

Item: 8.4

Report to:	Primary Care Commissioning Committee
Date of Meeting:	22/04/2022
Title of Report:	Primary Care Finance Report February 2022
Presented by:	Emma Sayner, CFO
Author:	Andrew Parsons, Finance Manager

STATUS OF THE REPORT:

To approve	<input type="checkbox"/>	To endorse	<input type="checkbox"/>
To ratify	<input type="checkbox"/>	To discuss	<input type="checkbox"/>
To consider	<input type="checkbox"/>	For information	<input type="checkbox"/>
To note	<input checked="" type="checkbox"/>		

PURPOSE OF REPORT:
The purpose of this report is to brief the Primary Care Commissioning Committee on the following area:

- Financial Position within the Primary Care Delegated Budgets at the end of February.

RECOMMENDATIONS:
The Primary Care Commissioning Committee is recommended to:

- Note the finance report as at the end of February 22.

REPORT EXEMPT FROM PUBLIC DISCLOSURE No Yes

If yes, detail grounds for exemption

CCG STRATEGIC OBJECTIVE *(See guidance notes on page 4)*

Delivery of Statutory Duties

IMPLICATIONS: (summary of key implications, including risks, associated with the paper),	
Finance	The financial report in this paper indicates an underspend position for 21/22 financial year.
HR	N/A
Quality	N/A
Safety	N/A

ENGAGEMENT: (Explain what engagement has taken place e.g. Partners, patients and the public prior to presenting the paper and the outcome of this)

No specific engagement activity has taken place.

LEGAL ISSUES: (Summarise key legal issues / legislation relevant to the report)

None

EQUALITY AND DIVERSITY ISSUES: (summary of impact, if any, of CCG's duty to promote equality and diversity based on Equality Impact Analysis (EIA). **All** reports relating to new services, changes to existing services or CCG strategies / policies **must** have a valid EIA and will not be received by the Committee if this is not appended to the report)

	Tick relevant box
An Equality Impact Analysis/Assessment is not required for this report.	✓
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section xx in the enclosed report.	

THE NHS CONSTITUTION: (How the report supports the NHS Constitution)

N/A

Section 1 - Primary Care Delegated Financial Position M11 21/22

1. INTRODUCTION

The purpose of this section of the report is to update the Primary Care Commissioning Committee on the financial position of the CCG within the Primary Care Delegated Budgets.

2. BACKGROUND

Committee members will be aware that the nature of primary care contracts is that the funding in the main follows the patients and is negotiated at a national level. This paper provides an update on the year to date (YTD) position for the Primary Care delegated budgets.

3. INFORMATION

Year to Date Performance

At month 11 the CCG has reported a year to date overspend of £315k within its Primary Care delegated budgets. The main causes of the variances listed in the table below are:

- APMS – Overspend due to quarterly list size adjustments increasing.
- Enhanced Services – Overspend due to higher spend on Learning Disability assessments than in the plan.
- PCN's – ARRS - Currently only 55.65% of the allocation in the financial plan, remainder of funding still with NHS England. CCG has drawn further funding down from this amount in M12.
- Dispensing/Prescribing Drs – Underspend due to seasonality variations. Also, the plan includes an estimate of tariff uplift.
- Premises – Underspend mainly due to a planned clinical waste cost increase has not materialised within the national contract. Instead, a direct contract award under existing price structure will progress.

<u>Delegated Primary Care</u>	Month 11 Year To Date Position		
	Budget	Actual	Variance
General Practice - GMS	16,483	16,477	6
General Practice - PMS	5,499	5,427	73
General Practice - APMS	6,058	6,260	(202)
Enhanced Services	256	304	(48)
PCN's	4,205	4,522	(317)
Dispensing/Prescribing Drs	221	142	79
Other GP Services	783	745	38
Premises Cost Reimbursement	7,127	7,006	121
Other Premises Costs	9	8	0
QOF	3,876	3,876	(0)
Local Enhanced Services	-	-	-
Other Services	697	762	(65)
Sub Total	45,215	45,530	315

4. RECOMMENDATIONS

It is recommended that the Primary Care Commissioning Committee note or comment, where appropriate on the CCG's financial position.