

**Agenda item:** 14

**Paper no:** PCCC IC 12-19

<b>Title of Report:</b>	Surrey Downs Finance Report Month 8 (September 2018)	
<b>Status:</b>	To Note	
<b>Committee:</b>	PCCC in Common	<b>Date:</b> 11/01/2019
<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> 03/01/19
<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 November 18 (Month 8) 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):**

The Primary Care Commissioning Committee is asked to:

- (1) Note the risks and assumptions described within the report
- (2) Approve the forecast position as reported to NHSE at Month 8

**Next Steps:**

N/A

**Surrey Downs CCG**  
**Primary Care Finance Report November 18 (Month 8 2018/19)**

**1. Overview of Month 8 Financial Position**

1.1. This report details the performance against the primary care and GP Forward view allocations to the end of November 18 (Month 8).

**2. Primary Care budgets**

2.1. The financial position for the Primary Care budgets at Month 8 is as follows;

	Annual Budget £000s	YTD Budget £000s	YTD Actual £000s	YTD Variance £000s	YE Forecast £000s	YE Variance £000s
Local Enhanced Services	2,665	1,777	1,562	(214)	2,358	(307)
Primary Care IT	744	496	495	(1)	744	0
Primary Care Team and Clinical Leads	564	376	398	22	606	43
Sub-total	<b>3,973</b>	<b>2,649</b>	<b>2,455</b>	<b>(194)</b>	<b>3,708</b>	<b>(264)</b>
Prescribing	37,984	25,475	25,231	(244)	37,584	(400)
Medicines Management	724	483	572	89	871	146
Oxygen	300	200	202	2	300	(0)
Drugs Costs Met Centrally	1,058	710	723	13	1,079	21
Out of Hours	1,735	1,157	1,206	49	1,809	74
Sub-total	<b>41,801</b>	<b>28,024</b>	<b>27,933</b>	<b>(91)</b>	<b>41,643</b>	<b>(159)</b>
Grand Total	<b>45,774</b>	<b>30,673</b>	<b>30,388</b>	<b>(285)</b>	<b>45,351</b>	<b>(423)</b>

**i. Locally Commissioned Enhanced Services**

2.2. Costs for local enhanced services are under plan at Month 8 by £214k, based on second quarter claims, outturn of £307k underspend by year end.

**ii. Primary Care IT**

2.3. Primary care costs are all shown in line with plan at Month 8.

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

2.4. The Primary Care team costs are shown overspent by £22k and this has been forecast through to a year end overspend of £43k.

**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 six 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 £244k. At month 8 this has been forecast to an underspend of £400k by year end.

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

## v. Medicines Management Team

- 2.7. An overspend against the budget of £89k at month 8, due to staff appointments to support medicines management QIPP delivery, this has been forecast to £146k 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			26	26
<b>Total GPFV Funding</b>	<b>1,615</b>	<b>491</b>	<b>26</b>	<b>2,132</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.

A contract has been issued to GP Health Partners, Dorking Healthcare and Surrey Medical Network. 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**

A Heartlands wide allocation of £76k for 2018/19 to support the implementation of the GPFV has been invoiced to NHSE. The Surrey Downs share of this would be £26k but the funds will be utilised to provide Heartlands wide support to the GPFV programme.

**4. Delegated Co-commissioning**

- 4.1. The membership of Surrey Downs CCG voted for the CCG to take on responsibility for local primary care commissioning from April 19. An application has been submitted to NHSE for delegated co-commissioning.