



Item: 8.4

Report to:	Primary Care Commissioning Committee			
Date of Meeting:	24/06/2022			
Title of Report:	Primary Care Finance Report March 2022			
Presented by:	Emma Sayner, CFO			
Author:	Andrew Parsons, Finance Manager			
STATUS OF THE R	REPORT:			
To appro	ve To endorse			
To ratify	To discuss			
To consid	der For information			
To note	✓			
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 March. RECOMMENDATIONS: The Primary Care Commissioning Committee is recommended to: • Note the finance report as at the end of March 22.				
REPORT EXEMPT FROM PUBLIC DISCLOSURE If yes, detail grounds for exemption No Yes				
CCG STRATEGIC Delivery of Statutory	COBJECTIVE (See guidance notes on page 4) / 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 t	he NHS	Constitution)
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N/A

Section 1 - Primary Care Delegated Financial Position M12 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 12 the CCG has reported a year to date overspend of £206k 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 Overspend on ARRS due to increase in value of M12 claims when compared with previous months. Also discrepancy between the budget set and the amount already received in primary care allocation resulted in a smaller amount "top up" amount drawn down from NHS England.
- 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.
- QOF estimate accrual included for achievement payment due to be paid in Jun-22.

Delegated Primary Care	Month	Month 12 Year To Date Position		
	Budget	Actual	Variance	
General Practice - GMS	17,982	17,981	1	
General Practice - PMS	5,999	5,911	88	
General Practice - APMS	6,609	6,837	(228)	
Enhanced Services	295	356	(61)	
PCN's	4,762	5,084	(322)	
Dispensing/Prescribing Drs	241	144	97	
Other GP Services	1,426	1,395	31	
Premises Cost Reimbursement	7,775	7,579	196	
Other Premises Costs	10	18	(9)	
QOF	4,228	4,371	(143)	
Local Enhanced Services	-	-	-	
Other Services	1,983	1,840	143	
Sub Total	51,310	51,517	(206)	

4. **RECOMMENDATIONS**

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