

Theory of Change
Mid and South Essex GP Retention Intensive Support Site

The issues

Background

General practice in mid and south Essex is at a crossroads. We know that if we carry on as we are, with some of the lowest staffing levels in England, poor morale, excessive workload and difficulty recruiting the staff we need, practices – and individual GPs - will be at risk of collapse and the quality and safety of the service we provide to local people will deteriorate. M&SE is one of the most under-doctored STPs in the country, a situation that extends not just to doctors but also to nursing. There is a powerful case for change for general practice across the STP:

- General practice is understaffed, resulting in high workload
- Retirements will further reduce staffing levels
- Morale is low and we face long running recruitment challenges
- There is insufficient capacity to meet current demand

Local initiatives to support agreed approach (please see national teams Theory of Change slide on the FutureNHS Collaborative Platform)

Individual support of GPs

Coaching 1:1 for GPs (national offer) coaching to be offered to GPs thinking of leaving the profession.

Development of peer support networks - first five, career five (3 peer support group to be set up and incentives offered and a structured programme of topics to be set)

Next Generation GP - set up of the programme locally to encourage GPs to become leaders of the future

Sessional GP Focus - development of internal locum bank and accompanying peer support in place to support GPs in the bank with access to CPD and indemnity.

Support for practices:

Productive General Practice Quick Start to be conducted across 10 practices.

Training Practices - supporting existing training practices to sustain and to develop more infrastructure for training places. Encouragement of trainees into substantive roles once gaining their CCT. Focus group conducted with GP registrars to understand the choices of trainee GPs locally.

Pilot 15 minute appointments across two practices (with mechanisms in place for care navigation and involvement of wider workforce).

System wide interventions:

Promotion of Essex as a place to work to include producing promotional materials such as video, career development roadmap. Undertake recruitment programme (including approaching universities, recruitment events, relocation support etc.)

Implementing the NHS standard contract provisions across primary and secondary care using the implementation toolkit and improve working between primary and secondary care.

Undertake engagement initiatives in order to improve relationships across the primary and secondary care interface e.g. engagement event/s and shared learning.

Active promotion of the National GP Retention scheme amongst member practices across the STP

Outcomes

Outcome

- GPs in the Essex area feel more supported and connected, and are confident that they can have fulfilling careers at all stages of their working life enhancing retention
- Essex becomes a more attractive and interesting place to train and work
- GPs develop the skills to support the development of primary care networks going forward
- Improved process for GPs to access training, education and development available and how to access
- Improved relationships with secondary care colleagues which are productive and engaging
- GPs trust training hub to ascertain career development and pastoral care to sustain initiatives beyond March 2019

Measured by:

- Increase in numbers of GPs retained in the area (25 GPs FTE Early Career) (15 GPs FTE Mid and Late Careers) by March 2019.
- GPs, practices and extended workforce report that they are satisfied with their work-life balance, have improved morale and job satisfaction by implementing a staff satisfaction survey. Initial survey in October 2018 and to be repeated in March 2019.
- 80% of the GPs, practices and extended workforce have access to funded coaching/mentoring opportunities
- Reduction in FTE gap between GPs required to meet projected demand in Primary Care

Goal

We have made, and will continue to make, a difference to GP retention by making sure general practice feels like a good place to work in Mid and South Essex. Understanding what makes the difference and building momentum for change which the above initiatives will continue to deliver.

Action Plan						
Site lead: Colinette Nichols						
Summary of the aims and outcomes of the Intensive Support Site (carried over from previous tab)						
<p>Outcome</p> <ul style="list-style-type: none"> - GPs in the Essex area feel more supported and connected, and are confident that they can have fulfilling careers at all stages of their working life - Essex becomes a more attractive and interesting place to train and work - GPs develop the skills to support the development of primary care networks going forward - Improved process for GPs to access training, education and development available and how to access - Improved relationships with secondary care colleagues which are productive and engaging <p>Measured by:</p> <ul style="list-style-type: none"> - Increase in numbers of GPs retained in the area (25 GPs FTE Early Career) (15 GPs FTE Mid and Late Careers) by March 2019. - GPs, practices and extended workforce report that they are satisfied with their work-life balance, have improved morale and job satisfaction by implementing a staff satisfaction survey. Initial survey in October 2018 and to be repeated in March 2019. - 80% of the GPs, practices and extended workforce have access to funded coaching/mentoring opportunities - Reduction in FTE gap between GPs required to meet projected demand in Primary Care 						
Milestones						
Initiative (from Theory of Change)	Estimated expenditure associated with initiative (£)	Target no. (headcount) of GPs to be supported through initiative	Is support offered to GPs direct (e.g. peer support sessions, coaching) or indirect (e.g. marketing campaign, workload initiatives / PGP Quick Start)	Key milestones attributed to the initiative	Date milestone to be completed	Named lead
GENERAL						
Agree and appoint Change facilitator	£10,000	n/a - indirect support and project implementation	Indirect	Interview change facilitators provided by national team Confirm appointment Agree spread of 32 days with facilitator in line with action plan	15/07/2018 30/07/2018 30/09/2018	NHS England
Identify and secure project management team	£97,000	n/a - indirect support and project implementation	Indirect	Appoint project manager & change facilitator Appoint / identify GP supporter & fellow (clinical lead) All project team in place	15/09/2018 30/11/2018 01/12/2018	Colinette Nichols/Lucy Porterfield
Stakeholder Engagement/Management	£5,000	n/a - indirect support and project implementation	Indirect	Launch engagement event. Progress review event Evaluation event	4th September 2018 31st January 2019 31st March 2019	Colinette Nichols/Lucy Porterfield
Workforce baselining	£0	n/a - indirect support and project implementation	Indirect	Agreement of metrics and scheme details Clarify timescales and usability of Wessex Model by the LMC Management of 'sign up' by practices and implementation of the scheme	30/09/2018 30/10/2018 31/12/2018	LMC
Evaluation (via national team) to establish impact of initiatives	£15,000	n/a		Evaluation to commence Evaluation report to be published	28/02/2019 30/04/2019	National team National team
Contingency	£25,000	n/a				Colinette Nichols/Lucy Porterfield
Support for individual GPs:						
Coaching 1:1 for GPs (national offer) coaching to be offered to GPs thinking of leaving the profession	N/A	40	Direct	GPs identified for coaching offer All GPs suitable offered coaching code to access coaching GPs to have undertaken coaching Evaluation (led by national team to have taken place)	31/10/2018 01/11/2018 28/02/2018 31/03/2019	Colinette Nichols/Lucy Porterfield
Development of peer support networks - first five, career five (3 peer support group to be set up and incentives offered and a structured programme of topics to be set)	£40,000	15	Direct	Mapping of existing networks and identifying lead organisations. Workplan developed across the three categories with lead organisations Peer support groups go live Peer support groups reviewed and improvements implemented	30/09/2018 31/10/2018 30/11/2018 31/01/2019	Colinette Nichols/Lucy Porterfield
Next Generation GP - set up of the programme locally to encourage GPs to become leaders of the future	£0	15	Direct	Make contact with national lead Agree timescales for delivery of programme. Advertising across site of NGP to have taken place First NGP sessional takes place	31/08/2018 30/09/2018 31/10/2018 01/11/2018	EPIC
Sessional GP Focus - development of internal locum bank and accompanying peer support in place to support GPs in the bank with access to CPD and indemnity.	£50,000	10	Direct	Development and delivery of focus group for sessional GPs. Locum bank across federation set up and IT booking system live Peer support sessions go live to support sessional GPs in the bank Rapid evaluation of locum bank and improvements implemented	31/10/2018 06/01/2018 06/01/2018 28/02/2018	Colinette Nichols/Lucy Porterfield
Establishment of Network GPs in partnership with local trusts	£17,500	2		Establish process with providers to implement network GP opportunities to trainees from additional funding available from national team 20/12/2018	31/03/2019	Colinette Nichols/Lucy Porterfield
Support for Practices						
Productive General Practice Quick Start to be conducted across 10 practices.	N/A	Maintain the current establishment of GPs develop the infrastructure to enable retention.	Indirect	Liaise with Sustainable improvement team regarding implementation 10 practices engaged regarding the programme PGP QS - goes live Follow up with practices to check all ok with programme	15/09/2018 30/09/2018 31/10/2018 30/11/2018	Colinette Nichols/Lucy Porterfield
Training Practices - supporting existing training practices to sustain and to develop more infrastructure for training places. Encouragement of trainees into substantive roles once gaining their CCT. Focus group conducted with GP registrars to understand the choices of trainee GPs locally.	£23,000	10	Direct	Establish key contacts for progress of work through national team. Map local knowledge re training practices. Contact existing training practices directly. Agree programme of work with stakeholders (HEE and Deanery)	21/09/2018 21/09/2018 21/09/2018 31/10/2018	Colinette Nichols/Lucy Porterfield
Pilot 15 minute appointments across two practices (with mechanisms in place for care navigation and involvement of wider workforce).	£100,000	n/a	Indirect	Agree which Practices for Phase 1 of Pilot September 18 Scope with Practices and Change Facilitator plan/, resources to support/, risks, Implement 15 minute appointments Undertake rapid evaluation of initiative Plan for spread subject to success of pilot, resources and willingness of practice	31/10/2018 30/11/2018 31/12/2018 28/02/2018 15/03/2018	Jenni Speller, Dr Brian Balmer and Dan Doherty
System wide interventions						
Promotion of Essex as a place to work to include producing promotional materials such as video, career development roadmap. Undertake recruitment programme (including approaching universities, recruitment events, relocation support etc.)	£20,000	n/a	Indirect	Establish project group for promotion work stream Work with key stakeholders to agree scope of work. Scope content and procurement of products Secure provider to deliver 'video' Career roadmap produced Websites updated Products available and being used	31/10/2018 30/09/2018 30/11/2018 31/12/2018 31/11/2018 31/12/2018 31/01/2019	EPIC, LWAB and Training Hub
Implementing the NHS standard contract provisions across primary and secondary care using the implementation toolkit and improve working between primary and secondary care interface e.g.	£10,000	n/a	Indirect	Establish project group to focus on interface work Action plan developed to implement toolkit Engagement initiatives planned and delivered	31/10/2018 30/11/2018 31/03/2019	Colinette Nichols/Lucy Porterfield
Undertake engagement initiatives in order to improve relationships across the primary and secondary care interface e.g.	£5,000	n/a	Indirect	Stakeholder plan across primary and secondary care agreed Engagement events go live GP visits in primary and secondary care take place	31/10/2018 31/01/2019 31/01/2019	Colinette Nichols/Lucy Porterfield
Active promotion of the National GP Retention scheme amongst member practices across the STP	£0	n/a	Direct	Promotion via GP newsletters Email links to all GPs Include information on CCG websites and via EPIC	Complete 31/10/2018 31/10/2018	Colinette Nichols/Lucy Porterfield
TOTAL	£417,500	90				
GPs to be retained						
act on retention - GPs (FTE) to be retained 40						

MSE GP Retention Intensive Support Site HL Report
Review period: December 2018

Overall delivery confidence (see guidance tab)

Last reporting period status

Current status

G

G

Summary of overall progress to date

Progress made to date (as at 21 December 2018)

- The MSE STP have successfully appointment an interim project manager to lead on the GPRISS initiatives. Currently going through HR process and looking at a start date in January 2019.
- National assurance meeting took place on the 30 November with Ian Biggs and Janet White. Positive feedback has been received on the establishment, progress of the schemes as well as the development made of the STP Training Hub.
- GP Trainee event scheduled for the 6 March 2019 for South West Essex. Date in January and February to be confirmed for South East and Mid Essex localities.
- GP Coaching video and promotion has been circulated to all GPs and member practices across the STP. Two expressions of interest received to date.
- Meeting took place with two training practices with the GP Trainees - liaised with 13 to date to ascertain their contact details and scoping their requirements. Two of these GPs require tier 2 visa sponsorship which is also being explored.
- Following meeting to discuss implementation of the locum deck, a survey is being created to ascertain their interest in joining.
- Feedback from Regional Site Visit 30 November 2018
- Positive feedback from national team included:
 - The impact and implementation of the Primary Care Strategy
 - 15 minute appoint pilot progress made to date
 - Engagement across the stakeholders for the implementation of all retention schemes
- AG – Workforce baselining: on-going work has been undertaken with member practices to ensure that there is appropriate and up to date information recorded on the MDS reporting tool. Mitigation for A/G status, as this is a continued piece of work with practices. Practices have been sharing their vacancy information on a sporadic basis and not all practices respond to the communications.

Initiative	Expenditure to date (£)	Target number of GPs to be supported	GP Supported to date	Key milestones attributed to the initiative	Milestone date	If milestone will be missed please state revised date	Description of progress to date	Key risks to delivery	Support required from national team	Milestone delivery confidence	Overall delivery confidence
GENERAL											
Agree and appoint Change facilitator	£10,000	n/a - indirect support and project implementation	0	Interview change facilitators provided by national team	15/07/2018	Completed	Change facilitator in post. Conversations with 6 member practices to implement the 15 min appointment pilot. 2 signed up (one large and one small practice)	N/A	N/A	C	G
				Confirm appointment	30/07/2018	Completed				C	
				Agree spread of 32 days with facilitator in line with action plan	30/09/2018	Completed				C	
Identify and secure project management team	£97,000	n/a - indirect support and project implementation	5 (indirect)	Appoint project manager & change facilitator	15/09/2018	Completed	Job offer has been accepted by successful candidate, currently waiting for references/OH. Hoping for a start date of mid-January.	Failure to appoint interim B7.	N/A	C	G
				Appoint / identify GP supporter & fellow (clinical lead)	12/12/2018	Completed				C	
				All project team in place	16/01/2019					G	
Stakeholder Engagement/Management	£0.00	n/a - indirect support and project implementation	0	Launch engagement event.	04/09/2018	Completed	Primary Care in Essex event took place 8 November promoting opportunities. GP Conference planned for March 2019, date to be confirmed for January and February.	Poor response to campaign and events	NHS England to promote GP Roles	C	G
				Progress review event	31/01/2019					G	
				Evaluation event	31/03/2019					G	
Workforce baselining		n/a - indirect support and project implementation	N/a	Agreement of metrics and scheme details	30/09/2018	Completed	STP/CCG leads have been working with member practices to improve the quality of the data included on the MDS. Guidance on how to complete the returns to NHS Digital has been circulated to all PMs across the STP. Process has been established to ascertain practices vacancies, central log established and team administrator following up with practices for status.	Practices do not engage and inaccurate information RE workforce data and having to rely on the NHS Digital MDS	N/A	C	A/G
				Clarify timescales and usability of Wessex Model by the LMC	30/10/2018	Completed				C	
				Management of 'sign up' by practices and implementation of the scheme	31/12/2018					A/G	
Evaluation (via national team) to establish impact of initiatives	£15,000	n/a	N/a	Evaluation to commence	28/02/2019		Meeting scheduled with evaluation team for 16 January 2019 to discuss requirements.			Not started	G
				Evaluation report to be published	30/04/2019					Not started	
Contingency	n/a	n/a	n/a	n/a	n/a		Not required at this stage	n/a	n/a	Not started	G
Support for individual GPs:											
Coaching 1:1 for GPs (national offer) coaching to be offered to GPs thinking of leaving the profession	n/a	77	2	GPs identified for coaching offer	31/12/2018		Delay in circulation of coaching application form link from the national team. Have incorporated link in promotional materials and distributed amongst GPs and member practices. Two expressions of interest received to date.	limited uptake to coaching offer due to tight turn around for applications 31/12/18.	N/A	G	G
				All GPs suitable offered coaching code to access coaching	01/11/2018	Completed				C	
				GPs to have undertaken coaching	28/02/2018					G	
				Evaluation (led by national team to have taken place)	31/03/2019					G	
Development of peer support networks - first five, career five (3 peer support group to be set up and incentives offered and a structured programme of topics to be set)	£0	15	0	Mapping of existing networks and identifying lead organisations.	30/09/2018	Completed	Mapping complete. Work plan complete. Late career network to be established. Will be taking forward in the new year when the dedicated project manager joins the team.	Poor support for networks	N/A	C	G
				Work plan developed across the three categories with lead organisations	31/10/2018	Completed				C	
				Peer support groups go live	31/01/2019					G	
				Peer support groups reviewed and improvements implemented	31/01/2019					Not started	
Next Generation GP - set up of the programme locally to encourage GPs to become leaders of the future	n/a	15	0	Make contact with national lead	31/08/2018	Completed	First event took place on 27 November 2018 - 45 early career GPs across Essex have confirmed attendance. Second event took place on 11 December 2018 - 41 GPs attended			C	G
				Agree timescales for delivery of programme.	30/09/2018	Completed				C	
				Advertising across site of NGP to have taken place	31/10/2018	Completed				C	
				First NGP sessional takes place	01/11/2018	Completed				C	
Sessional GP Focus - development of internal locum bank and accompanying peer support in place to support GPs in the bank with access to CPD and indemnity		10	0	Development and delivery of focus group for sessional GPs.	19/12/2018	Completed	Local locum deck is established in greater Essex. Further scope to localise across the MSE STP. Following meeting with EQUIP (provider) survey is being developed to circulate to GPs to ascertain interest.			C	G
				Locum bank across federation set up and IT booking system live	06/01/2019					Not started	
				Peer support sessions go live to support sessional GPs in the bank	06/01/2019					A/G	
				Rapid evaluation of locum bank and improvements implemented	28/02/2019					Not started	
Support for Practices											
10	£0	10		Establish key contacts for progress of work through national team.	21/09/2018	Complete	Mapping of local Practices completed. Contact with trainees & training practices completed. Developing agreed programme of pastoral support. Three visits taken place thus far.	Trainees fail to respond. Practices do not respond.		C	G
				Map local knowledge re training practices.	21/09/2018	Completed				C	
				Contact existing training practices directly.	21/09/2018	Completed				C	
				Agree programme of work with stakeholders (HEE and Deanery)	31/01/2019					A/G	
Pilot 15 minute appointments across two practices (with mechanisms in place for care navigation and involvement of wider workforce)	£20,000	n/a	0	Agree which Practices for Phase 1 of Pilot September 18	31/10/2018	Completed	First pilot site has identified ANP to support the delivery of this piece of work due to commence ASAP £330 per day for three months period.	Practices lose interest		C	G
				Scope with Practices and Change Facilitator plan/, resources to support/, risks,	30/11/2018	Completed				C	
				Implement 15 minute appointments	01/02/2019					Not started	
				Undertake rapid evaluation of initiative	28/02/2018					Not started	
				Plan for spread subject to success of pilot, resources and willingness of practice	15/03/2018					Not started	
System wide interventions											
Promotion of Essex as a place to work to include producing promotional materials such as video, career development roadmap. Undertake recruitment programme (including approaching universities, recruitment events, relocation support etc.)	£0	n/a	0	Establish project group for promotion work stream	31/10/2018	Completed	First session booked for the 6 March in South West Essex. Awaiting confirmation of date in January and February for South East and Mid Essex localities. These individual events will host workshops for GP Trainees that include CV writing, interview techniques, vacancies etc.			C	G
				Work with key stakeholders to agree scope of work.	30/09/2018	Completed				C	
				Scope content and procurement of products	30/11/2018	Completed				C	
				Secure provider to deliver 'video'	31/12/2018	Completed				C	
				Career roadmap produced	31/11/2018	Completed				C	

				Websites updated	31/12/2018					Not started	
				Products available and being used	31/01/2019					Not started	
Implementing the NHS standard contract provisions across primary and secondary care using the implementation toolkit and improve working between primary and secondary care	£0	n/a	0	Establish project group to focus on interface work	31/10/2018	Complete	To monitor inappropriate referrals: A template has been designed and a pilot has been established in the Benfleet locality to monitor the number of inappropriate referrals from secondary care. This form is being generated to understand how many referrals are being returned to Primary Care. The pilot will finish imminently and a paper will be presented to our Clinical Executive teams to inform discussions with the local trust.	Lack of sign up from secondary care	N/A	C	G
				Action plan developed to implement toolkit	30/11/2018	Complete				C	
				Engagement initiatives planned and delivered	31/03/2019					Not started	
Undertake engagement initiatives in order to improve relationships across the primary and secondary care interface e.g. engagement events/ and shared learning.	TBC	n/a	0	Stakeholder plan across primary and secondary care agreed	31/10/2018	Completed	Currently in discussions with the new ARU Medical School to host event for primary and secondary care by the turn of the year - date to be confirmed. Mental Health workshop being designed to support practice staff understanding roles across the primary/community/acute interface. Aiming for six sessions to commence in January and to be completed by March 2019.		N/A	C	G
				Engagement events go live	31/01/2019					Not started	
				GP visits in primary and secondary care take place	31/01/2019					Not started	
Active promotion of the National GP Retention scheme amongst member practices across the STP	£0	n/a	2	Promotion via GP newsletters	31/10/2018	Complete	All actions have been completed. Two GPs made contact to explore opportunities. Expressions of interest will be mapped, tracked and reported through the project group.	N/A	N/A	C	G
				Email links to all GPs	31/10/2018	Complete				C	
				Include information on CCG websites and via EPIC	31/10/2018	Complete				C	
Total	£142,000	127									

Plans for next month

Finalise GP Trainee event for January and February 2019.
 CPD Workshops to be implemented for MH bespoke courses.
 Implement Tier 2 visa process.
 Further practice visits to be scheduled.
 Appointment of the new PM in January 2019.
 Network GP meeting happening on the 4 January 2019. Plan for spending £17,500 to be incorporated (approx £10k per GP)
 Discussions with Out of Hours provider to provide cover to pilot 1 site to trial 15 minute appointment (date to be confirmed)

Lessons Learned this month

Training Hub - Need to monitor recruitment campaign daily to ensure it's effective
 Due to the tight deadline for applications for the GP coaching offer, limited expressions of interest may be received despite active promotion.

Site profile data

Total number of 'all practitioners' FTE	604
Proportion of GPs over 55 (as at March 2018)	171
Number of training posts available	Not known at this stage
Total number of practices covered by GPRISS	176

National GP Retention Indicators (currently in development - GPRISS are asked to complete these where local / national data is available)	2017/18 (September 18)	2018/19 (March)
Overall loss / gain from FTE GP workforce against previous period	4	
Change in net conversion rate of GP registrars into substantive roles	Not known	
Overall change in (early 55 years or under) retirement rate since previous period	Not known	

Specific site measures

INDIVIDUAL

Total number of initiatives being implemented across GPRISS	16
Target number of GPs (headcount) to be supported through GPRISS initiatives in 18/19	127
Number of GPs (headcount) receiving support through GPRISS initiatives to date	0
Total estimation of additional GP FTE created as a result of the initiatives (using the GP Retention (FTE) impact tool to calculate - direct initiatives only)	TBC
GP trainees expressing intentions to be employed in the area (where appropriate)	7

PRACTICE

Number of practices engaging with GPRISS initiatives to date (Q1 work)	From February 2019
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SYSTEM

Number of recommendations implemented from the Primary and Secondary Care Interface Toolkit	1
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Expenditure

Total spend to date (£)	142,000
Remaining funding (£)	258,000


Select GPRISS

Mid and South Essex Sustainability and Transformation Partnership

Time series -

The numbers reported in this table are FTE. Please note that the data include the Unknown nu

DATA AS AT:		Latest Difference from Sep'15 baseline	Time Series
General Practitioners (FTE)			
<i>(For definition, hover over red triangle)</i>			
All Practitioners		-5	
	GP Providers	-45	
	Salaried/Other GPs	-18	
	GP Retainers	0	
	GP Registrars	38	
	GP Locums	19	
All Practitioners (excluding Registrars)		-44	
All Practitioners (excluding Retainers, Registrars and Locums)		-63	
DATA AS AT:		Latest Difference from Sep'15 baseline	Time Series
Wider Workforce (FTE)			
All Wider Workforce		109	
All Nurses		-3	
	Advanced Nurse Practitioners	6	
	Nurse Specialist	1	
	Extended Role Practice Nurses	5	
	Practice Nurses	-15	
	Practice Nurse Partners	-1	
	District Nurses	0	
	Nurse Dispenser	1	
	Trainee Nurses	-1	
	Research Nurses	0	
	Not Stated	0	
All Direct Patient Care		107	
	Health Care Assistants	44	
	Dispensers	23	
	Phlebotomists	7	
	Pharmacists	12	

	Podiatrists	0	
	Physiotherapists	0	
	Therapists	-1	
	Physician Associates	4	
	Paramedic	7	
	Nursing Associate	0	
	Apprentice	4	
	Direct Patient Care - Other	5	
All Admin/Non-clinical		6	
Wider Workforce - Clinical		104	

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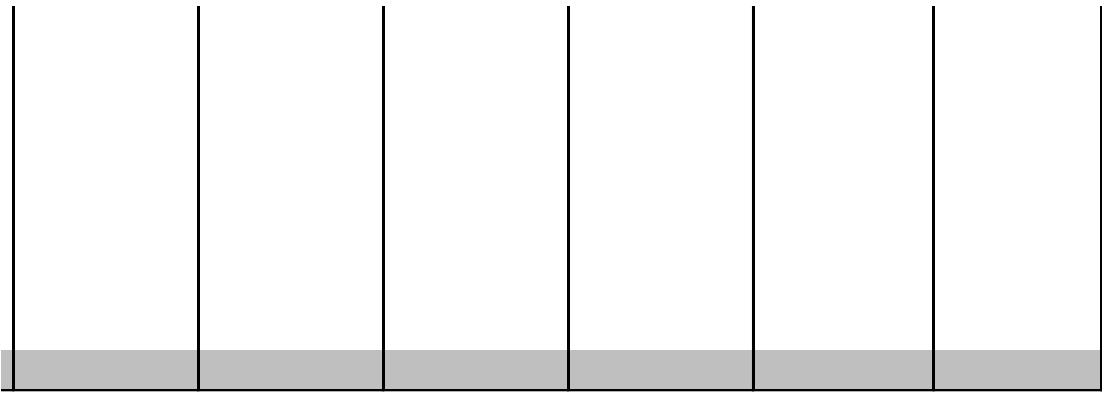
Numbers reported in the relevant NHS Digital publications.

Sep-15 (Baseline)	Mar-16	Sep-16	Dec-16	Mar-17	Jun-17	Se
Source: NHSD	Source: NHSD	Source: NHSD	Source: NHSD	Source: NHSD	Source: NHSD	Source:
608	631	595	566	573	570	
436	446	439	415	413	407	
126	128	103	101	100	100	
-	-	1	1	1	3	
22	33	33	26	28	29	
24	24	20	24	31	31	
586	598	562	541	545	540	
562	574	541	516	513	507	
Sep-15 (Baseline)	Mar-16	Sep-16	Dec-16	Mar-17	Jun-17	Se
Source: NHSD	Source: NHSD	Source: NHSD	Source: NHSD	Source: NHSD	Source: NHSD	Source:
1,643	1,653	1,630	-	1,652	-	
297	290	286	-	281	-	
53	43	45	-	42	-	
6	6	3	-	4	-	
2	7	6	-	7	-	
234	233	231	-	227	-	
1	1	-	-	-	-	
-	-	-	-	-	-	
1	-	1	-	1	-	
1	-	-	-	-	-	
-	-	-	-	-	-	
-	1	-	-	-	-	
145	162	152	-	215	-	
86	92	84	-	118	-	
43	52	50	-	64	-	
7	9	8	-	11	-	
2	3	4	-	6	-	

	-	-	-	-	-	-
0	-	-	-	-	-	-
1	-	-	-	-	-	-
-	-	-	-	-	-	-
-	-	-	1	-	-	-
-	-	-	-	-	-	-
-	-	-	-	-	4	-
5	7	5	-	-	11	-
1,202	1,202	1,191	-	-	1,156	-
441	452	438	-	-	496	-

ep-17	Dec-17	Mar-18	Jun-18	Sep-18	Dec-18	Mar-19
				Provisional		
Source: NHSD	Source: NHSD	Source: NHSD	Source: NHSD	Source: NHSD		
566	571	566	558	603		
401	402	399	395	391		
106	104	105	105	108		
1	1	1	0	0		
25	26	21	20	61		
33	39	41	37	43		
540	545	545	538	542		
507	506	503	500	499		
ep-17	Dec-17	Mar-18	Jun-18	Sep-18	Dec-18	Mar-19
Source: NHSD	Source: NHSD	Source: NHSD	Source: NHSD	Source: NHSD		
1,651	1,689	1,725	1,735	1,753		
281	289	300	297	294		
49	50	53	56	59		
4	5	6	8	6		
8	7	7	6	7		
217	224	231	225	218		
-	-	-	-	-		
-	-	-	-	-		
2	2	2	2	2		
-	-	-	-	-		
-	-	-	-	-		
220	227	236	239	251		
120	123	128	129	130		
63	67	67	66	66		
13	13	14	14	14		
9	9	10	11	14		

-	-	-	-	-	-	
-	0	0	0	0	0	
-	-	-	-	-	-	
1	-	-	2	4	4	
2	2	4	4	7	7	
-	-	-	-	0	0	
4	4	4	4	4	4	
8	9	8	8	11	11	
1,151	1,173	1,190	1,199	1,208	1,208	
501	516	535	536	545		



Delivery confidence	
Definition	RAG Status
Successful delivery of some or all of the defined objectives appears to be currently unachievable. There are major issues on scope, schedule, resources, quality or benefits delivery, which at this stage do not appear to be resolvable.	R
Successful delivery of some or all of the defined objectives is in doubt with significant issues apparent in a number of key areas. Urgent action is needed to ensure these are addressed.	A/R
Successful delivery of the defined objectives appears feasible but issues require management action. The issues appear resolvable at this stage if addressed promptly.	A
Successful delivery of the defined objectives appears likely. However action will be needed to ensure risks do not materialise into major issues threatening delivery.	A/G
Successful delivery of the defined objectives appears highly likely and there are no major risks identified at this stage that appear to threaten future delivery.	G
Programme / project is delivered.	C