

Project Initiation Document (PID)			
Project Title		QIPP Ref No	CCGs own internal scheme identifiers
Project Manager		Clinical Lead	
Programme Manager		Executive Lead	
Project start date		Project end date	
Saving/activity reduction summary	Scheme financial value over the agreed planned initial lifetime of the scheme.		
Project description	<ul style="list-style-type: none"> Describe planned solutions to a current service issue. Describe activity and finance trends which support the case for change. Describe the targeted patient cohort/s and how the PID scheme will provide for their needs and improve clinical outcomes. Describe the benefits of the new scheme upon trends in activity demand and commissioner related spend. 		
National, local and strategic context	<ul style="list-style-type: none"> How do local demographic needs shape change? How do local strategies including the CCG's strategic objectives and Sustainability and Transformation Plans (STP) align with the PID scheme? How does the PID scheme align with national strategies e.g. Five Year Forward View? 		
In scope	<ul style="list-style-type: none"> Define the pathways and services impacted by the PID scheme. Define the patient cohorts impacted by the PID scheme. Define the providers and geographic areas impacted by the PID scheme. Define the conditions and treatments included within the scope of the PID scheme, including relevant HRGs. 		
Out of scope	List any exclusions and explain why it is appropriate and clinically safe to exclude.		
Project Aim	What are you aiming to achieve? Provide a statement of intent.		

Project Outcomes	These are the things that will change as result of your project.																				
Project Deliverables	The deliverables of the project contribute to the delivery of the Outcomes and ultimately evidence achievement of the aim. Deliverables should be specific, measureable, achievable and timed.																				
Notable practice examples	Outline the evidence base to support the change including case studies.																				
Pathway design principles	<ul style="list-style-type: none"> a. Provide a description of the planned new service and pathways and outline patient flow. It might be useful to provide a diagram. b. Highlight benefits to patients, provider and commissioners. Highlight any gaps or tensions requiring careful management and risk mitigation. 																				
Mobilisation considerations	<ul style="list-style-type: none"> a) People – Workforce impact e.g. training and recruitment. b) Process – Patient flow. c) Place – Location of service and estate considerations. 																				
Critical delivery milestones	<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 60%;">Milestone description</th> <th style="width: 40%;">Projected delivery date</th> </tr> </thead> <tbody> <tr> <td>The Milestones are the defined stages of work necessary to establish, manage and review the change.</td> <td>Due date for completion of milestone.</td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	Milestone description	Projected delivery date	The Milestones are the defined stages of work necessary to establish, manage and review the change.	Due date for completion of milestone.																
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	Benefits	Measurement
Care & quality	Provide a summary of the benefits to patient and carer experience.	Explain how patient and carer experience will be measured and recorded at key stages of the service and pathway, for example, family and friends tests, patient feedback and audit.
Health & wellbeing	Provide a summary of benefits to service user health issues, aligned to national quality and clinical standards. The identified benefits should adhere to SMART (specific, measurable, attainable, relevant and time-bound).	Explain how the benefit will be measured, for example, KPIs, patient feedback or audit.
Finance & efficiency	Provide a summary of activity and financial benefits and how these may be captured as tangible benefits: <ul style="list-style-type: none"> • Service change • Activity change • Quality improvement • Financial efficiency 	Explain how the benefit will be measured, for example, tracking activity against specific HRGs.
	Risk/issue description	Mitigation and escalation plan

Identified risks, issues and mitigations	Describe what the risk is and the impact of that risk on the delivery. What are the consequences?	Identify actions/an approach to reduce the risk impact severity and/or probability of occurrence.	
Finance and activity assumptions	<ul style="list-style-type: none"> Describe how the saving will be achieved e.g. activity shift/reduction listed by HRG. Provide a baseline of activity and costs and explain the reasoning behind the activity shift assumptions e.g. are percentage reductions applied to HRG activity based on the result of a clinical audit or a pilot? What assumptions have been made around the success of the project e.g. percentage sign-up? Summarise the financial value of the scheme in terms of savings and efficiencies net of costs. Identify whether savings are recurrent or non-recurrent. 		
Savings	Description	Year	£
When will activity reductions start?	Outline when the scheme is expected to deliver savings and the phasing of savings. Identify whether savings are full year or part year.		
What investment is needed?	Outline any costs and investment required to deliver the PID scheme. Are costs recurrent or non-recurrent?		
Contracting	<ul style="list-style-type: none"> Provide a summary of the contractual vehicle to be used to manage the PID scheme's performance and costs e.g. will the contract be amended by contract variation or will a SLA project agreement be put in place? 		

	<ul style="list-style-type: none"> • Provide an explanation of the multilateral support for the scheme from the CSU, providers and the CCG's finance, Commissioning and Contracting teams.
Stakeholder engagement	<ul style="list-style-type: none"> • List key stakeholders e.g. GPs, patient groups, providers and adult social care. • Summarise the communications and engagement plans to support successful implementation of the change. • Provide a description of the patient and carer group planned engagement activity.
References and additional resources	<ul style="list-style-type: none"> • Provide hyperlinks to sources used e.g. evidence base. • Provide additional links to NHS RightCare resources. • Links to useful sources
Equality Impact Assessment	<p>This assessment reviews the implications of the policy/service redesign for those people with protected characteristics covered by the Equality Act (2010). It is intended to demonstrate that in developing this policy/service we have had due regard for our general equality duties to</p> <ul style="list-style-type: none"> • Eliminate unfair discrimination • Promote equality of opportunity • Promote good relations between those who share a protected characteristic and those who do not. <p>Please embed the completed Equality Impact Assessment within this document or provide a link to the completed EIA.</p>
Data Protection Impact Assessment	<p>For any new project and / or change in service, it is a legal requirement to identify the potential impact an individual's right to confidentiality that might be affected by the project or process, identify the legal basis for processing identifiable information and ensure that appropriate measures are in place to mitigate against a breach.</p> <p>The completion of a Data Protection Impact Assessment (DPIA) and screening questions will enable JSCC and each participating CCG to ensure that Information is:-</p> <ul style="list-style-type: none"> • Held securely and confidentially • Obtained fairly and efficiently • Recorded accurately and reliably • Used effectively and ethically • Shared appropriately and lawfully

	<p>Initial screening questions are completed which alerts the project manager and IG Lead whether a full scale DPIA will need to be completed. If the answer to one or more of the screening questions is Yes, please arrange to complete the full DPIA with the Governance and Contract Manager and embed the completed Data Protection Impact Assessment within this document or provide a link to the completed DPIA.</p>
<p>Quality Impact Assessment</p>	<p>The Quality Impact Assessment (QIA) tool is a framework to assess the impact of proposed changes to commissioned services. Its purpose is to ensure any changes to commissioned services have a neutral or positive impact on the quality of care, patient experience as well as supporting value for money.</p> <p>Please embed the completed Quality Impact Assessment within this document or provide a link to the completed QIA</p>
<p>Conflict of Interests (Optional)</p>	<p>A conflict of interest occurs where an individual's ability to exercise judgement, or act in a role, is or could be impaired or otherwise influenced by his or her involvement in another role or relationship. The individual does not need to exploit his or her position or obtain an actual benefit, financial or otherwise, for a conflict of interest to occur e.g.</p> <ul style="list-style-type: none"> • direct financial interest • indirect financial interest (e.g. payment to a spouse) • non-financial interest (e.g. reputation) • conflicts of loyalty (e.g. in respect of an organisation of which the individual is a member or with which they have an affiliation) • personal or professional relationships with others e.g. where the role or interest of a family member, friend or acquaintance may influence an individual's judgement or actions, or could be perceived to do so. <p>Please embed the completed Conflict of Interest form within this document or provide a link to the completed document.</p>