

NHS North Cumbria CCG Primary Care Commissioning Committee	Agenda Item
20 September 2018	8

Primary Care Budget Update

Purpose of the Report								
The purpose of the report is to provide the Committee with an update as to the latest position in relation to the GP Primary Care Budget being managed by the CCG.								
Outcome Required:	Approve		Ratify		For Discussion	X	For Information	X
Assurance Framework Reference:								
<p>1, Better Health – There is a need to ensure that Cumbria’s children & young people (including children looked after are kept safe and transition into health adulthood.</p> <p>2, Better Care – Commission services that ensure the delivery of high quality and safe care patients.</p> <p>3, Sustainability – Commission services that ensure the delivery of high quality and safe care for patients in a manner that is sustainable for the whole health economy.</p> <p>4, Leadership - The CCG needs to develop and implement robust governance and management arrangements to operate in a safe and sound manner.</p>								

Recommendation(s):
The Committee is asked to note the information contained within the report.

Executive Summary:
<p>Key Issues: NHS North Cumbria CCG received delegated responsibility for Primary Care Co-Commissioning (i.e. GP services) from 01 April 2017. This report provides a brief, high-level summary of the financial position relating to both the budget delegated by NHS England to the CCG and those areas where the CCG uses its allocated resources to invest in GPs and related services.</p> <p>Key Risks: The CCG continues to quantify and manage financial risk across North Cumbria at both</p>

organisational and system level. The Committee will recognise this when evaluating a component part of the wider budget.

Implications/Actions for Public and Patient Engagement:

There are no direct implications for Public and Patient Engagement arising from the issues contained within this paper.

Financial Impact on the CCG:

This is reflected in the attached report.

Strategic Objective(s) supported by this paper:	Please select (X)
Support continuous quality improvement within existing services including General Practice	
Commission a range of health services, including an increasing range of integrated services, appropriate to our population's needs	X
Develop our system leadership role (in the context of an integrated health and care system) and our effectiveness as a partner	
Continuously improve our organisation and support our staff to excel	

Impact assessment: (Including Health, Equality, Diversity and Human Rights)	n/a
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Conflicts of Interest Describe any possible Conflicts of interest associated with this paper, and how they will be managed	There are no identified potential conflicts of interest
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1. Introduction

At previous meetings the Primary Care Commissioning Committee has been provided with high level verbal updates as to the position in relation to the Primary Care budget. As noted at the last Committee meeting of 12th July a more detailed position is now presented in the report below.

2. Primary Care Budget

The CCG manages the Primary Care budget associated with the Primary Care Commissioning Committee under two distinct headings with a combined annual budget in excess of £50 million. The financial position as at 31st August (after 5 months of the financial year) is set out in the table below:

	Year to Date Budget £'000	Year to Date Actual Expenditure £'000	Year to Date Variance £'000	Previous Month Variance £'000
Devolved Primary Care (From NHS England)	19,189	19,262	73	1
Other Primary Care	2,663	2,459	(204)	(179)
Grand Total	21,852	21,721	(131)	(178)

2.1 Devolved Primary Care

From 1 April 2017 the CCG assumed delegated commissioning responsibilities for Primary Care budgets previously held by NHS England. The annual budget associated with the delegated responsibilities amounts to around £47 million.

The biggest component of these budgets (£31.3m) concerns the annual “contract” payments covering GMS, PMS and APMS contracts. These budgets show a broadly balanced position as at month 5 and the payments reflect the nationally agreed funding approach for the GP contract.

Other significant budgets under this heading include the budgets for the Quality and Outcomes Framework (QuOF) (£4.8m) and premises (£4.2m). The QuOF budget is currently showing a break even position, whilst the premises budget is showing a £32.9k overspend. The premises budget covers both rent and rates reimbursements to practices.

Other more modest budgets within the “Devolved Primary Care” include those for Directly Enhanced Services (£1.4m) (these include Extended Hours, Learning Disabilities, Minor Surgery and Violent Patients), and Other GP Services (£1.4m) (these include GP Retainer, Seniority, Locum and CQC Fees).

2.2 Other Primary Care

Payments made under this heading are more modest in magnitude and cover such areas as Local Enhanced Services (these include Anticoagulation, Near Patient Testing, Minor Injuries and Prostate Injections) and the Quality Incentive Scheme (QIS).

The CCG is reporting a £204k underspend against this budget at month 5. The underspend has arisen primarily through the actual outturn of 2017/18 Local Enhanced Services being £125k less than anticipated.

3. Recommendation

The Committee is asked to note the contents of the report.