

**Agenda item: 11**  
**Paper no: PCCCiC 36-18**

<b>Title of Report:</b>	Surrey Downs Finance Report Month 6 (September 2018)	
<b>Status:</b>	TO APPROVE	
<b>Committee:</b>	PCCCs in Common	<b>Date:</b> 09/11/18
<b>Venue:</b>	NWS CCG, 58 Church Street, Weybridge, Surrey. KT13 8DP	

<b>Presented by:</b>	Claire Fuller, Deputy CFO North West Surrey CCG	
<b>Executive Lead sign off:</b>	Karen McDowell, Chief Financial Officer	<b>Date:</b> 09/10/18
<b>Author(s):</b>	Claire Fuller, Deputy CFO North West Surrey CCG	

**Governance:**

<b>Conflict of Interest:</b> The Author considers:	None identified	✓
<b>Previous Reporting:</b> (relevant committees/ forums this paper has previously been presented to)	None	
<b>Freedom of Information:</b> The Author considers:	Open – no exemption applies	✓

**Executive Summary:**

This paper details the financial performance against the Primary Care and GP Forward view allocations to the end of September 18 (Month 6) for Surrey Downs CCG.

**Implications:**

What is the <b>health impact/ outcome</b> and is this in line with the <b>CCG’s strategic objectives</b> ?	Primary Care development	
What is the <b>financial/ resource</b> required?	As set out in this report	
What <b>legislation, policy or other guidance</b> is relevant?	n/a	

Is an <b>Equality Analysis</b> required?	n/a
Any <b>Patient and Public Engagement/consultation</b> required?	n/a
Potential <b>risk(s)</b> ? (including reputational)	All risks have been identified within the report

**Recommendation(s):**

<p>The Primary Care Commissioning Committee is asked to:</p> <ul style="list-style-type: none"> <li>(1) Note the risks and assumptions described within the report</li> <li>(2) Approve the forecast position as reported to NHSE at Month 6</li> </ul>
---

**Next Steps:**

--

**Surrey Downs CCG**  
**Primary Care Finance Report September 18 (Month 6 2018/19)**

**1. Overview of Month 6 Financial Position**

1.1. This report details the performance against the primary care and GP Forward view allocations to the end of September 18 (Month 6).

**2. Primary Care budgets**

2.1. The financial position for the Primary Care budgets at Month 6 is as follows;

	Annual Budget £000s	YTD Budget £000s	YTD Actual £000s	YTD Variance £000s	YE Forecast £000s	YE Variance £000s
Local Enhanced Services	3,549	1,774	1,889	115	3,620	72
Primary Care IT	744	372	371	(1)	743	(1)
Primary Care Team and Clinical Leads	564	282	302	21	605	41
Sub-total	<b>4,856</b>	<b>2,428</b>	<b>2,563</b>	<b>135</b>	<b>4,968</b>	<b>112</b>
Prescribing	38,284	18,948	18,810	(139)	38,125	(159)
Medicines Management	724	362	439	76	877	153
Oxygen	0	0	5	5	10	10
Drugs Costs Met Centrally	1,058	524	541	18	1,083	25
Out of Hours	1,735	867	871	3	1,742	7
Sub-total	<b>41,801</b>	<b>20,702</b>	<b>20,666</b>	<b>(36)</b>	<b>41,837</b>	<b>36</b>
Grand Total	<b>46,658</b>	<b>23,130</b>	<b>23,229</b>	<b>99</b>	<b>46,805</b>	<b>148</b>

**i. Locally Commissioned Enhanced Services**

2.2. Costs for local enhanced services are over plan at Month 6 by £115k, based on first quarter claims, forecast outturn of £72k by year end.

**ii. Primary Care IT**

2.3. Primary care costs are all shown in line with plan at Month 6.

**iii. Primary Care Team and Clinical Teams**

2.4. The Primary Care team costs are shown overspent by £21k and this has been forecast through to a year end overspend of £41k.

**iv. Practice Prescribing**

2.5. The Practice Prescribing Authority (PPA) data is received two months in arrears so this report is based upon actual expenditure for the first four months and an estimate for the following two months. The position includes dressings and other costs of prescribing, the

year to date is an underspend of £139k. At month 6 this has been forecast to an underspend of £159k by year end.

- 2.6. A QIPP plan of £2m has been set for Medicines Management. Performance against the programme is currently forecast to deliver in full for the year.

**v. Medicines Management Team**

- 2.7. An overspend against the budget of £76k at month 6, due to appointments to support medicines management QIPP delivery, this has been forecast to £153k by year end. This is offset by the delivery of the practice prescribing QIPP.

**3. GP Forward View**

- 3.1. NHS England's General Practice Forward View (GPFV) sets out the plans and investment to support sustainable transformation of primary care for the future. In support of this the CCG is expecting to receive a number of allocations in 2018/19 as detailed in the table below:

	CCG Baseline Funding £000s	In year allocation received £000s	Anticipated Funding £000s	Total £000s
Improving Access to General Practice	1,149	337		1,486
Locality Transformation Scheme	466			466
On-line Consultation		102		102
Reception and Clerical Training		52		52
GPFV Implementation Capacity			34	34
<b>Total GPFV Funding</b>	<b>1,615</b>	<b>491</b>	<b>34</b>	<b>2,140</b>

**a. Improving Access to General Practice**

The allocation of £1.486m is to enable the CCG to commission and fund extra capacity to ensure everyone has access to GP services, including sufficient routine, same day, evening and weekend appointments to meet local demand.

It has been agreed that the CCG will award an interim contract to provide extended access services to each of the Federations under a Single Tender Action for a period of up to two years during which the CCGs will undertake a formal procurement process in order to meet legal requirements.

Proposals have been received to ensure the CCG meets the nationally prescribed target of a minimum of 30 minutes additional consultation capacity per 1,000 head of population being achieved by October 2018.

#### **b. Locality Transformation Scheme**

The CCG is required to budget for £3 per head, non-recurrently across 2017-2019 for Practice transformation. This was split equally between 2017//18 and 2018/19 at £1.50 per year. Each locality has provided a business case for their share of the funding.

#### **c. Online Consultations**

An allocation of £102k has been received to contribute towards the cost of online consultation systems to improve access and make best use of clinician's time. A project team has been set up across Surrey Heartlands which will work with GP practices and other stakeholders to evaluate the current pilot (using e-consult) and to manage the future procurement and deployment of online consultation systems.

#### **d. Reception and Clerical Training**

An allocation of £52k has been received to train reception and clerical staff in both clinical administration tasks and in signposting patients to the most appropriate source of help in order to free up GP time from administrative tasks.

#### **e. Implementation Capacity**

An allocation of £34k is anticipated for 2018/19 to support the implementation of the GPFV.

### **4. Delegated Co-commissioning 2019/20**

- 4.1. The CCG has expressed an interest to manage delegated co-commissioning from April 2019. The member practices are voting on this issue and this is due to end at midnight on the 26<sup>th</sup> October. If members vote for the CCG to take on responsibility for local primary care commissioning then an application will be submitted to NHSE by the end of October.