



Vale of York
Clinical Commissioning Group

Vale Of York CCG

Core Performance Dashboard

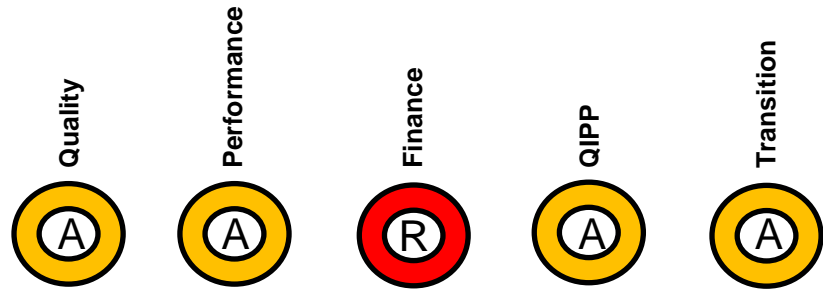
October 2012

CONTENTS

	Page
Summary assessment	3
Performance and Quality Indicators	
Domain 1: Preventing people from dying prematurely	4
Domain 2: Enhancing quality of life for people with long term conditions	4
Domain 3: Helping people recover from episodes of ill health or injury	5
Domain 4: Ensuring that people have a positive experience of care	5-6
Domain 5: Providing a safe environment and protecting from harm	7
Activity Trends	8
Financial Performance	
Key Financial Metrics	9
Financial Overview NYY Level	10
Financial Overview CCG Level	11
QIPP	12

SUMMARY OF PERFORMANCE

Current assessment



VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date	Q/P	Score Matrix
			Period Covered	Planned Performance	Actual Performance	RAG Rating			
Domain 1: Preventing people from dying prematurely									
Ambulance response times: percentage of Red 1 & Red 2 999 calls responded to within 8 minutes.	Minimum of 75% during 2012-13	Patch	Jul-12	75%	80.5%	G	78.4%	P	3
Percentage of patients urgently referred by a primary care professional for suspected cancer that are seen by a specialist within 14 days.	Minimum of 90% during 2012-13	Host ProvComm	Aug-12	90%	93.6%	G	94%	P	3
Percentage 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 14 days.	Minimum of 93% during 2012-13	Host ProvComm	Aug-12	93%	95.6%	G	96.5%		
Percentage of patients that wait no more than 31 days from the date of the decision to undergo treatment to receive their first stage of treatment for cancer.	Minimum of 96% during 2012-13	Host ProvComm	Aug-12	96%	98.9%	G	99.5%	P	3
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 2012-13	Host ProvComm	Aug-12	98%	97.3%	A	98.8%	P	3
One patient went over the 31 day threshold, the delay was due to clinical reasons since the patient was too ill for treatment.									
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 surgery.	Minimum of 94% during 2012-13	Host ProvComm	Aug-12	94%	100%	G	95.1%		
Percentage of patients urgently referred by a primary care professional that wait no more than 62 days from the date of referral to receive their first stage of treatment for cancer.	Minimum of 85% during 2012-13	Host ProvComm	Aug-12	85%	90.7%	G	85.1%	P	3
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 2012-13	Host ProvComm	Aug-12	90%	100%	G	90.8%	P	3
Percentage of patients that have their priority upgraded by a consultant that suspects cancer that wait no more than 62 days to receive their first stage of treatment.	Minimum of 90% during 2012-13	Host ProvComm	Aug-12	90%	100%	G	100%		
Domain 2: Enhancing Quality of Life for People with Long Term Conditions									
Number of episodes of crisis resolution/home treatment care provided	Minimum of 1776 in 2012-13	PCT	Q1 12/13	444	531	G	531	Q	3
Number of newly diagnosed cases of first episode psychosis for whom early intervention is provided.	Minimum of 144 in 2012-13	PCT	Q1 12/13	36	37	G	37	Q	3
Percentage of patients on Care Programme Approach (CPA) discharged from inpatient care who are followed up within 7 days.	95%	Patch	Q1 12/13	95%	94.3%	A	94.3%	Q	1
Percentage of people who have depression and/or anxiety disorders who receive psychological therapies (IAPT).	6.23% Average 2012-13	PCT	Q4 11/12	0.40%	0.5%	G	2.4%	Q	3
Proportion of people with a LTC who are "supported by people providing health and social care services to manage their condition".	Top Quartile	CCG	Q4 11/12	Top Quartile	Top Quartile	G	-	Q	3

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date	Q/P	Score Matrix
			Period Covered	Planned Performance	Actual Performance	RAG Rating			
Domain 3: Helping people recover from episodes of ill health or injury									
Percentage of stroke patients that spend at least 90% of their time in hospital on a dedicated stroke ward.	Minimum of 80%	Host ProvComm	Q1 12/13	80%	86%	G	86%	P	3
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	Q1 12/13	60%	74.2%	G	74.2%	P	3

Domain 4: Ensuring that people have a positive experience of care									
95th percentile for non-admitted patients that were on a RTT pathway	Maximum 18.3 weeks	Host ProvComm	Aug-12	18.3	16.4	G	-	P	3
95th percentile for patients still on a 18 week pathway	Maximum 28 weeks	Host ProvComm	Aug-12	28	21.5	G	-		
95th percentile for admitted patients that were on a RTT pathway	Maximum 23 weeks	Host ProvComm	Aug-12	23	23.7	A	-		
Percentage of patients admitted for hospital treatment within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 90% during 2012-13	Host ProvComm	Aug-12	90%	92.2%	G	92.3%	P	3
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 2012-13	Host ProvComm	Aug-12	95%	97%	G	97.4%	P	3
Percentage of patients still waiting for treatment within 18 weeks of referral by their GP or other healthcare professional.	Minimum of 92% during 2012-13	Host ProvComm	Aug-12	92%	92.4%	G	92.7%	P	0
Number of patients still waiting for treatment where they have waited 52 weeks or more after referral by their GP or other healthcare professional.	0	Host ProvComm	Aug-12	0	35	R	-		

Mike Proctor, Deputy Chief Executive of York Hospital, provided assurance at the end of September 2012 that of the 32 patients previously identified had dates booked for surgery and will be treated by the end of November 2012.

The Directorate Manager for General Surgery at York Hospital attended the October Quality and Performance Group and gave an update of the current situation. Although the Trust arranged extra capacity for general surgery at Bridlington, some patients choose to wait for an operation in York. October and November slots are now fully booked and the Trust are currently offering dates for December 2012. Some patients are asking for their surgery to be delayed until January and this is likely to impact on the waiting times going forward. However, the Trust are pro-actively managing both the 10-18 week patients and the 40-50 week waiters to try and prevent further breaches.

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date	Q/P	Score Matrix
			Period Covered	Planned Performance	Actual Performance	RAG Rating			
Domain 4: Ensuring that people have a positive experience of care									
Percentage of patients that waited over 6 weeks for a diagnostic test.	<1% of patients	Host ProvComm	Aug-12	<1%	0.41%	G	0.22%	P	3
Percentage of patients that wait no longer than 4 hours in A&E from arrival to either discharge or admission.	Average of 95% over 2011-12	Host ProvComm	Sep-12	95%	94.6%	A	96.2%	P	1
<p>2 patients waited in the Emergency Department for longer than 12 hours (overnight) for a hospital bed on 27/28 September 2012. Both patients were assessed and diagnosed within an appropriate period and received regular nursing and medical care throughout their stay. Neither patient was frail or elderly, and both patients received regular food and drink during their stay. No harm came to either patient as a result of their delay to a bed and both were discharged within 48 hours of their initial presentation to the hospital.</p> <p>These incidents have been declared as Serious Incidents and the Directorate Manager of the Emergency Department is leading the root cause analysis.</p> <p>The initial investigation into these 2 incidents found that, whilst the Department was busy on 27 September 2012 and there were waits for beds, patients were not transferred in chronological order, resulting in these extended delays. Staff failed to follow the agreed escalation plan that prevents 12 hour bed waits. Had they followed the escalation plan, these waits would have been avoided.</p> <p>As a result of this incident, the escalation plan has been updated and re-circulated to the appropriate staff.</p>									
Mixed Sex Accommodation Breaches per 1000 FCEs (No of breaches)	<1 per 1000 FCEs	Host ProvComm	Jul-12	<1	0.00 (0)	G	-	P	3
Patient Experience survey (IP 2011 Q41) Patients involved satisfactorily in decisions about care and treatment	Same or Best Perf Category	Host provider	2011	Same or Best Perf Category	Same	G	-	Q	3
Patient Experience survey (IP 2011 Q73) Overall level of respect and dignity	Same or Best Perf Category	Host provider	2011	Same or Best Perf Category	Same	G	-	Q	3
Staff survey (2011 KF1) Percentage of staff feeling satisfied with the quality of work and patient care they are able to deliver	Average or better	Host provider	2011	Average or better	Average	G	-	Q	3
Staff survey (2011 KF34) Staff recommendation of the trust as a place to work or receive treatment.	Average or better	Host provider	2011	Average or better	Above Average	G	-	Q	3
Proportion of GP referrals to first outpatient appointments booked using Choose and Book	70%	CCG	Jul-12	70%	25.2%	R	-	Q	0

VALE OF YORK CCG PERFORMANCE AND QUALITY INDICATORS

Indicator	Objective	Coverage	Latest Performance				Year to Date	Q/P	Score Matrix
			Period Covered	Planned Performance	Actual Performance	RAG Rating			
Domain 5: Providing a safe environment and protecting from harm									
Number of patients the PCT is responsible for with Methicillin Resistant Staphylococcus Aureus (MRSA) bacteraemia infections.	No more than 2 in 2012-13	Host provider	Sep-12	No more than 1	0	G	0	P	3
Number of patients the PCT is responsible for with Methicillin Sensitive Staphylococcus Aureus (MSSA) bacteraemia infections.	No more than 29 in 2012-13	Host provider	Sep-12	No more than 13	2	G	13	Q	3
Number of patients the PCT is responsible for with Clostridium difficile infections.	No more than 27 in 2012-13	Host provider	Sep-12	No more than 2	4	R	18	P	0
Dr Shaun O'Connell and the interim Performance Improvement Manager met with the Deputy Chief Nurse and Deputy Director Infection Prevention & Control from York Hospital to discuss the C.Diff RCA reports on 2 October 2012. The RCA reports identified that C.Diff is more prevalent on wards with very sick acute patients e.g. elderly. Members of the Infection Prevention & Control Team are briefing the Directorate Clinical Governance Meetings on the findings of the RCA reports and real-life case studies. Dr O'Connell is going to speak to the Medical Director re lack of take up by medical staff on Infection Control training courses and recurring antibiotic prescribing. We will continue to monitor the number of future cases and RCA reports to identify ongoing trends.									
Percentage of adult inpatients who have a Venous Thrombosis Embolism (VTE) risk assessment on admission.	90%	Host provider	Jun-12	90%	93.4%	G	93.1%	Q	3
Summary Hospital Mortality Index	As expected or better	Host provider	Q3 11/12	As expected or better	As expected	G	As expected	Q	3
Hospital Standardised Mortality Ratio	As expected or better	Host provider	Q1 12/13	As expected or better	As expected	G	As expected		3
Total Never Events reported	0	Host provider	May-12	0	0	G	0	Q	3

RAG 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".

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.

The scores are

Green = 90% or higher

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

Red = Less than 75%

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.

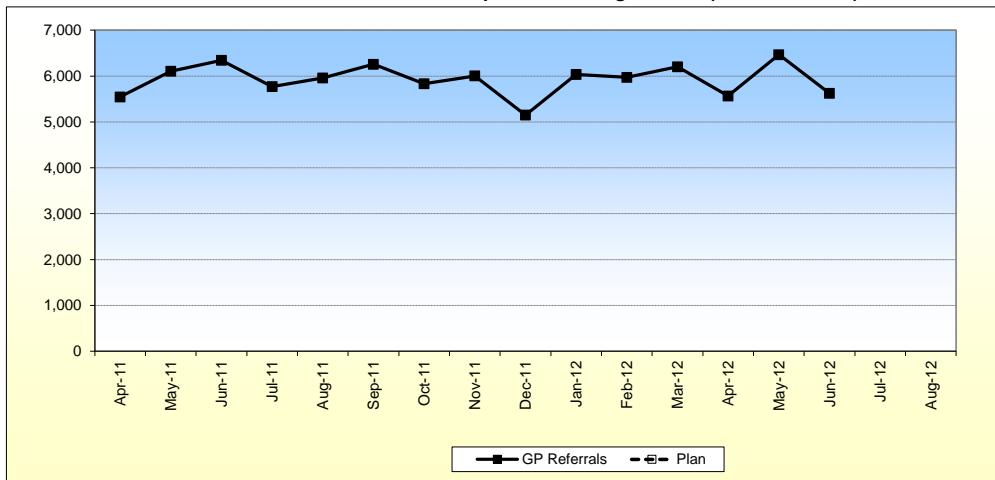
Patch - this is an area that approximates to the CCG geographical coverage, normally based on the former PCG/PCT "patches" e.g. Selby & York.

Host - 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.

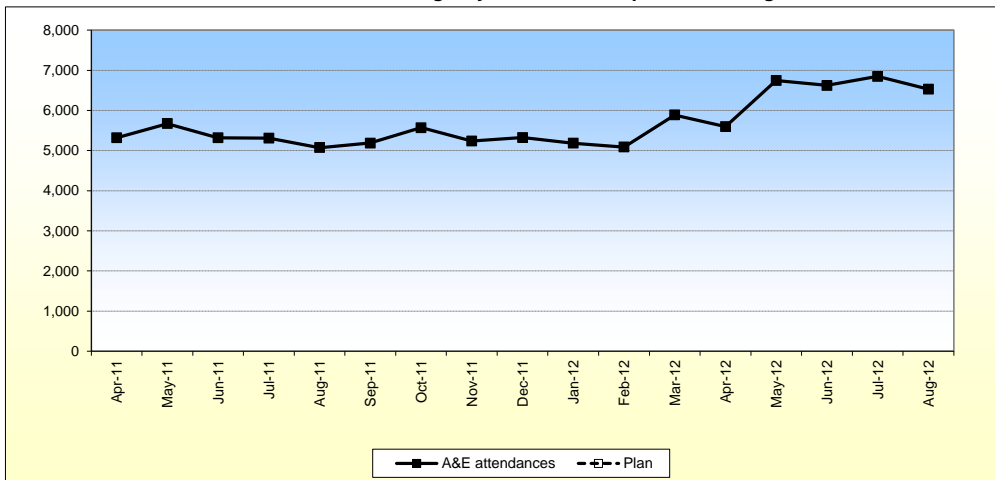
Host ProvComm - this data relates to the Host provider as described above, but is limited to patients that are the responsibility of NHS North Yorkshire and York (not exclusively the CCG).

Secondary Care Activity Trends and Trajectories* : Vale Of York CCG

Number of GP Referrals Received: April 2011 to August 2012 (Provider based)



Number of Accident and Emergency Attendances: April 2011 to August 2012



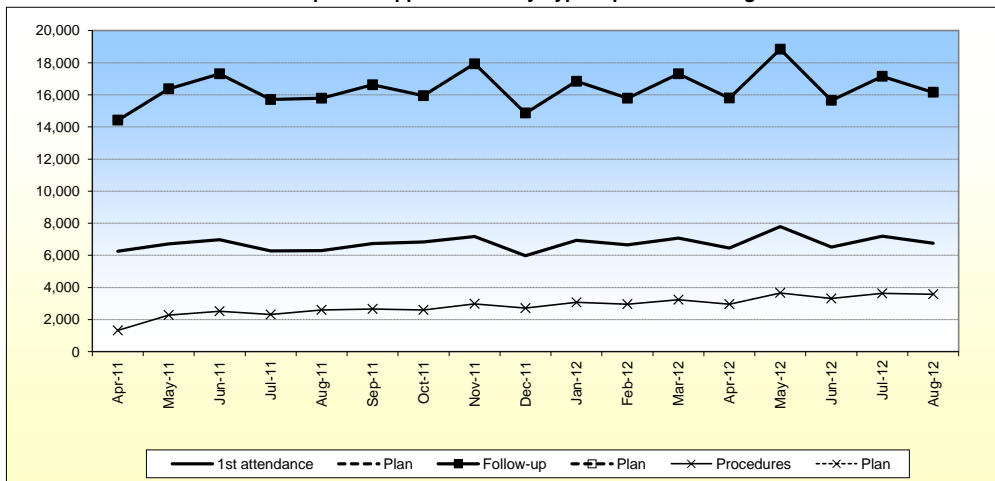
GP Referrals Received (year to date)

2012-13	17,654
2011-12	17,991
% Var on 2011-12	-1.9%

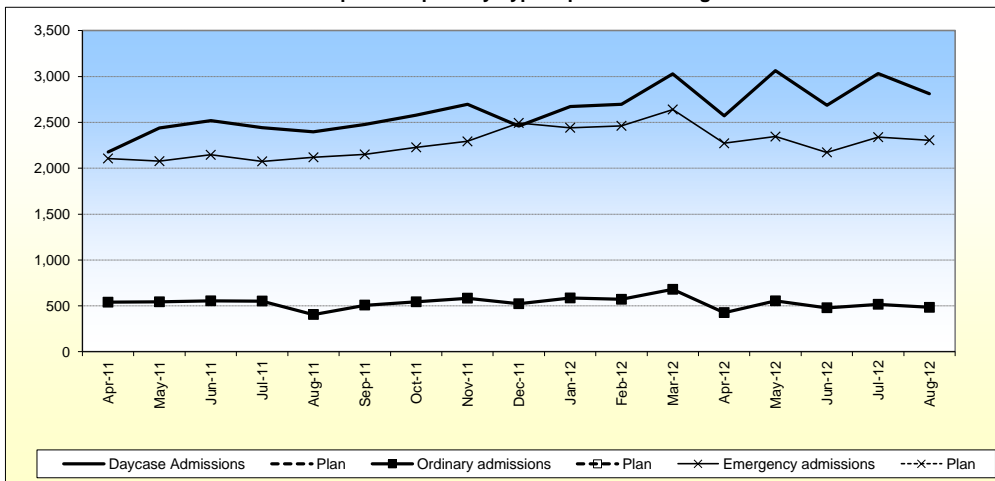
A&E attendances (year to date)

2012-13	32,345
2011-12	26,697
% Var on 2011-12	21.2%

Number of Outpatient Appointments by Type: April 2011 to August 2012



Number of Inpatient Spells by Type: April 2011 to August 2012



Outpatients	1st attendances	Follow-ups	Procedures	Fup:1st Ratio
2012-13	34,718	83,605	17,150	2.4
2011-12	32,521	79,604	11,034	2.4
% Var on 2011-12	6.8%	5.0%	55.4%	-1.6%

Inpatients	Ord Elective spells	Daycase spells	Emg spells
2012-13	2,459	14,167	11,434
2011-12	2,595	11,974	10,521
% Var on 2011-12	-5.2%	18.3%	8.7%

Overall position and financial duties

Executive Summary:

The key performance measures for CCG and the PCT are included in the table below and include.

- Expenditure contained with PCT revenue resource limit this is presented at CCG level
- Capital expenditure contained within capital resource limit
- A balanced cash position
- Full compliance with Better Payment Practice Code (BPPC)

Year End Forecast (£000)

Duty	Target	YE Outturn	Var
CCG Budget	343,481.3	351,948.4	£8,467.1
To operate within the Capital Resource Limit (memo note of NYY position)	tba	tba	tba
To operate within the overall cash limit (memo note of NYY position)	tba	tba	tba
BPPC - To pay at least 95% of non NHS creditors within 30 days (NYY Position)	tba	tba	tba

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Year end forecast and key movements since last month:

Based on 5 months actual and 1 month estimated data a significant year end overtrade variance is forecast against the York Hospitals acute contract. The pressure areas are most notable in non elective care, first outpatients attendances and high cost drugs (non SUS).

Based on M04 data there is significant pressure against the Yorkshire Ambulance Service contract, work is on-going to assess the number of "GP urgent". Private Provider contracts are also showing significant signs of pressure with overspends notably forecast against Nuffield. These overtrades are activity driven. There is also a forecast overspend against partnerships, the expenditure relates to Mental Health out of area placement.

There has been a significant improvement in the prescribing position as a result of a nationally negotiated reduction in tariff for category M drugs

Year to date position (£000) as at 30 September 2012

Directorate	Plan	Actual	Variance	
	£m	£m	£m	%
CCG Budget	170,246.7	174,243.9	3,997.2	3.9%
Commissioned Services NHS	134,024.8	135,363.4	1,338.6	-2.8%
Commissioned Services Non NHS	16,979.7	16,824.7	-155.0	1.2%
Prescribing	21,863.2	22,055.8	192.6	-2.1%
Corporate Services	tba	tba	tba	tba
share of Planned deficit	-2,621.0	0.0	2,621.0	100.0%
Total (Surplus)/Deficit	2,621.0	3,997.2	1,376.2	150.8%

Notes

Key Risks to the Financial Position:

The variances against the acute contracts assume that QIPP will be delivered from M05 onwards, if QIPP does not achieve the planned level of savings, the reported position will significantly worsen. The delivery of the QIPP programme is essential to the delivery of an acceptable and sustainable financial outturn.

Increased rates of referral and demand in the acute sector pose a significant risk to the overall CCG position

Key actions to be taken:

Monitoring and corrective action required to address demand presenting to York Hospitals Trust and Nuffield York.

Continual review of prescribing expenditure

Continual review of QIPP delivery

In addition the CCG has identified a number of turnaround schemes. It is imperative that these schemes are implemented in the timescales identified.

Year end forecast

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Year to date position

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Overall Financial Position (NYYCCG) - Month 6

Area	Cumulative to Date as at 30 September 2012			Forecast 2012/13 Outturn		
	Budget	Actual	Variance	Budget	Actual	Variance
	£000	£000	£000	£000	£000	£000
Commissioned Services						
York Hospitals Foundation Trust (Acute services)	82,958.3	86,848.5	3,890.2	171,869.8	175,098.7	3,228.9
York Hospitals Foundation Trust (Community Services)	15,691.3	15,833.1	141.8	31,382.7	31,666.1	283.4
Harrogate District Foundation Trust (Acute services)	40,564.7	41,107.8	543.1	82,304.7	83,972.3	1,667.6
Harrogate District Foundation Trust (Community services)	14,439.6	14,459.1	19.5	24,601.2	24,640.2	39.0
Scarborough & North East Yorkshire NHS Trust	33,243.6	34,235.0	991.4	67,032.2	67,976.0	943.8
Leeds and York Partnership Trust	15,754.0	15,632.5	-121.5	31,508.1	31,273.3	-234.8
Yorkshire Ambulance Service	15,940.9	16,465.9	525.0	31,881.8	33,196.9	1,315.1
Leeds Teaching Hospital Trust	12,700.3	12,188.0	-512.3	25,400.6	26,349.1	948.5
Ramsey Hospital - clifton park york	4,549.7	4,429.3	-120.4	9,099.3	8,936.7	-162.6
Hull & East Yorkshire NHS Trust	3,512.0	3,174.6	-337.4	7,023.9	6,349.2	-674.7
Nuffield Hospital - York	1,030.6	1,610.5	579.9	2,061.2	3,477.6	1,416.4
Mid Yorkshire	1,083.7	1,081.3	-2.4	2,167.4	2,162.6	-4.8
Tees Esk & Wear Valley MH	19,172.1	19,251.6	79.5	38,344.2	38,563.0	218.8
South Tees Foundation Trust	37,093.9	37,918.3	824.4	75,409.5	76,429.4	1,019.9
Total Major NHS Contracts above £1m	297,734.7	304,235.5	6,500.8	600,086.6	610,091.1	10,004.5
Other NHS Contracts below £1m.	33,898.8	35,051.6	1,152.8	68,419.8	70,269.5	1,849.7
NHS Non Contract Activity	6,024.9	6,176.1	151.2	12,049.9	12,298.6	248.7
Private Providers contracts below £1m	2,235.8	2,206.2	-29.6	4,471.6	4,455.5	-16.1
Other NHS Commissioning	2,659.7	1,641.1	-1,018.6	5,706.6	3,146.8	-2,559.8
Total NHS contracts	342,553.9	349,310.5	6,756.6	690,734.5	700,261.5	9,527.0
Partnerships	3,229.5	3,744.9	515.4	6,459.6	7,692.0	1,232.4
Hospice payments	1,643.0	1,614.2	-28.8	3,286.1	3,228.4	-57.7
Pooled Budgets	6,439.5	6,336.9	-102.6	12,879.1	12,659.2	-219.9
Continuing Care	32,119.0	31,312.7	-806.3	64,238.1	62,586.2	-1,651.9
Funded Nursing Care	6,531.4	6,426.7	-104.7	13,062.8	12,853.5	-209.3
Total Non NHS Contracts	49,962.4	49,435.4	-527.0	99,925.7	99,019.3	-906.4
Total Commissioned Services	392,516.3	398,745.9	6,229.6	790,660.2	799,280.8	8,620.6
Primary Care						
Prescribing	59,082.7	59,403.7	321.0	118,473.5	118,827.3	353.8
Total Primary Care	59,082.7	59,403.7	321.0	118,473.5	118,827.3	353.8
Corporate Services	tba	tba	tba	tba	tba	tba
Share of overall PCT deficit	-6,829.6	0.0	6,829.6	-13,659.2	0.0	13,659.2
Total Corporate Services	-6,829.6	0.0	6,829.6	-13,659.2	0.0	13,659.2
Total Commissioned & Corporate Services	444,769.4	458,149.6	13,380.2	895,474.5	918,108.1	22,633.6

Overall Financial Position (VOYCCG) - Month 6

Area	Cumulative to Date as at 30 September 2012			Forecast 2012/13 Outturn		
	Budget	Actual	Variance	Budget	Actual	Variance
	£000	£000	£000	£000	£000	£000
Commissioned Services						
York Hospitals Foundation Trust (Acute services)	75,634	77,207	1,573.1	156,694.8	159,877.8	3,183.0
York Hospitals Foundation Trust (Community Services)	8,061	8,120	58.6	16,122.7	16,240.1	117.4
Harrogate District Foundation Trust (Acute services)	652	656	4.8	1,321.9	1,340.6	18.7
Harrogate District Foundation Trust (Community services)	4,739	4,747	7.8	8,073.9	8,089.0	15.1
Scarborough & North East Yorkshire NHS Trust	2,121	2,154	32.2	4,277.6	4,342.5	64.9
Leeds and York Partnership Trust	15,191	15,149	-41.9	30,381.1	30,305.5	-75.6
Yorkshire Ambulance Service	6,171	6,374	203.2	12,342.2	12,851.3	509.1
Leeds Teaching Hospital Trust	5,990	5,990	0.7	11,979.3	11,980.7	1.4
Ramsey Hospital - clifton park york	3,920	3,731	-188.9	7,840.3	7,528.4	-311.9
Hull & East Yorkshire NHS Trust	1,399	1,347	-52.5	2,798.8	2,693.8	-105.0
Nuffield Hospital - York	940	1,474	534.5	1,879.2	3,183.1	1,303.9
Mid Yorkshire	961	956	-4.4	1,921.0	1,912.3	-8.7
Tees Esk & Wear Valley MH	659	692	32.4	1,318.2	1,385.2	67.0
South Tees Foundation Trust	650	607	-43.6	1,321.9	1,340.7	18.8
Total Major NHS Contracts above £1m	127,087.3	129,203.3	2,116.0	258,272.9	1,296.3	4,798.2
Other NHS Contracts below £1m.	3,384	2,933	-451.7	6,777.4	1,251.8	-903.3
NHS Non Contract Activity	2,163	2,155	-8.2	4,326.8	1,207.4	-16.4
Private Providers contracts below £1m	516	536	20.2	1,032.0	1,162.9	57.7
Other NHS Commissioning	874	536	-337.7	1,897.7	1,118.5	-774.0
Total NHS contracts	134,024.8	135,363.4	1,338.6	272,306.8	275,469.0	3,162.2
Partnerships	1,303	1,500	197.7	2,605.7	3,077.4	471.7
Hospice payments	603	592	-10.6	1,205.7	1,184.5	-21.2
Pooled Budgets	2,185	2,151	-34.8	4,331.8	4,247.8	-84.0
Continuing Care	10,694	10,422	-272.1	20,042.9	19,531.0	-511.9
Funded Nursing Care	2,195	2,160	-35.2	4,390.2	4,319.8	-70.4
Total Non NHS Contracts	16,979.7	16,824.7	-155.0	32,576.3	32,360.5	-215.8
Total Commissioned Services	151,004.5	152,188.1	1,183.6	304,883.1	307,829.5	2,946.4
Primary Care						
Prescribing	21,863.2	22,055.8	192.6	43,840.3	44,118.9	278.6
Total Primary Care	21,863.2	22,055.8	192.6	43,840.3	44,118.9	278.6
Corporate Services						
Corporate Services	tba	tba	tba	tba	tba	tba
Share of overall PCT deficit	-2,621.0		2,621.0	-5,242.1	0.0	5,242.1
Total Corporate Services	-2,621.0	0.0	2,621.0	-5,242.1	0.0	5,242.1
Total Commissioned & Corporate Services	170,246.7	174,243.9	3,997.2	343,481.3	351,948.4	8,467.1

Month	5	Aug-12
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VALE OF YORK

Ref	Scheme	Monthly				Year to date				Forecast Outturn (£000)	Annual Target (£000)	Milestone performance	Engagement	Overall Risk		Comments
		Planned savings (£000)	Actual Savings (£000)	Variance (£000)	Variance %	Planned savings (£000)	Actual Savings (£000)	Variance (£000)	Variance %					RAG	change	
VoY01	Elective Care Pathways	£9	£9	£0	5%	£32	£24	£-8	-25%	£205	£205	Fair	Fair	Fair	▼	PMB scheme running and delivering as change in pathway and tariffs deliver savings as per plan. Palpitations implementation has been slightly delayed whilst we complete the referral templates for primary care.
VoY02	Long Term Conditions	£65	£0	£-65	-100%	£129	£0	£-129	-100%	£1,222	£1,162	Fair	Fair	Fair	▼	Initial neighbourhood care team now operational covering 3 practices within York; Strensall, Haxby and Priory. Training and coach ongoing. Intermediate care team in place with 38 virtual beds for step down opportunities. Needs further analysis to look at levels of growth which are offsetting QIPP delivery.
VoY04	Urgent Care	£8	£9	£1	12%	£33	£49	£16	48%	£100	£100	Good	Good	Good	▲	The payment mechanisms for the UCC have now been agreed, and the current savings are slightly higher than assumed in QIPP.
VoY05	MSK expansion	£152	£60	£-93	-61%	£672	£265	£-406	-60%	£1,097	£1,739	Fair	Fair	Fair	●	Whilst the original procurement for an Orthopaedic MSK service is now fully operational there are issues around the expansion and whether the MSK service is the most appropriate route. The pathways in these specialities will still be reviewed however. We are now also going to include other providers outside of NY into the assessment as there is a reduction in the number of referrals to others e.g. NLAG. The calculation looks at Physio and includes the cost of the MSK service.
VoY06	Contracting	£178	£130	£-48	-27%	£890	£541	£-348	-39%	£1,299	£2,135	Fair	Fair	Fair	●	Adjustment made for new to follow up ratios and consultant to consultant as per the contract. The scheme will continue to under deliver against the ARMD tariff changes as agreement made through SME not in line with QIPP assumptions.
VoY07	Lucentis	£0	£0	£0	-	£0	£0	£0	-	£1,489	£1,489	Fair	Fair	Poor	●	York FT have negotiated a reduced price for Lucentis over and above the 15% reduction agreed nationally. Discussions are ongoing centrally around the move to Avastin.
VoY08	Medicine Management	£41	£41	£0	0%	£203	£203	£1	0%	£486	£486	Good	Good	Good	●	Need update from Medicines Management Team.
TOTAL		£452	£248	£-204	-45%	£1,958	£1,083	£-875	-45%	£5,898	£7,316	Fair	Fair	Poor	●	