PMO report for the Alliance Leadership Board.

The report currently only covers the four main programmes within the Alliance Work Plan:

- Urgent and Proactive
- Elective Care
- Women's and Children's
- Mental Health and Community

The intention is to extend the scope of reporting to include for example:

- Alliance dependent CIPs (e.g. SFH £6.2m)
- Primary Care

1.2 Key messages at Alliance level

At the end of month 2 the Alliance work plan has delivered £1.3m against a target of £1.5m (86%) in terms of CCG financial savings.

A significant proportion of financial savings in the work plan are phased for delivery later in the financial year. To mitigate risk of under delivery the four Programme Delivery Boards have been allocated a 25% stretch target. Progress identifying and developing opportunities will be monitored by the PMO.

1.3 Key messages at programme level

Urgent and Proactive:

- Month 2 financial savings are 91% of target
- ED attendances are 4% above the QIPP target
- Non elective admissions are 5% above the QIPP target
- Project level milestones are all green / amber
- A number of projects have however financially under delivered at month 2.
 - The exception reports for End of Life and Kirkby (NEMs) review indicate a high confidence of recovery
 - The exception report for New Primary Care Model indicates project is largely delivering its milestones but this is not reflected in financial delivery reporting at month 2. This will be reviewed in advance of month 3 reporting
 - Deep dives are expected to be assessed by the CCG Turnaround Board on 22 June for LICT, SICT and Call for Care and Local admission avoidance engagement scheme. An update will be provided at ALB
- After mitigation programme risks are amber rated

Elective

- Month 2 financial savings are 81% of target
- New outpatient first appointments are 5% below the QIPP target
- All electives are 1% below the QIPP target
- Project level milestones are all green / amber
- A number of projects have financially under delivered at month 2
 - The exception reports relating to IVF/Vasectomies and PLCV indicate a high confidence of recovery
 - The exception reports relating Consultant Connect indicates a medium confidence of recovery.

- The exception report relating to Direct Access Radiology indicates low confidence of recovery and further mitigation is required to assure recovery.
- After mitigation programme risks are amber rated
- Management of the MSK issue is rated green following CCG Governing Body on 15 June

Mental Health and Community

- Month 2 financial savings are 6% of target (related to the community element of the programme, no financial savings were expected from Mental Health until month 7).
- All mental health milestones are green.
- All community milestones are green / amber
- Two projects have however financially under delivered at month 2:
 - The exception reports relating to Mansfield Community Hospital and NUH local prices indicate high confidence of recovery
- After mitigation programme risks are amber rated

Women's and Children's

- Month 2 financial savings are as expected (no financial savings were expected from Women's and Children's until month 7)
- Programme milestones are green (projects are currently being defined).
- After mitigation programme risks are green rated

1.4 Recommended Actions

Alliance Leadership Board is asked to:

- Note the report
- Focus ALB discussions on exceptions
- Respond to any items escalated for discussion by the Programme Delivery Boards
- Comment on style and content of the report to inform further development

2. Executive Summary

This section summarises progress in relation to programmes, finances and delivery of Alliance objectives. A summary of methodology behind ratings and metrics is provided in Appendix 1.

2.1 Programme Summary

The following table provides a summary of each programme in relation to achievement of programme milestones and QIPP financial target.

Programme	Milestone Delivery (previous month)	Milestone Delivery (current month)	Financial Impact YTD (previous month)	Financial Impact YTD	Exceptions
Urgent and Proactive Care	Green	Amber		Amber 91% of target	Yes
Elective	Amber	Amber		Amber 81% of target	Yes
Mental Health	Amber	Green		Impact from month 7	No
Community	Amber	Amber		Red 6% of target	Yes
Women and Children's	Green	Amber		Impact from month 7	No

2.2 Financial Performance

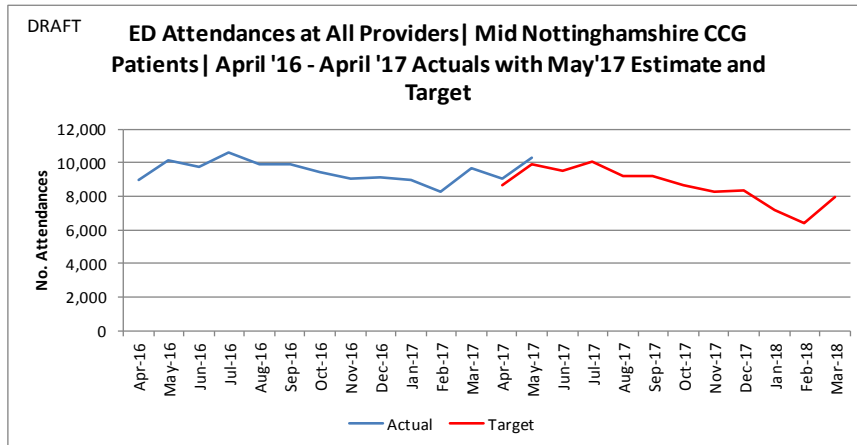
Financial performance of each programme is summarised below in terms of in month financial RAG and year to date financial RAG. At this stage this section only includes CCG financial information. It will be developed to include other elements of the work plan e.g. CIPs in future reports.

April - May 2017 : Month	Annual QIPP			Year to Date QIPP			In Month QIPP Delivery				RAGS			
	2017/18 Plan	2017/18 FOT	2017/18 FOT Variance	YTD Plan	YTD Actual	YTD Variance	In Month Plan	In Month Actual	In Month Variance	% of Plan	Previous month milestone	In month milestones	In month finance	YTD finance
Urgent Care	12,407	12,407	0	1,174	1,069	-105	587	717	130	91%	Green	Amber	Green	Amber
Elective Care	10,110	10,110	0	298	242	-56	149	138	-11	81%	Amber	Amber	Amber	Amber
Mental Health & Community	6,371	6,371	0	46	3	-43	23	3	-20	6%	Amber	Amber	Amber	Red
Womens & Childrens	1,388	1,388	0	0	0	0	0	0	0		Green	Amber	Grey	Grey
Total CCG	30,275	30,275	0	1,518	1,313	-205	759	857	98	86%				

Please note the information above reflects the financial target position at May 2017 which has since increased to £30.9 million in the final Alliance work plan of June 2017. Future reporting will be against the £30.9m.

2.3 Performance Against System Objectives

Objective 1: 14% reduction in A&E attendances in 2017/18
(original Better Together objective 15.1% reduction)

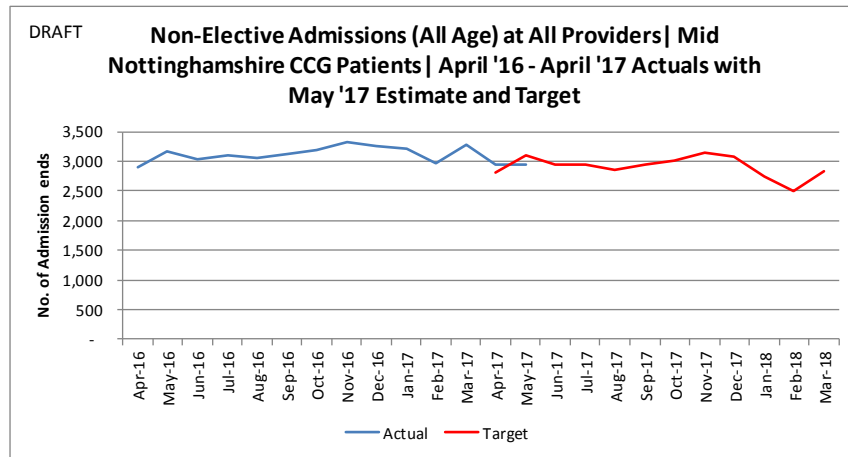


ED	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17	8,962	10,181	9,755	10,587	9,900	9,909	9,448	9,064	9,106	9,015	8,308	9,686
17/18	9,043	10,273										
17/18 Target	8,654	9,940	9,492	10,029	9,184	9,178	8,686	8,279	8,318	7,166	6,420	7,950
YTD Var	v 16/17	v Target	% v Target									
M1-2 (17/18)	0.9%	722	3.9%									

Insight into activity trends:

- Year to date activity is 3.9% over target.
- Year to date activity is marginally greater than the same period in 16/17.
- Early sight of SUS data (SFH proxy) does show a rise in ED activity but projected to be marginally below target.

Objective 2: 11% reduction in non-elective acute admissions in 2017/18 (original Better Together objective 19.5% reduction)

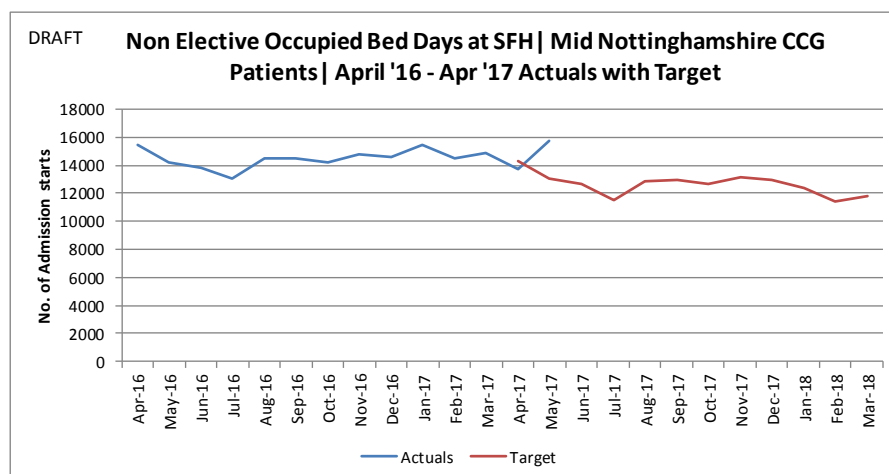


NEL (Child)	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17	2,895	3,168	3,026	3,101	3,049	3,129	3,193	3,322	3,269	3,211	2,973	3,284
17/18	2,952	3,238										
17/18 Target	2,814	3,099	2,952	2,942	2,856	2,936	3,002	3,135	3,079	2,747	2,499	2,844
YTD Var	v 16/17	v Target	% v Target									
M1-2 (17/18)	2.1%	277	4.7%									

Insight into activity trends:

- Year to date activity is 4.7% over target.
- Year to date activity is marginally greater than the same period in 16/17.
- Early sight of SUS data (SFH proxy) indicates activity will be closer to target than May estimate reported.

Objective 3: Reduction in non-elective acute bed days in 2017/18 (% reduction TBC) (original Better Together objective 30.5% reduction)

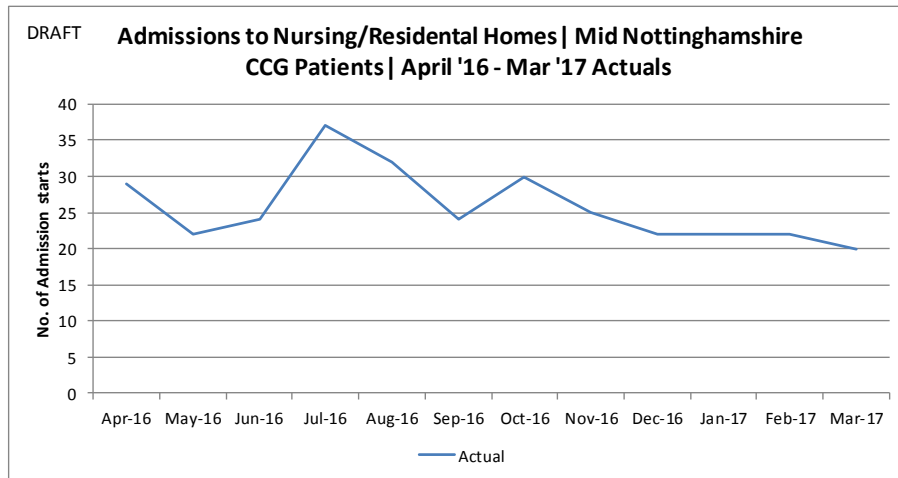


NEL OBD	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17	15,410	14,204	13,818	13,017	14,456	14,487	14,223	14,727	14,558	15,465	14,485	14,850
17/18	13,688	15,688										

Insight into activity trends:

- Year to date activity is marginally below the same period in 16/17.

Objective 4: Reduction in long term admissions to nursing and residential homes
% reduction to be confirmed
(original Better Together objective 25% reduction)

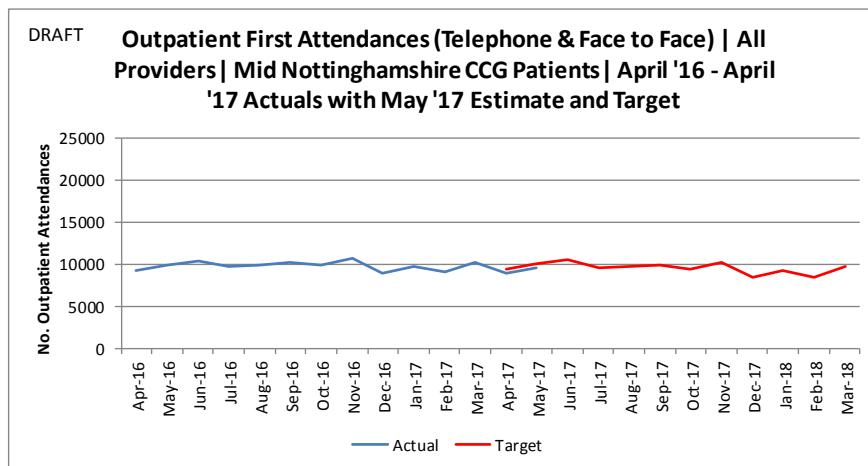


CH Adms	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17	29	22	24	37	32	24	30	25	22	22	22	20

Insight into activity trends:

- Targets are still to be agreed for this objective.
- It is expected that this will be reported on in month three.

Objective 5: 8% reduction in secondary care elective referrals (outpatient first appointments, all sources, excluding 2ww, adjustment made for 17/18 activity to reflect working days)
(Original Better Together 9.8% reduction)

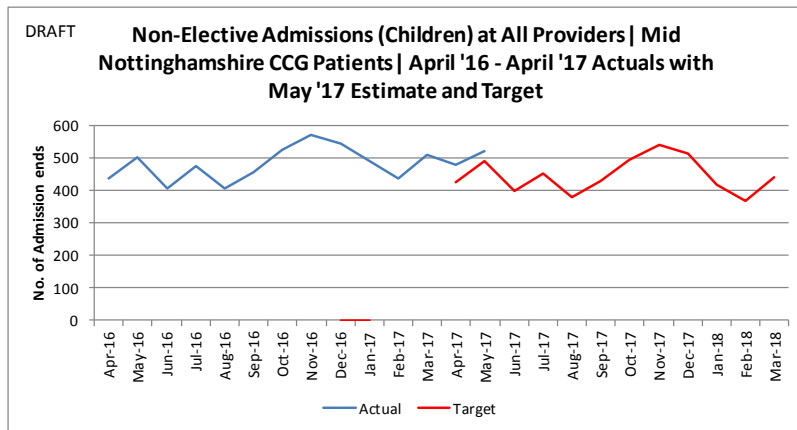


OP 1st	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17	9,255	9,944	10,466	9,749	9,913	10,238	9,873	10,670	8,948	9,737	9,045	10,279
17/18	8,881	9,542										
17/18 Target	9,345	10,061	10,594	9,650	9,748	9,874	9,424	10,238	8,476	9,193	8,507	9,767
YTD Var	v 16/17	v Target	% v Target									
M1-2 (17/18)	-4.0%	-983	-5.1%									

Insight into activity trends:

- Year to date activity is performing 5.1% under target.
- Year to date activity is reduced compared to the same period in 16/17.
- Early sight of SUS data (SFH proxy) suggests lower activity than the May estimate in this table.

Objective 6: Reduction in non elective paediatric admissions to hospital
% reduction to be confirmed
(original Better Together objective 20% reduction)

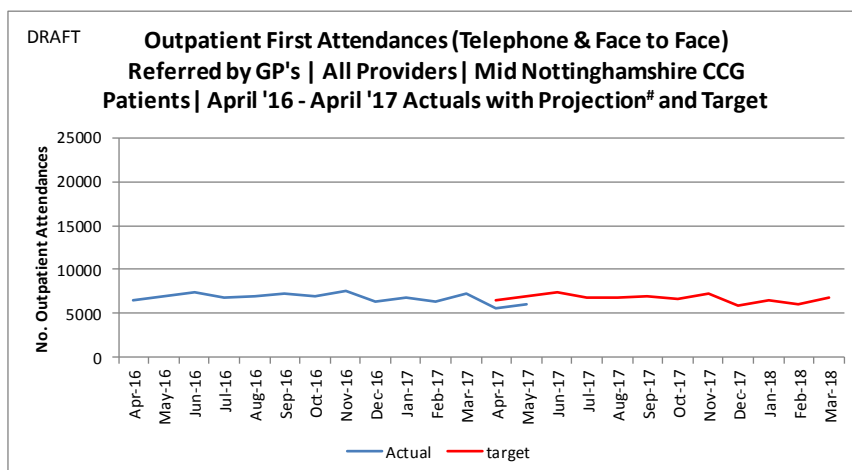


NEL (Child)	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17	435	500	407	474	404	455	525	571	543	489	435	507
17/18	477	522										
17/18 Target	423	489	397	450	378	427	494	539	511	418	366	439
YTD Var	v 16/17	v Target	% v Target									
M1-2 (17/18)	6.8%	87	9.5%									

Insight into activity trends:

- Year to date activity is 9.5% over target.
- Year to date activity is greater than the same period in 16/17.
- Early sight of SUS data (SFH proxy) suggests activity will be close to plan.

Objective 7: 5% reduction in secondary care elective referrals (outpatient first appointments, GP only, excluding 2ww, adjustment made for 17/18 activity to reflect working days)

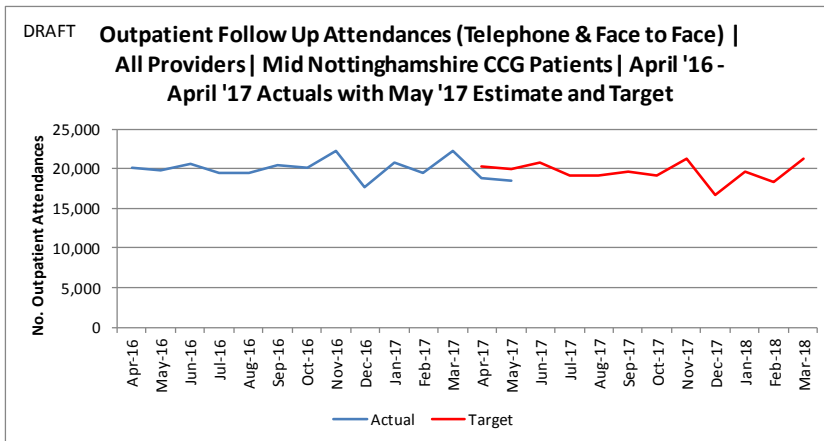


OP1st (GP)	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17	6,505	6,989	7,356	6,852	6,967	7,196	6,939	7,499	6,289	6,844	6,357	7,224
17/18	5,618	6,036										
17/18 Target	6,568	7,071	7,446	6,782	6,851	6,940	6,623	7,195	5,957	6,461	5,979	6,865
YTD Var	v 16/17	v Target	% v Target									
M1-2 (17/18)	-13.6%	-1,985	-14.6%									

Insight into activity trends:

- Year to date activity is performing 14.6% under target.
- Year to date activity is reduced compared to the same period in 16/17.
- Early sight of SUS data (SFH proxy) suggests lower activity than the May estimate in this table.

Objective 8: 6% reduction in follow-up outpatient appointments (adjustment made for 17/18 activity to reflect working days)

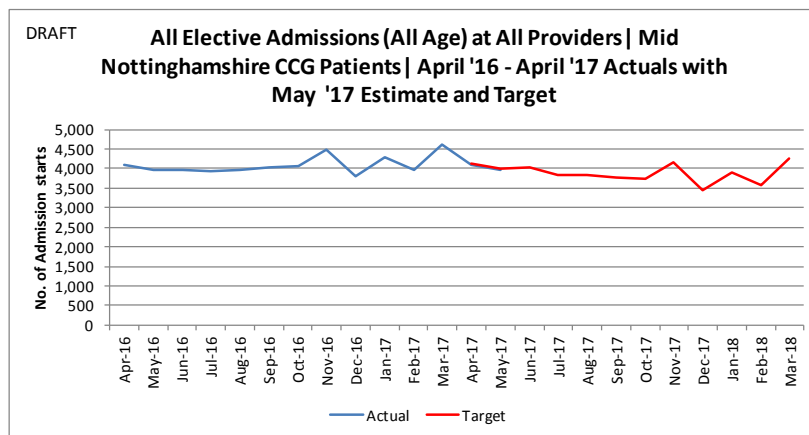


OP FU	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17	20,079	19,778	20,642	19,389	19,513	20,513	20,107	22,209	17,665	20,819	19,441	22,308
17/18	18,782	18,501										
17/18 Target	20,225	19,947	20,828	19,109	19,097	19,696	19,131	21,271	16,634	19,668	18,305	21,243
YTD Var	v 16/17	v Target	% v Target									
M1-2 (17/18)	-6.5%	-2,888	-7.2%									

Insight into activity trends:

- Year to date activity is performing 7.2% under target.
- Year to date activity is reduced compared to the same period in 16/17.
- Early sight of SUS data (SFH proxy) suggests significantly lower activity than the May estimate in this table.

Objective 9: 8% reduction in elective admissions (adjustment made for 17/18 activity to reflect working days)



Elec	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17	4,087	3,957	3,974	3,937	3,969	4,043	4,080	4,481	3,795	4,289	3,959	4,600
17/18	4,092	3,976										
17/18 Target	4,135	4,006	4,023	3,842	3,828	3,764	3,757	4,170	3,461	3,911	3,586	4,251
YTD Var	v 16/17	v Target	% v Target									
M1-2 (17/18)	0.3%	-73	-0.9%									

Insight into activity trends:

- Year to date activity is performing marginally under target (0.9%).
- Year to date activity is marginally reduced compared to the same period in 16/17.
- Early sight of SUS data (SFH proxy) suggests marginally lower activity than the May estimate in this table.

3 Programme reports, exceptions and escalations

3.1 Urgent and Proactive Care

3.1.1 Programme Report

The full programme report and exception report should be viewed as part of this report.

3.1.2 Progress overview

Programme	Milestone Delivery (previous month)	Milestone Delivery (current month)	Financial Impact YTD (previous month)	Financial Impact YTD	Exceptions
Urgent and Proactive Care	Green	Amber		Amber 91% of target	Yes

3.1.3 Open Exceptions

Area	Issue	Actions	Recovery	Confidence last month	Confidence this month
LICT, SICT and Call for Care		Deep dive report commissioned by 22 June	TBC		To be assessed
End of life		Review of contracted activity underway	Review of contracted activity underway		High
New primary care model		Change Control in align reporting of schemes	All key areas progressed		To be confirmed
Local admission avoidance scheme		Deep dive report commissioned by 22 June	TBC		To be assessed
Kirkby (NEMs) service review		All actions progressed	Savings realised from NEMS planned to catch up to 100% of planned levels by end of Q3		High

3.1.4 Escalations

No items to escalate at present.

3.2 Elective Care

3.2.1 Programme Report

The full programme report and exception should be viewed as part of this report.

3.2.2 Progress overview

Programme	Milestone Delivery (previous month)	Milestone Delivery (current month)	Financial Impact YTD (previous month)	Financial Impact YTD	Exceptions
Elective	Amber	Amber		Amber 81% of target	Yes

3.2.3 Open Exceptions

Area	Issue	Actions	Recovery	Confidence last month	Confidence this month
IVF and vasectomies			Resolution expected July		High confidence
PLCV			Resolution expected June		High confidence
Consultant connect			Resolution expected June		Medium confidence
Direct Access Radiology			Resolution expected June		Low confidence. Further mitigation required

3.2.4 Escalations

No items to escalate at present.

3.3 Mental Health

3.3.1 Programme Report

The full programme report and exception report should be viewed as part of this report.

3.3.2 Progress overview

Programme	Milestone Delivery (previous month)	Milestone Delivery (current month)	Financial Impact YTD (previous month)	Financial Impact YTD	Exceptions
Mental Health	Amber	Green		Impact from month 7	No

3.3.3 Exceptions

Area	Issue	Actions	Recovery	Confidence last month	Confidence this month

3.3.4 Escalations

No items to escalate at present.

3.4 Community

3.4.1 Programme Report

The full programme report and exception report should be viewed as part of this report.

3.4.2 Progress overview

Programme	Milestone Delivery (previous month)	Milestone Delivery (current month)	Financial Impact YTD (previous month)	Financial Impact YTD	Exceptions
Community	Amber	Amber		Red 6% of target	Yes

3.4.3 Open Exceptions

Area	Issue	Actions	Recovery	Confidence last month	Confidence this month
NUH local prices		Savings from renegotiated local prices in NUH contract start to be realised from July (when contractual notice period expires).	July		High confidence
Mansfield Community Hospital scheme admin / management fees		Liaising with NHSPS over reduced charges- expect to achieve in full. Awaiting confirmation.	Resolution expected August		High confidence

3.4.4 Escalations

No items to escalate at present.

3.5 Women's and Children's

3.5.1 Programme Report

The full programme report and exception report should be viewed as part of this report.

3.5.2 Progress overview

Programme	Milestone Delivery (previous month)	Milestone Delivery (current month)	Financial Impact YTD (previous month)	Financial Impact YTD	Exceptions
Women and Children's	Green	Amber		Impact from month 7	No

3.5.3 Open Exceptions

Area	Issue	Actions	Recovery	Confidence last month	Confidence this month

3.5.4 Escalations

No items to escalate at present.

4. Appendices

Appendix 1: Reporting Methodology

RAG ratings

Programme milestone delivery RAGs (Red/Amber/Green) are based on an aggregation of individual project milestone RAGs.

Financial impact RAGs are based on NHS England calculation methodology.

- Green ratings indicate achievement of > 95% of target
- Amber ratings indicate achievement of between 75% and 95% of target
- Red ratings indicate achievement of less than 75% of target
- Grey ratings indicate that delivery is not yet due

Financial RAG ratings are based on year to date delivery.

Finance

A robust methodology has been developed to apportion savings to initiatives whilst avoiding double counting. This forms the basis for monthly financial reporting at project level. The programme level financial reports are based on an aggregation of project level financial reports. A financial forecast based on year to date delivery is being developed to provide a forward view of financial delivery and risk.

Activity

The activity targets associated with system objectives have been calculated using the following methodology:

- 2016/17 activity is used as the baseline
- Growth has been added to simulate a 'do nothing' scenario (please see table in the following section)
- The Alliance objective to reduce activity is subtracted from the 'do nothing' scenario
- This reduction is phased through 2017/18 in line with the milestone and financial savings plans

Actual activity is reported as follows:

- Actuals are sourced from the Secondary User Service (SUS) system
- The month 2 report is based on month 1 actual activity plus a projection for month 2 (the month 3 report will be based on month 1 and 2 actuals plus a project for month 3 based on month 1 and 2)
- The projections will be triangulated against early SFH SUS data to confirm trends

This methodology provides better alignment between activity reporting and the Alliance objectives than would be available from the contract or the activity plans that have been agreed with regulators which do not reflect the full scale of Alliance activity reduction objectives.

Appendix 2: Data Definitions

Target Phasing	Based on the original financial phasing planned at the beginning of the year by CCG.																								
Growth Assumptions	<p>Used in the do nothing scenario</p> <p>Growth % Assumptions Based on 3 year average growth</p> <table border="1"> <thead> <tr> <th>POD</th> <th>M&A CCG</th> <th>N&S CCG</th> </tr> </thead> <tbody> <tr> <td>A&E</td> <td>5.6%</td> <td>5.2%</td> </tr> <tr> <td>DC</td> <td>2.9%</td> <td>5.3%</td> </tr> <tr> <td>ELIP</td> <td>0.0%</td> <td>0.4%</td> </tr> <tr> <td>EM</td> <td>3.7%</td> <td>5.2%</td> </tr> <tr> <td>EMST</td> <td>3.7%</td> <td>5.2%</td> </tr> <tr> <td>OPFA</td> <td>0.8%</td> <td>4.4%</td> </tr> <tr> <td>OPFUP</td> <td>0.8%</td> <td>4.0%</td> </tr> </tbody> </table>	POD	M&A CCG	N&S CCG	A&E	5.6%	5.2%	DC	2.9%	5.3%	ELIP	0.0%	0.4%	EM	3.7%	5.2%	EMST	3.7%	5.2%	OPFA	0.8%	4.4%	OPFUP	0.8%	4.0%
POD	M&A CCG	N&S CCG																							
A&E	5.6%	5.2%																							
DC	2.9%	5.3%																							
ELIP	0.0%	0.4%																							
EM	3.7%	5.2%																							
EMST	3.7%	5.2%																							
OPFA	0.8%	4.4%																							
OPFUP	0.8%	4.0%																							
Estimate of May Activity	May 2017 is based on the % change April to May 2016 applied to April 2017. Additional adjustments made to elective activity (Inpatient, Day case, Outpatients) to reflect estimated activity for the number of working days due to the low activity of April 2017 (which included Easter).																								
Estimated May SUS Activity	A calculation, using the average of April SUS and inflated May SFH data multiplied by a monthly activity profile (determined by the last 3 full financial years) has been calculated as a proxy for May All Provider.																								
Outpatient Activity	2 week wait related activity (OP 1st/FU/GP referred) is to be excluded from these figures in next months report, but in the current report they are both in the baseline and reported 2017/18.																								
Specific to Activity Measures																									
Non Elective/ Elective	<p>Treatment Function Code Equals (100-192, 211-222, 241-242, 251-264, 300-330, 340-343, 360-361, 370-371, 400-401, 420-422, 810-812, 280, 350, 352, 410, 430, 450, 460, 502, 503, 663, 800, 822, 834)</p> <p>HRG Code Not equal to (SB97Z, SC97Z)</p> <p>Non Elective identified by Admission Method not equal to 1 Elective identified by Admission Method equal to 1 Day Case identified by Patient Class equal to 2 Regular Attender identified by Patient Class equal to 3</p>																								
Outpatient	<p>Treatment Function Code Equals (100-192, 211-222, 241-242, 251-264, 300-330, 340-343, 360-361, 370-371, 400-401, 420-422, 810-812, 280, 350, 352, 410, 430, 450, 460, 502, 503, 663, 800, 822, 834)</p> <p>Main Speciality Code Not equal to (560, 950, 960)</p> <p>Attended in code equals (1,5,6) GP Referral identified by Source of Referral (3)</p> <p>2 week waits will be excluded from future reports and will be identified by Priority Type (3)</p>																								
ED	Activity for 24 hour ED's, Mono speciality ED's, Minor Injury Units and Walk In Centres are currently in the baseline. (Type 1-4). Type 4 (Walk in Centres) will be excluded from																								

<p>the baseline and reported activity in next months report.</p> <p>Services such as Primary Care 24 have not been included in the baseline and are excluded from reported activity.</p> <p>Below is a definition of the service types.</p>	
Type 1	ED with 24hr Consultant led service with full resuscitation facilities and accomodation for A&E patients.
Type 2	Mono Speciality Consultant led ED service (e.g. Dental, Ophthalmology) with accomodation for receiving patients.
Type 3	MIU with accomodation for A&E patients. May be doctor or nurse led. Services that operate on a mainly or completely appointment basis are excluded. Walk in Centres are also not included.
Type 4	Walk In Centres