

Meeting: Primary Care Commissioning Committee			
Meeting Date	23 March 2022	Action	Receive
Item No.	6	Confidential	No
Title	Month 11 Primary Care Finance Report		
Presented By	Carol Shannon-Jarvis Associate CFO		
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Clinical Lead	N/A		

Executive Summary

At Month 11, Primary Care and Delegated Co-Commissioning are together reporting a year to date underspend of £0.5m and forecast outturn underspend of £0.5m mainly as a result of benefits from prior year and underspends in ARRS.

Co-Commissioning is forecasting an underspend of £0.5m. This reflects the release of prior year benefits following confirmation of the final 20/21 QOF achievement, premises costs and the Impact and Investment Fund (IIF) and also reflects the underspends in ARRS which is netted off against forecasted spend due to be reimbursed to the CCG in Month 12.

Primary Care is forecasting an underspend of £0.4m, this is mainly as a result of prior year benefits following confirmation of final 20/21 income streams and expenditure.

Prescribing and Medicines Management is forecasting an overspend of £0.3m reflecting current forecasts of prescribing spend.

Recommendations

It is recommended that the Primary Care Commissioning Committee:

- Note the Month 11 financial position

Links to CCG Strategic Objectives

SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic.	<input type="checkbox"/>
SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery.	<input type="checkbox"/>
SO3 - To deliver improved outcomes through a programme of transformation to establish the capabilities required to deliver the 2030 vision.	<input type="checkbox"/>

Links to CCG Strategic Objectives	
SO4 - To secure financial sustainability through the delivery of the agreed budget strategy.	<input checked="" type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	
GBAF	

Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any financial Implications?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are there any associated risks including Conflicts of Interest?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>

Month 11 Finance Report

1. Introduction

1.1. This paper presents the current and forecast financial position at month 11 for 2021/22 of Primary Care Services and the budget delegated to the CCG from NHS England for Primary Care Commissioning.

2. Financial Position at Month 11

At Month 11, Primary Care and Delegated Co-Commissioning are together reporting a year to date underspend of £0.5m and forecast outturn underspend of £0.5m. This underspend is non-recurrent resulting from the finalisation of 20/21 outturn, receipt of income and release of prior year accruals, in particular, QOF Achievement and underspends on ARRS. The position also includes forecasted Winter Access Fund spend which the CCG expect to be reimbursed in Month 12.

In addition to baseline primary care and delegated co-commissioning budgets the CCG has received additional funding to support Improving access £1.2m, PCN development £0.1m, new enhanced services for long COVID £0.1m, GP COVID support funding of £0.4m and Winter Access Fund 0.4m.

Area	YTD Budget	YTD Actual	YTD Variance	Annual Budget	Forecast Outturn	Forecast Variance
General Practice - GMS	9,070	9,063	(6)	9,897	9,882	(15)
General Practice - PMS	7,845	7,839	(6)	8,560	8,552	(9)
General Practice - APMS	697	695	(1)	761	758	(2)
QOF	1,877	1,605	(272)	3,012	2,740	(272)
Premises, Voids & Subsidies	3,969	3,726	(243)	4,373	4,205	(168)
Primary Care Networks	2,413	2,175	(238)	2,671	2,412	(259)
Other GP Services	840	772	(68)	1,299	1,248	(51)
Winter Access Fund	316	476	160	316	595	279
Co-Commissioning	27,026	26,352	(674)	30,889	30,392	(497)
Quality in Primary Care	716	716	0	895	880	(15)
Primary Care Networks	407	407	(0)	458	458	0
Out of Hours	1,490	1,357	(133)	1,624	1,493	(131)
Primary Care IT	1,886	1,886	0	2,057	2,057	0
Other Primary Care	3,309	3,224	(86)	3,719	3,524	(195)
Primary Care Team	296	258	(38)	323	279	(43)
Winter Access Fund	47	47	0	51	51	0
Primary Care	8,152	7,894	(257)	9,127	8,742	(385)
Prescribing	29,865	30,241	376	32,802	33,041	239
Central Drugs	959	999	39	1,047	1,111	65
Oxygen	221	253	32	241	284	43
Medicines Management	383	375	(8)	418	408	(11)
Prescribing & Meds Mgt	31,428	31,867	439	34,508	34,844	336
Total	66,606	66,113	(493)	74,524	73,978	(546)

Co-Commissioning

- 2.1. Co-Commissioning is forecasting an underspend of £0.5m. This reflects the release of prior year benefits following confirmation of the final 20/21 QOF achievement, premises costs and the Impact and Investment Fund (IIF) and also reflects the underspends in ARRS which is netted off against forecasted spend due to be reimbursed to the CCG in Month 12.
- 2.2. Within the primary care baseline is £1.4m with an additional £1.1m available to claim from national funds for the recruitment of additional roles to support PCN's including pharmacists, paramedics and mental health practitioners. The forecasted spend is £1.1m reflecting a £0.3m underspend of ARRS money within CCG budgets in line with PCN plans. In Month 4 the CCG received claims for Q1 from PCN's for a total of £0.2m and in Month 11 the CCG received Q2 and Q3 claims for a total of £0.5m.

Primary Care

- 2.3. Primary Care is forecasting an underspend of £0.4m, this is mainly as a result of prior year benefits following confirmation of final 20/21 income streams and expenditure. Further underspends are seen in the primary care team as a result of held staff vacancies and on the care at the chemist service. Investment in this area includes for 21/22 the costs of the EMIS system roll out to practices.

Prescribing & Medicines Management

- 2.4. Prescribing and Medicines Management is forecasting an overspend of £0.3m. The overspend is attributable to prescribing costs for which we have actual cost and activity data to December. It should be highlighted that whilst on a budget of £32.8m this represents an overspend of 0.7% prescribing spend can be volatile particularly in winter and in the current environment in response to supply. Detailed monitoring therefore continues to be carried out and shared internally on a monthly basis.

3. Actions Required

Primary Care Commissioning Committee members are asked to:

- Note the Month 11 financial position.

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