

NHS Vale of York Clinical Commissioning Group Financial Performance Report

Report produced: October 2016

Financial Period: April to September 2016

Summary of Key Financial Measures

Indicator	Year to Date				Forecast Outturn			
	Target £000	Actual £000	Variance £000	RAG rating	Target £000	Actual £000	Variance £000	RAG rating
Achieve planned financial position	(6,673)	(14,958)	(8,285)	R ↓	(13,346)	(17,337)	(3,991)	R →
Programme expenditure does not exceed programme allocation	212,832	228,161	(15,329)	R ↓	429,557	447,740	(18,183)	R ↑
Running costs expenditure does not exceed running costs allocation	3,763	3,391	371	G ↓	7,525	6,679	846	G ↓
Risk adjusted deficit					(20,428)	(24,110)	(3,682)	R ↓
QIPP delivery (see section 8)	2,895	596	(2,299)	R ↓	12,200	4,016	(8,184)	R ↓
Better Payment Practice Code (Value)	95.00%	99.90%	4.90%	G	95.00%	>95%	0.00%	G
Better Payment Practice Code (Number)	95.00%	98.35%	3.35%	G	95.00%	>95%	0.00%	G
Cash balance at month end is within 1.5% of monthly drawdown	558	227	332	G				
CCG cash drawdown does not exceed maximum cash drawdown					449,700	449,700	0	G

The full finance dashboard is presented in Appendix 1

Key Messages

- **The CCG is operating under legal Directions issued by the NHS Commissioning Board (NHS England) and were effective 1st September. The CCG submitted an Improvement Plan (IP) to NHS England in line with the legal Directions on 6th October and are awaiting feedback.** The CCG continues to develop a wider Medium Term Financial Strategy and the first draft of the 2017-2019 Financial Plan due to NHS England on 1st November in line with the national timetable. These will set out the actions required to operate within its annual budget for the financial year 2017/18 and thereafter.
- The IP included an updated risk assessment of QIPP plans and other mitigations, which increased the risk adjusted 2016/17 forecast deficit to £24.1m. The IP outlined three key measures to deliver the planned deficit of £13.3m in 2016/17 - £1.1m of additional QIPP opportunities and control measures, £5.4m further pipeline and system support proposals and £4.3m from the release of the 1% non recurrent reserve, subject to delivery of the remaining IP. In agreement with NHS England this has not been reported in the Month 6 Non-ISFE return as they are high risk proposals at the early stage of implementation.
- The CCG is forecasting a year end deficit of £17.34m. This represents an adverse variance of £3.99m in comparison to the planned deficit of £13.35m and includes the brought forward deficit from 2015/16 of £6.30m, plus an in year deficit of £11.04m.
- The year to date financial position is £8.29m worse than planned. This position includes several significant variances which are detailed in section 3.
- Following the IP review of QIPP programmes and other mitigations, the level of unmitigated risk over and above the forecast outturn is £6.77m. The risks and mitigations are detailed in section 5.

1. Red / Amber financial measures

- *'Achieve planned financial position'* – year to date programme expenditure is £8.29m higher than plan, and forecast outturn is £3.99m higher than the planned deficit.
- *'Programme expenditure does not exceed programme allocation'* – programme expenditure is forecast to be £18.18m higher than allocation. This is offset by a forecast underspend on running costs of £0.85m.
- *'QIPP delivery'* – Year to date QIPP delivery is 21% of plan, and forecast delivery is 33%. This includes the impact of the £4m baseline difference on the YTHFT contract.

2. Key Actions

- Development of the IP required under the Directions is now complete and the IP was submitted on 6th October.
- The CCG continues to develop its Medium Term Financial Strategy which will outline how the CCG will stabilise the current financial position, move towards recurrent balance and a sustainable financial position by 2020/21. This will provide a solid basis on which to build in planning assumptions outlined in NHS England guidance for 2017/18 which has now been published. The initial draft financial plan is due for submission on 1st November. The deadline for contract signature with providers and final submission of the financial plan is 23rd December. This is much earlier than in previous years and is a challenging timescale. The finance and contracting teams have set a detailed internal planning timetable and work is underway on the draft financial plan and contract planning process.
- The contracting team have continued to identify and formally raise contract queries with providers where appropriate. Contract challenges are detailed in section 9. An independent review of the detailed contract management processes with York Teaching Hospital NHS Foundation Trust has been agreed with NHS England and will be undertaken in collaboration with neighbouring CCGs to ensure a consistent approach.

3. Reported year to date financial position

Description	Value	Commentary / Actions
York Teaching Hospital NHS Foundation Trust – gap between contract and financial plan	(£2.00m)	This is identified within the forecast outturn. The contracting team continue to analyse the position and issue challenges where appropriate. Any further reduction of this pressure is likely to require further demand management proposals and these are being considered by the Governing Body.
York Teaching Hospital NHS Foundation Trust – other variance	(£2.80m)	In month over spend in August of £1.10m due to a low plan profile reflecting traditionally lower activity over summer, whilst actual activity continued at the same level as previous months. Year to date Orthopaedic planned activity is £0.67m above plan which is offset by underspends on the Ramsay and Nuffield contracts of £1.23m.
Continuing Health Care	(£2.03m)	There continues to be a higher number of referrals compared to the same period in 2015/16.
Ramsay and Nuffield Health	£1.23m	The under spend on these contracts are partly offset by an over spend on Orthopaedic planned activity at YTHFT.

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Mental Health Out of Contract placements	(£0.99m)	The closure of Peppermill Court has led to an increase in out of contract mental health placements.
Funded Nursing Care (FNC)	(£0.52m)	The national rate for FNC has been increased from £112 per week to £156 per week. The financial plan only provided for an increase to £117 per week.
Tees, Esk and Wear Valleys NHS Foundation Trust	(£0.40m)	The cost pressure relating to the closure of Bootham Park Hospital and the requirement for an interim solution.
Systems Resilience Schemes	(£0.43m)	This variance represents the year to date cost of the systems resilience schemes currently in place. The financial plan did not include funding for these schemes.
Prior Year Balances	(£0.31m)	Payments relating to 2015/16 but not provided for at year end.
Unallocated QIPP	(£0.29m)	Full year value of the unallocated QIPP is £0.58m.
Reserves (Better Care Fund - BCF)	(£0.25m)	This variance represents the year to date impact of the gap between the BCF agreed schemes and available funding. BCF plans for CYC and NYCC have now been approved.
Contingency	£1.09m	0.5% contingency provided for in plan.
Other variances	(£0.59m)	
Total impact on YTD position	(£8.29m)	

4. Forecast Outturn

The CCG's forecasting outturn is £3.99m above planned expenditure. There are several key variances within this position which are detailed below.

Description	Value	Commentary / Actions
York Teaching Hospital NHS Foundation Trust – gap between contract and financial plan	(£4.00m)	This is the full value of the gap between contracted and financial plan values.
Mental Health Out of Contract placements	(£1.64m)	The closure of Peppermill Court has led to an increase in out of contract mental health placements.
Funded Nursing Care	(£0.92m)	The full year impact of the increase to the national weekly FNC rate.
Systems Resilience Schemes	(£0.87m)	The full year impact of systems resilience schemes, which were not provided for in the financial plan.
Other acute contracts	£0.80m	Forecast underspends across other acute contracts (i.e. excluding YTHFT).
Tees, Esk and Wear Valleys NHS Foundation Trust	(£0.40m)	Cost pressure from closure of Bootham Park Hospital and the need for an interim solution.
Prior Year Balances	(£0.31m)	Payments relating to 2015/16 but not provided for at year end.
Contingency	£2.18m	0.5% contingency provided for in plan.
Other variances	£1.17m	
Total impact on forecast position	(£3.99m)	

5. Risks and mitigations

The following risks and mitigations to delivery of the CCG's financial plan are identified as at September month end. A detailed table of risks and mitigations is presented in Appendix 2.

Risks

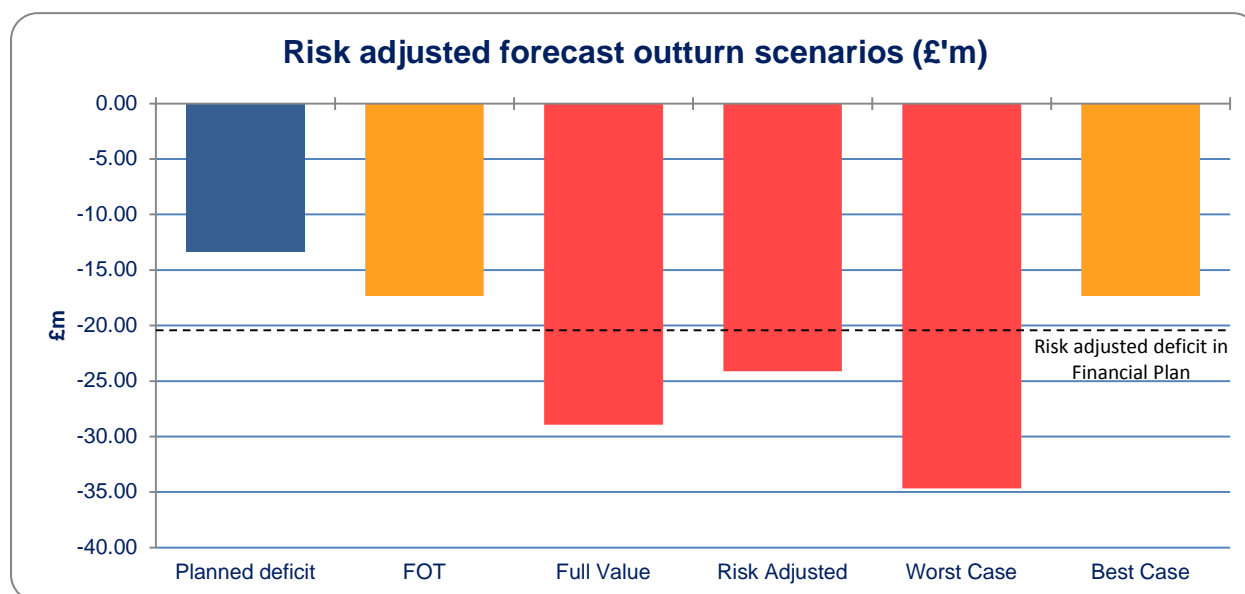
Description	Estimated Value	Commentary
QIPP under delivery	£5.55m	All schemes have been individually risk assessed following the development of the IP, this is the cumulative position. Assumed delivery in the CCG's forecast outturn is £8.20m, risk adjusted delivery is therefore £2.65m.
YTHFT Acute Contract	£1.72m	Actual activity levels above those planned.
Continuing Health Care	£2.29m	Continuation of year to date expenditure trend
Other risks	£1.63m	
Total	£11.19m	

Mitigations and contingencies

Description	Estimated Value	Commentary
Prescribing schemes	£1.88m	Additional opportunities to reduce prescribing spend including maximising national price adjustments and repeat. Finance and prescribing leads are working closely to identify and release savings.
Risk share with CYC on joint / CYC led schemes under section 75	£0.34m	50:50 split of risk with City of York Council off non-delivery of additional BCF savings as per S75 agreement.
Other mitigations	£2.20m	
Total	£4.42m	

The following graph shows potential risk adjusted outturn based on the following scenarios. These are in line with the risk adjusted positions used by NHS England.

- FOT – forecast outturn at Month 6
- Risk adjusted – full value – applies risks and mitigations without probability weighting
- Risk adjusted – probable – applies risks and mitigations with probability weighting
- Worst case – assumes all risks materialise and only uncommitted contingency mitigates
- Best case – assumes no risks materialise and uncommitted contingency mitigates



6. Underlying Position

The underlying position considers the recurrent financial position and removes non recurrent items from the financial position. This does not include the risk adjusted position and is consistent with the monthly financial submission to NHS England.

Description	Value
Forecast Deficit at Month 6	(£17.34m)
Adjust for non-recurrent items in plan -	
Brought forward deficit	£6.30m
1% non-recurrent requirement	£4.34m
0.5% contingency	£2.18m
Continuing Health Care national risk pool	£0.40m
Unallocated QIPP	(£0.58m)
Other non-recurrent items in plan	(£1.13m)
Adjust for non-recurrent variances at Month 6 -	
Release of 0.5% contingency	(£2.18m)
Bootham Park Hospital closure cost pressure	£0.40m
Closure of Peppermill Court	£0.52m
Systems Resilience schemes	£0.87m
Prior year pressures	£0.31m
Other non-recurrent variances	(£0.06m)
Adjust for full year effect of 2016/17 QIPP schemes	£2.95m
Underlying financial position	(£3.02m)

7. Balance sheet / other financial considerations

There are no material concerns with the CCG's balance sheet as at 30th September 2016 and all key metrics (see page 1) are green.

8. QIPP programme

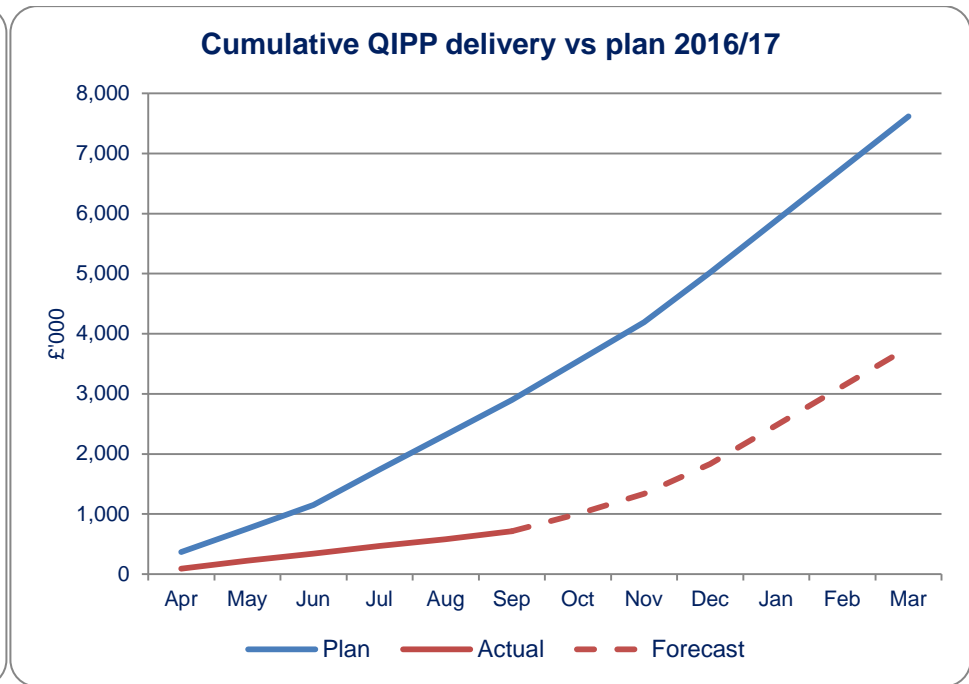
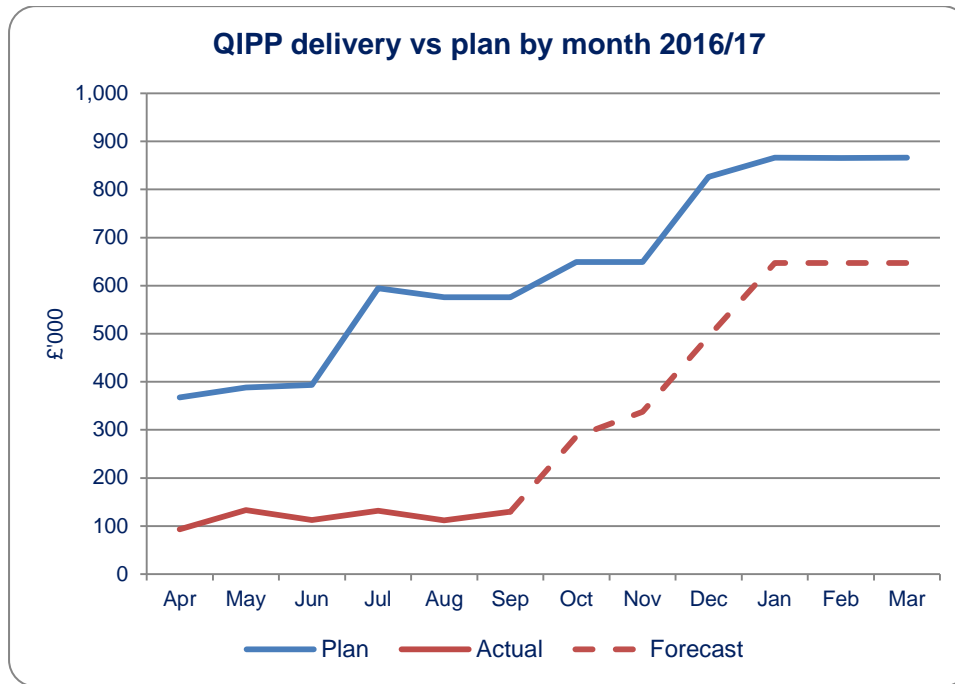
8a. QIPP progress table

Scheme Name	Ref	Planned start date	Year to Date		Outturn		Finance RAG rating	Risk Adjusted savings £000	Comments
			Planned savings £000	Actual savings £000	Planned savings £000	Actual savings £000			
PRIMARY CARE									
DVT	PC3	Oct-16	0	0	17	0	R	0	
Anti-Coagulation service	PC1	Nov-16	39	0	118	65	GA	49	
URGENT CARE									
Non Contracted Activity	U4	Jul-16	89	52	267	267	GA	200	
Paediatric Zero Length of Stay	U1	Oct-16	0	0	34	34	GA	25	
RightCare - Trauma & Injuries	U6	Oct-16	0	0	37	0	R	0	
RightCare - Circulation (Heart Disease)	U7	Oct-16	0	0	70	0	R	0	
ED Front Door	U2	Jul-16	30	0	91	0	R	0	
Urgent Care Practitioners	U3	Apr-16	76	84	76	84	G	84	FYE Apr-Jul, no further updates required
INTEGRATION AND COMMUNITY									
Review of community inpatient services	IC2	Dec-16	0	0	333	0	R	0	
Integrated Care Team Roll-out	IC1	Dec-16	0	0	378	378	A	189	
Wheelchairs & Community Equipment	IC3	Dec-16	0	0	118	222	G	222	
RightCare - Respiratory (COPD)	IC8	Oct-16	0	0	17	0	R	0	
Community Diabetes	IC9	Apr-16	75	0	149	0	R	0	No further savings expected following meeting with Trust 28/09. Contracting to carry out full review of Diabetes service to clarify impact of CDT
Community IV	IC7	Jun-16	20	0	50	0	R	0	
Patient Transport - contracting review	IC5	May-16	42	61	92	135	G	135	
PRESCRIBING									
Branded generics	PS2	Jul-16	173	0	519	104	A	52	
Therapeutic switches	PS1a	Apr-16	200	0	400	325	GA	244	
Repeat prescriptions	PS1b	Oct-16	200	0	400	200	R	50	
Glucocorticoid Rx - Diabetic Prescribing	PS3	Jul-16	149	20	297	123	GA	93	
Minor Ailments Prescribing	PS7	Oct-16	63	0	138	75	R	19	
Continence & Stoma Care	PS4	Jul-16	13	0	38	48	GA	36	Commenced 25/07/16, will start to see data in October.
SIP Feeds	PS6	Apr-16	60	98	120	204	G	204	
Dressings	PS5	Oct-16	0	10	63	53	GA	40	
Rebate Scheme	TBC1	Oct-16	0	0	0	100	GA	75	

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Scheme Name	Ref	Planned start date	Year to Date		Outturn		Finance RAG rating	Risk Adjusted savings £000	Comments
			Planned savings £000	Actual savings £000	Planned savings £000	Actual savings £000			
PLANNED CARE									
Faecal Calprotectin	PC4	Oct-16	53	0	105	53	GA	39	
Dermatology Indicative Budgets	PC2	Apr-16	50	20	100	66	G	66	
High Cost Drugs & Devices Review	PL3	Apr-16	268	0	535	0	R	0	
YTHFT follow up ratio	PL13	Apr-16	351	0	703	0	R	0	
Biosimilar Etanercept (YTHFT)	PL5	Apr-16	144	45	287	287	GA	215	Raised with the Trust at F&A group 28/09. Savings are higher than shown in SLAM data, awaiting full break down and update to SLAM values so QIPP achieved is expected to increased.
Biosimilar Infliximab & Etanercept (LTH)	PL4	Apr-16	22	22	44	44	G	44	
RightCare - Diabetes	PL6	Oct-16	0	0	11	0	R	0	
RightCare - Orthopaedics	PL1	Oct-16	0	0	192	0	R	0	
ENT	PL2	Dec-16	19	0	58	26	R	0	
POLCV - Hips & Knees	PL8	Jan-17	0	0	0	332	A	6	
POLCV - Cataract Surgery	PL9	Jan-17	0	0	0	75	R	166	
POLCV - Breast Reconstruction	PL10	TBC	0	0	0	0	R	19	
Direct Access Radiology	PL11	TBC	0	0	0	0	R	0	
Review IVF commissioning	PL12	TBC	0	0	0	0	R	0	
MENTAL HEALTH & CONTINUING HEALTHCARE									
Reduction in section 117 spend	M1	Apr-16	125	0	250	0	R	0	
Continence Supplies	C1	Sep-16	16	0	33	35	R	9	
Joint Funded CHC review	TBC8	Jan-17	0	0	0	0	A	0	
CHC review	C2	Apr-16	240	0	722	166	GA	125	
Respecification of May Lodge	C3	Oct-16	6	0	12	36	R	9	
RUNNING COSTS									
Running costs review & financial controls	B1	Apr-16	375	185	750	235	G	235	
Total identified QIPP			1,904	583	7,620	3,772		2,650	
Additional YTHFT schemes				0	4,000	0	R	0	
Unidentified QIPP				0	580	0	R	0	
Total QIPP requirement			2,895	596	12,200	3,772		2,650	

8b. QIPP delivery graphs

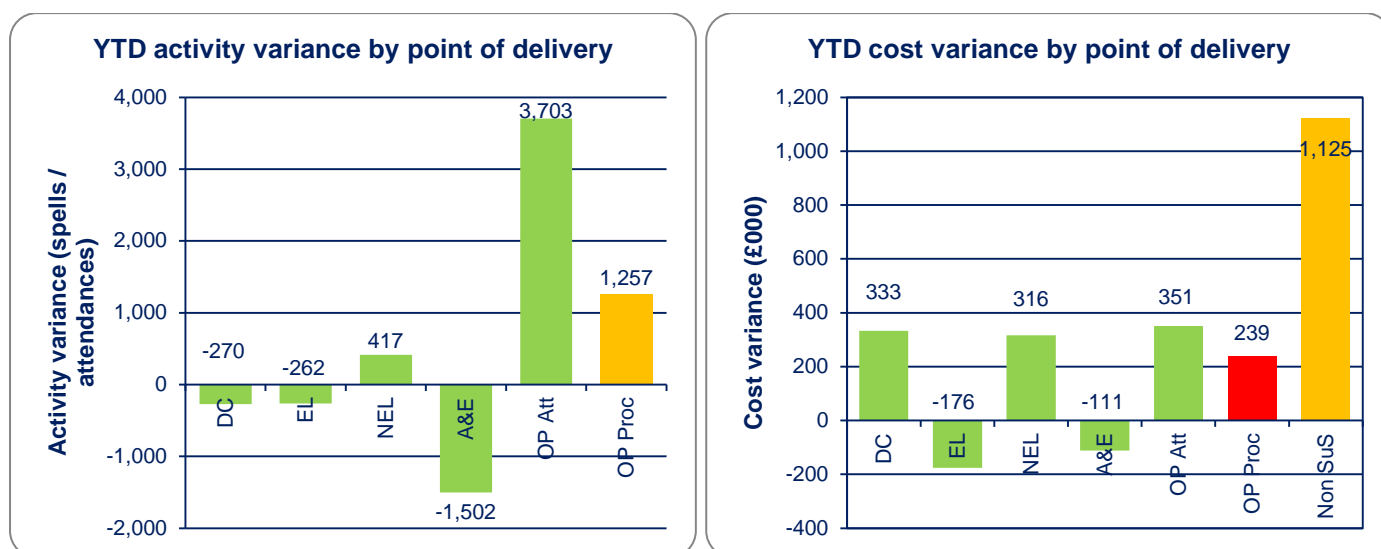


9. Secondary Care activity

9a. York Teaching Hospital NHS Foundation Trust

The two graphs below show YTD activity and cost variance against plan by point of delivery (POD) with the CCG's main acute provider, York Teaching Hospital NHS Foundation Trust.

Variances are shown as red when they are 10% or more above plan, amber where 5-10% above plan and green where less than 5% above plan or below plan. Year to date covers April to August data in line with acute activity data submissions.



Notes – April and July data is freeze, August is flex and may change when final freeze data is submitted. The cost graph excludes contract adjustments such as readmissions and marginal rate adjustments, penalties and CQUIN.

Outpatient procedures are 9% above plan with an over spend against plan of £0.24m. Accident and Emergency attendances are 5% below plan with an under-spend against plan of £0.11m. Non SUS expenditure is £1.13m above plan. This includes an over spend of £0.34m on Critical Care, which relates to one high cost patient – however in the financial position £0.30m of this was accrued at year end as an incomplete spell, and has been released to offset the expenditure in 2016/17. Excluded drugs are £0.36m above plan which relates to the high cost drugs and devices QIPP of £0.22m which is not in delivery.

9b. Contract challenges

Contract queries valued of £1.47m have been raised with York Teaching Hospital NHS Foundation Trust formally relating to April to August activity. £0.14m relates to Rehabilitation Bed Days, and an additional £1.23m is due to a further change to coding of Rehabilitation Bed Days implemented by the Trust, which is to be addressed through a Contract Query Notice. The on-going challenge relating to Best Practice Heart Failure payments (£0.06m) has been concluded and YTHFT have agreed to remove this top up payment from their data.

The query raised in July relating to a stepped change in admissions relating to Septicaemia is still under investigation. YTHFT provided an initial response suggesting that the increase is likely to be a direct result of the implementation of the national Sepsis CQUIN, however benchmarking analysis has shown that a similar pattern has not been observed elsewhere. A Contract Query Notice will be raised with the YTHFT in relation to Septicaemia admissions.

A further Contract Query Notice will be raised with YTHFT relating to a stepped increase in non elective admissions following the implementation of the Ambulatory Care Unit. This issue was raised with YTHFT earlier in the year and it was found that some Ambulatory Care attendances

were being included in the inpatient dataset and being charged as admissions or day cases. This was corrected, but further analysis shows that a stepped change is still evident.

A query was raised with the Trust relating to Regular Day Attenders being inappropriately recorded as Day Cases, and the intention to negotiate a local tariff has been included in the Contracting Intentions for 2016/17 which was sent in writing to YTHFT on 30th September.

9c. Other secondary care providers

Other secondary care providers are showing a YTD underspend of £0.21m in the April to September financial position. The largest underspends are with Ramsay (£0.91m) and Nuffield (£0.32m) which is offset by additional planned Orthopaedic activity at York Teaching Hospital NHS Foundation Trust.

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Appendix 1 – Finance dashboard

	YTD Position			Forecast Outturn		
	Budget £000	Actual £000	Variance £000	Budget £000	Actual £000	Variance £000
Commissioned Services						
Acute Services						
York Teaching Hospital NHS FT	90,106	94,903	(4,797)	180,500	184,500	(4,000)
Yorkshire Ambulance Service NHS Trust	6,447	6,447	(0)	12,895	12,895	0
Leeds Teaching Hospitals NHS Trust	4,496	4,879	(383)	8,965	9,515	(549)
Hull and East Yorkshire Hospitals NHS Trust	1,121	1,309	(188)	2,252	2,492	(239)
Harrogate and District NHS FT	810	951	(141)	1,630	1,919	(289)
Mid Yorkshire Hospitals NHS Trust	951	1,046	(95)	1,910	2,046	(136)
South Tees NHS FT	577	646	(68)	1,208	1,337	(128)
North Lincolnshire & Goole Hospitals NHS Trust	360	308	52	720	617	104
Sheffield Teaching Hospitals NHS FT	122	126	(4)	244	244	0
Non-Contracted Activity	1,736	1,812	(76)	3,383	3,390	(7)
Other Acute Commissioning	141	289	(147)	353	787	(434)
Ramsay	4,551	3,645	907	8,978	7,181	1,797
Nuffield Health	1,853	1,532	321	3,632	3,010	623
Other Private Providers	549	520	29	1,098	1,040	58
Systems Resilience	0	434	(434)	0	866	(866)
Sub Total	113,822	118,847	(5,024)	227,769	231,836	(4,068)
Mental Health Services						
Tees Esk and Wear Valleys NHS FT	19,220	19,622	(402)	38,439	38,844	(405)
Out of Contract Placements and SRBI	1,391	2,379	(988)	2,782	4,523	(1,741)
Non-Contracted Activity - MH	224	184	40	447	314	133
Other Mental Health	(0)	0	(0)	117	117	0
Sub Total	20,834	22,184	(1,350)	41,785	43,798	(2,013)
Community Services						
York Teaching Hospital NHS FT - Community	10,031	10,023	9	20,063	19,939	124
York Teaching Hospital NHS FT - MSK	747	756	(9)	1,665	1,621	44
Harrogate and District NHS FT - Community	2,221	2,323	(101)	4,325	4,373	(48)
Humber NHS FT - Community	518	518	0	1,035	1,035	0
Hospices	602	598	4	1,204	1,195	9
Longer Term Conditions	175	181	(6)	350	356	(6)
Other Community	92	107	(15)	184	233	(49)
Sub total	14,387	14,506	(118)	28,827	28,753	74
Other Services						
Continuing Care	11,494	13,525	(2,031)	22,588	22,588	0
Funded Nursing Care	1,894	2,418	(524)	3,788	4,713	(925)
Patient Transport - Yorkshire Ambulance Service NHS Trust	964	973	(9)	1,936	1,958	(22)
Voluntary Sector / Section 256	358	357	1	716	714	1
Non-NHS Treatment	429	390	40	826	763	63
NHS 111	377	382	(5)	754	759	(5)
Better Care Fund	5,792	5,752	40	11,708	11,669	39
Other Services	179	138	42	341	263	78
Sub total	21,487	23,934	(2,447)	42,657	43,428	(770)

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	YTD Position			Forecast Outturn		
	Budget £000	Actual £000	Variance £000	Budget £000	Actual £000	Variance £000
Primary Care						
Primary Care Prescribing	24,691	24,529	162	49,518	49,083	436
Other Prescribing	162	214	(52)	324	509	(185)
Local Enhanced Services	858	804	54	1,755	1,669	86
Oxygen	116	125	(9)	233	246	(13)
Primary Care IT	525	520	5	1,050	1,141	(91)
Out of Hours	1,710	1,614	96	3,421	3,251	170
GP Innovation Fund	79	192	(114)	157	268	(111)
Sub Total	28,141	27,998	143	56,458	56,167	291
Primary Care Co-Commissioning	20,704	20,385	320	41,411	40,922	488
Running Costs	3,344	3,391	(48)	6,679	6,679	0
Trading Position	222,720	231,245	(8,525)	445,585	451,583	(5,998)
Prior Year Balances	0	307	(307)	0	307	(307)
Reserves	(251)	0	(251)	3,247	3,109	138
Contingency	1,088	0	1,088	2,177	0	2,177
Unallocated QIPP	(290)	0	(290)	(580)	(580)	0
Reserves	548	307	240	4,843	2,836	2,008
Financial Position	223,268	231,553	(8,285)	450,428	454,419	(3,991)
Surplus / (Deficit)	(6,673)	0	(6,673)	(13,346)	0	(13,346)
Overall Financial Position	216,595	231,553	(14,958)	437,082	454,419	(17,337)

Appendix 2 – Risks and Mitigations (full table)

Risks	Recurrent / Non-Recurrent	Current Month			Previous Month			Trend
		Full value £'m	Probability	Probable value £'m	Full value £'m	Probability	Probable value £'m	
Difference in baseline growth assumptions. Contract signed at CCG level, which is lower than YTHFT.	Recurrent	3.45	50%	1.72	2.52	50%	1.26	
Challenges on YTHFT acute activity are all assumed to be successful in M03 position.	Non recurrent	0.00	0%	0.00	0.00	0%	0.00	
		3.45	50%	1.72	2.52	50%	1.26	
Special School Nursing withdrawal of service by CYC	Recurrent	0.10	75%	0.08	0.10	75%	0.08	
		0.10	75%	0.08	0.10	75%	0.08	
Mental Health Out of Contract expenditure related to closure of Peppermill Court	Recurrent	0.00	0%	0.00	0.00	0%	0.00	
Difference in inflation assumptions on MH OOC baseline between CCG and PCU plan	Recurrent	0.00	0%	0.00	0.00	0%	0.00	
High cost patient - dispute with Warrington CCG	Recurrent	0.13	25%	0.03	0.13	25%	0.03	
Alternative provision costs for interim Bootham park replacement 16/17	Non recurrent	0.40	67%	0.27	0.40	67%	0.27	
		0.53	56%	0.30	0.53	56%	0.30	
Continuation of year to date expenditure trend	Recurrent	3.06	75%	2.29	2.67	75%	2.01	
CHC inflationary uplift and actual cost of care exercise	Recurrent	0.41	50%	0.21	0.41	50%	0.21	
National FNC rate change	Recurrent	0.00	0%	0.00	0.00	0%	0.00	
		3.47	72%	2.50	3.09	72%	2.21	
QIPP included in plan is £12.20m, of which £8.18m is not forecast to deliver. £4.00m of this is now recognised in the forecast outturn.	Recurrent	4.18	82%	3.42	1.23	63%	0.78	
QIPP included in plan is £12.2m, current schemes are forecast to deliver at £4.02m	Non recurrent	4.02	53%	2.13	6.97	48%	3.33	
		8.20	68%	5.55	8.20	50%	4.11	
Primary Care Home investment does not generate savings	Non recurrent	0.00	0%	0.00	0.00	0%	0.00	
		0.00	0%	0.00	0.00	0%	0.00	
BCF - Care Act implementation in NYCC.	Recurrent	0.36	100%	0.36	0.36	100%	0.36	
BCF - Additional efficiencies not delivered	Recurrent	1.22	56%	0.68	1.22	56%	0.68	
Systems Resilience expenditure not offset	Recurrent	0.00	100%	0.00	0.86	100%	0.86	
Prior Year pressures are not mitigated.	Non recurrent	0.00	0%	0.00	0.00	0%	0.00	
Prior Year pressure on NYCC Infrastructure Fund	Non recurrent	0.00	0%	0.00	0.00	0%	0.00	
		1.58	66%	1.04	2.45	78%	1.90	
Total		17.33		11.19	16.89		9.86	

Mitigations	Recurrent / Non-Recurrent	Current Month			Previous Month			Trend
		Full value £'m	Probability	Probable value £'m	Full value £'m	Probability	Probable value £'m	
0.5% Contingency	Non recurrent	0.00	0%	0.00	0.00	0%	0.00	
		0.00	0%	0.00	0.00	0%	0.00	
UCP contract challenges	Non recurrent	0.00	0%	0.00	0.00	0%	0.00	
Risk share with CYC on joint/CYC led schemes under s75	Non recurrent	0.61	56%	0.34	1.44	75%	1.08	
Contract management measures - ISTC providers	Non recurrent	0.00	0%	0.00	1.15	25%	0.29	
		0.61	56%	0.34	2.59	53%	1.37	
Reduce out of hospital spend e.g. BCF schemes, community	Recurrent	0.86	17%	0.15	0.86	17%	0.15	
Selby Hub	Recurrent	0.10	100%	0.10	0.10	100%	0.10	
Demand & waiting list management	Non recurrent	0.00	75%	0.00	0.26	100%	0.26	
		0.96	26%	0.25	1.21	41%	0.50	
Additional QIPP proposals - Council of Reps threshold, PoLCV and service changes	Recurrent	0.00	0%	0.00	0.00	0%	0.00	
Risk share with TEVV on Mental Health Out of Contract costs	Recurrent	1.19	75%	0.89	1.19	75%	0.89	
Prescribing schemes	Non-Recurrent	1.50	100%	1.50	1.50	100%	1.50	
Category M price changes made recurrent	Recurrent	0.38	100%	0.38	0.38	100%	0.38	
		3.06	90%	2.77	3.06	90%	2.77	
Allocation adjustment from CYC for Special School Nursing	Recurrent	0.10	75%	0.08	0.10	75%	0.08	
Capital	Non recurrent	0.99	100%	0.99	0.99	100%	0.99	
		1.09	98%	1.07	1.09	98%	1.07	
Total		5.72		4.42	7.96		5.70	
Net risk		11.61		6.77	8.93		4.16	