

NHS Rotherham Clinical Commissioning Group

Primary Care Sub-Group – 27 April 2022

Primary Care Committee – 11 May 2022

Primary Care Financial Position: Period ending 31 March 2022

Lead Executive:	Wendy Allott, Chief Finance Officer
Lead Officer:	Louise Jones, Deputy Head of Financial Management
Lead GP:	Dr Avanthi Gunasekera, SCE GP Lead for Primary Care

Purpose:

To inform members of the financial position as at 31 March 2022.

Background:

The CCG received an allocation for H2 which has been added to the allocation for H1 and spend reported against both allocations across the 12 month period 1 April 2021 to 31 March 2022.

For primary care services, this combined H1 and H2 allocation is split into two areas;

- a) An allocation for delegated medical primary care services which is the responsibility of Primary Care Committee (PCC.) This totals £45.4m.
- b) An allocation for locally commissioned primary care services which is part of the CCG's core allocation and is reported to PCC for information only. This totals £8.1m.

Expenditure in this report is monitored against these allocations as at **31 March 2022**.

Primary Care Delegation Responsibility:

Does this paper relate to Rotherham CCG or delegated business?

Rotherham CCG	
Delegated	
Both Rotherham CCG and delegated	✓

Please indicate which area of delegated responsibility this paper covers:

Commissioning, procurement and management of GMS, PMS and APMS contracts including taking contractual action	
Newly designed enhanced services (including DES)	
Local incentive schemes	
Discretionary payments	
Commissioning urgent care for out of area registered patients	
Planning Primary medical care services (PMCS)	
Managing practices with CQC / quality concerns	
Decisions on premise cost directions	
Planning the commissioning of PMCS	
Manage the delegated allocation for commissioning of PMCS	✓
Assurance to the governing body on the quality and safety of PMCS	

Please indicate which of the Delegated Duties Decisions this paper requires:-

Delegated Duties – iii – Decisions in relation to the establishment of new GP practices (including branch surgeries) and closures of GP practices.	N/A
Delegated Duties – iv – Decisions about ‘discretionary payments’.	N/A
Delegated Duties – v – Decisions about commissioning urgent care (including home visits as required) for out of area registered patients.	N/A
Delegated Duties – b – The approval of practice mergers.	N/A

Analysis of key issues and of risks:

1. Financial Summary at 31 March 2022

(a) Delegated primary medical care services (PCMS)

At month 12 all outstanding allocations have been received and outturn against plan (1k overspend) is illustrated in Table 1 below;

Table 1	A	B	C
Primary Care Medical Services (1 April 2021 - 31 March 2022)	H1 Budget (1 April - 31 March)	Outturn (1 April - 31 March)	Year to date variance (B- A)
	£'000	£'000	£'000
Contract payments / QOF	30,762	30,674	(88)
LES's / ES's	2,703	2,689	(14)
PCN DES	5,363	5,372	9
Other GP Services	1,037	1,223	186
Premises	3,332	3,346	14
NHSPS - Voids and subsidies	609	609	0
Winter Access Fund (WAF)	1,127	1,127	0
Central budget & contingency	451	346	(105)
Grand Total	45,385	45,386	1

- The overspend on “other GP services” relates to locums and is offset by underspends in the central budget / contingency and underspends on contract payments / QOF due to list size growth being marginally less than budget and national income protection arrangements in place for QOF.
- £346k of the remaining contingency / central budget was utilised non recurrently to replace practice equipment and review maintenance agreements.
- Of the £3.5m available for additional roles workforce, £187k was not drawn down from NHSE central funds.

b) Locally commissioned primary care services

The outturn for locally commissioned primary care services is within plan (£22k underspend)

Table 2	A	B	C
Locally commissioned primary care services H1 (1 April-31 March 2021)	H1 Budget (1 April - 31 March)	Outturn (1 April - 31 March)	Year to date variance (B-A)
	£'000	£'000	£'000
GP information technology	1,558	1,558	(0)
CCG Local Enhanced Services (LES)	2,862	2,422	(440)
Reinvestment non recurrent LES underspend	0	400	400
Prescribing Local Incentive Scheme (LIS)	305	305	0
PCN Administration fee £1.50 p/head	397	397	0
Improving Access	1,631	1,632	1
Primary Care transformation (PCT) /other non recurrent funding	686	718	32
COVID Expansion Fund	543	541	(2)
COVID - Other	96	84	(13)
Grand Total	8,079	8,056	(22)

Table 2 above includes the following:

- £543k to extend the General Practice Covid Capacity Expansion Fund to 30 September.
- £507k primary care transformation funding comprising:
 - (i) £72k for online consultations
 - (ii) £132k for PCN development
 - (iii) £58k for GP IT infrastructure and resilience.
 - (iv) £38k for practice resilience.
 - (v) £194k Leadership and Management funding
 - (vi) £13k additional access funding

2. Non recurrent investment

The underperformance on local enhanced services is a combination of quarter 1 paid on block and activity for quarter 2 and 3 being less than anticipated across all services but mainly long term conditions, annual health reviews and serious mental illness (SMI). This underspend was reinvested back into primary care services along with £256k non recurrent funding. Outturn spend against this non recurrent funding is stated in table 3 below:

TABLE 3 - Non recurrent funding	£'000
Source of Funds:	
LES underperformance	400
Share of £2.6m system surplus	256
Total source of funds	656
Application of Funds :	
Practice Equipment (BP/ Feno / ECG etc)	260
Security costs > NHSE funding	50
Business as usual (BAU) bids	175
Additional Vocational Training Scheme placements	93
Additional telephony	38
Total application of funds	616
Reference to NHSE Primary Medical Care Policy and Guidance Manual (PGM):	
N/A	
Patient, Public and Stakeholder Involvement:	
No new issues	
Equality Impact:	
N/A	
Financial Implications:	
Outlined in the report	
Human Resource Implications:	
N/A	
Procurement Advice:	
N/A	
Data Protection Impact Assessment:	
N/A	
Approval history:	
N/A	
Recommendations:	
Members of the Primary Care Committee are asked to;	
<ul style="list-style-type: none"> note the reported outturn financial position and supporting information. 	
Paper is for noting.	