



Case Study: Turnaround Support for Cumbria CCG



NHS Cumbria CCG was predicting a planned deficit for 2016/17 of £8.5m further work had identified risk of up to £26.7m and the further risk that the current QIPP plan may under deliver. NECS provided Turnaround Support to the CCG following the application of Legal Directions by NHS England. NECS provided a multi-disciplinary team to work collaboratively with the CCG to provide targeted support to assist the CCG in delivering their Financial Recovery Plan (FRP) and addressing the areas of organisational weakness set out in the Directions.

The tasks

- Undertook an evaluation of the existing QIPP schemes to assess the likelihood of delivery.
- Assisted the CCG with the development of detailed plans to support schemes currently identified in the Financial Recovery Plan (FRP).
- Overhauled the operation of the QIPP Project Management Office to ensure it was fit for purpose. This entailed the introduction of best practice project management processes, clear ownership of projects and targets, use of visual performance management and consistent communication of expectations (discipline, accountability and consequences for non-delivery).
- Helped the CCG to identify additional QIPP schemes using the extensive knowledge base of NECS (drawing upon successful schemes applied elsewhere in the north) and supporting development of detailed plans to bridge the current gap in the FRP.
- Undertook benchmarking to identify additional QIPP opportunities.
- Reviewed the robustness of Organisational Governance arrangements. This included a review of the effectiveness of the Governing Body itself, the quality of its scrutiny and challenge, its level of insight, its grip of risk and assurance and its ambition. This led to an overhaul of the CCGs Business Assurance Framework and its risk management framework as well as a new Organisational Development Strategy and a dedicated Continuous Improvement implementation plan (based on lean improvement methodology), the development of the Executive Group.
- Implemented a Clinical Variation Model to reduce Unwarranted Variation in Primary Care. Working in collaboration with GPs to identifying and tackle the root causes of variation and to deliver financial savings.
- Undertook a comprehensive review of the existing contract arrangements to ensure that all agreed terms were being complied with.



A very professional team from NECS fundamentally challenged our approach to QIPP, its identification, delivery and management of projects. They offered new ideas and were at the same time able to validate some of our existing good practice. As a result of working with the NECS team we had a significantly improved out turn financial position, a legacy of improved project management arrangements and a head start for QIPP planning in 2017/18.



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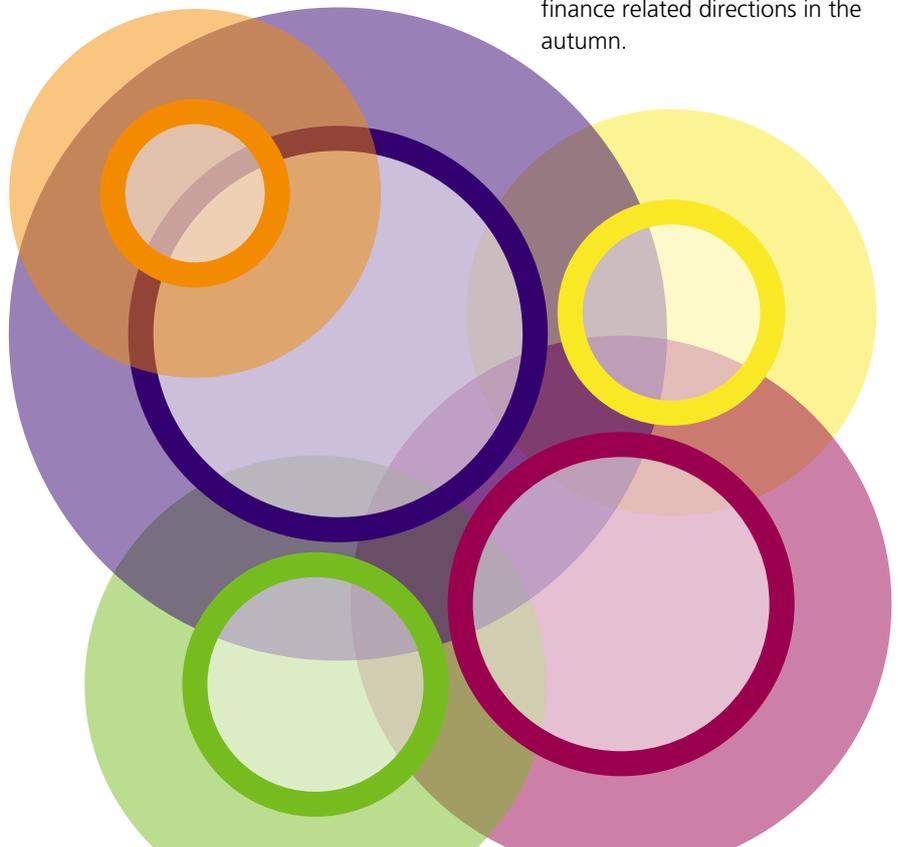


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Outcomes

- The financial outturn for 2016/17 was significantly improved. At Q2, the NHSE forecast was a £10m overspend on the £8.4m CCG control total. The final out-turn was a circa £2m overspend in south Cumbria (due to a Local Price Modification adjustment for Morecambe Bay NHS FT) and financial balance for the North Cumbria health economy.
- Tighter management of Right Care opportunities and more effective FRP project monitoring and reporting.
- Greater transparency and assurance to the Governing Body and Executive Team on the progress of QIPP schemes.
- Through the application of our Clinical Variation Model we developed more effective relationships with GP practices and gained their active engagement with projects that demonstrated improved quality and outcomes.
- Our benchmarking exercise confirmed in many instances the CCG compared favourably with peer CCGs in relation to average spend in inpatient and emergency activity. However, it did identify some opportunities for improvement against top quartile performers.
- Our review of contract terms identified opportunities for further savings in relation to critical care, radiology, maternity pathways and PLCV.
- Following the review of existing Governance arrangements our recommendations enabled the CCG Governing Body to have a much firmer grip on decision making. This included the development of their Accountability Framework, revised Committee Terms of Reference, Business Assurance Framework, Risk Management Framework, Organisational Development Strategy and Continuous Improvement implementation plan.
- NHSE has closed down the Directions relating to governance and organisational development and anticipates being able to close the finance related directions in the autumn.



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