

Primary Care Medical Period 12 Financial Performance Report for West Norfolk CCG

1. Background

- 1.1. March 2017 Co-commissioning Budget Update (final month in which the budgets were held by NHS England)
- 1.2. In 2016/17 joint commissioning arrangements were limited to general practice services. The following report provides an overview of the budgets associated with the CCG and the context within the overall Primary Care Medical financial position. Future period reporting will be owned by the CCG as full delegation took effect on 1 April 2017.
- 1.3. The following table summarises the Primary Care Medical Budget allocated to the CCG.

West Norfolk CCG Primary Care Medical Budget Allocations

	2015-16		2016-17		2017-18		2018-19	
	Baseline including adjustments and previous BCF funding	Final Allocation after place based pace of change	Final Allocation after place based pace of change	Final Allocation after place based pace of change	Final Allocation after place based pace of change	Final Allocation after place based pace of change	Final Allocation after place based pace of change	
	£000	£000	£000	£000	£000	£000	£000	
West Norfolk CCG Allocations	27,026	27,811	28,089	28,405				

- 1.4. The majority of the GP contracting budgets within East are allocated at specific practice level therefore it is possible to reflect these accurately at a CCG level. Where this is not the case or relates to non-GP providers which are not directly linked to geographical areas apportionment methodologies have had to be adopted the majority of which is based upon contractor weighted populations.
- 1.5. Contractual contains General Practice GMS, PMS and other list based services relate to contract, list size driven budgets allocated to practice level. They include global sum, MPIG, contract values, PMS premium/growth and seniority budgets. These budgets, with the exception of the PMS premium treatments are driven by contractual obligations.
- 1.6. Premises include budgets for rent, rates and water charges. Premises budgets are also allocated on a contractual basis and have very little scope for local influence other than through commissioner decisions around investments in buildings or estate rationalisation.
- 1.7. Enhanced Services are budgeted on the basis of historic achievement for the ad-hoc smaller payments or recognising the potential full achievement for those which are list size/patient driven for the practices that have signed up to the particular SLAs, e.g. extended hours and avoiding unplanned admissions. Payment is based upon achievement so variances can exist from budget. Practices had a deadline of the end of June to register for 2016-17 enhanced services.
- 1.8. Quality outcomes Framework (QOF) aspiration payments are based upon 70% of the previous year's achievement adjusted for year on year points and price changes. Budgets are set in line with this and pro rata to reflect final forecast achievement. As payment is based upon achievement this means that the CCG may have a financial risk or benefit depending on future practice achievement.

1.9. Other – GP Services include budgets and payments for seniority, dispensing & prescribing professional fees and locum allowances such as for maternity & paternity cover. Budgets for the locum allowances are not usually allocated at practice level at the start of the year as claims can be difficult to forecast.

1.10. Material items which are not easily identifiable at a practice level because they are paid direct to other organisations are as follows. For these items assumptions have been made around apportionment methodologies.

- Clinical Waste
- Discretionary Payments
- Other GP Related services such as Occupational Health contracts
- Procurement Support
- GP Suspension Budget
- Translation services

1.11. Throughout the year budgets were reviewed and virements actioned to better reflect financial plans. This will result in transfers between the budget lines not allocated at practice level and those which are.

1.12. QIPP targets associated with GP contracting are contained within the current indicative figures where appropriate and delivery will form part of future monitoring reports.

2. Period 12 Budget Monitoring

2.1. This report provides an update on the financial performance against Primary Care Medical budgets of member practices as at Period 12 (March 2017). The following provides a summary of the expenditure versus the detailed budgets associated with West Norfolk CCG GP Practices.

2.2. The CCG has been allocated shares of budgets not held at practice level, earmarked reserves and contingencies. These budgets are currently not shown within the year to date position below.

2.3. Appendix 1 details further the year end position and practice level out-turn, providing an explanation of the significant variations from plan. A number of the current month variances are the result of ledger adjustments which have corrected issues accumulated over recent months. The financial information is presented on a practice level basis and then broken down by expenditure type. A summary for the CCG is as follows.

Expenditure Summary for West Norfolk For period 12 - 2016 - 17				
Row Labels	Sum of YTD budget (£)	Sum of YTD Actual (£)	Sum of YTD Variance (£)	Comments
Contractual	16,402,500	16,342,521	- 59,979	
Enhanced services	1,357,221	1,383,785	26,564	
Other - GP Services	3,243,300	3,433,262	189,962	St Johns - £90k Exceptional Funding, Indemnity Uplift £83k 1516 & 1617 assistance
Premises cost reimbursements	2,564,700	2,675,483	110,783	Rent Reviews
QOF	2,623,900	2,658,646	34,746	St Johns - QOF 1516 Overpayment
TPS and Pension	-	3,387	3,387	
#N/A	738,100	741,518	3,418	
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Grand Total	26,929,721	27,231,828	302,107	

1.1. At period 12 the practices within the CCG were reporting a £302k year to date overspend predominantly due to the reasons in the table above.

All other variances have explanations at practice level in the following tables.

2. **Recommendation**

2.1. The Committee is asked to note the Month 12 financial performance position.

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NHS England – Midlands and East – East

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Agenda item 17.47

Financial Performance by Practice for West Norfolk For period 12 - 2016 - 17					
	Sum of YTD budget (£)	Sum of YTD Actual (£)	Sum of YTD Variance (£)	Sum of Annual budget (£)	Comments
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PMS					
D82044 - VIDA HEALTHCARE	4,630,900	4,622,777	(8,123)	4,630,900	
D82099 - SOUTHGATES	1,925,850	1,946,067	20,217	1,925,850	
D82035 - UPWELL HEALTH CENTRE	1,750,450	1,744,722	(5,728)	1,750,450	
D82051 - ST JAMES MEDICAL PRACTICE	2,096,071	2,104,424	8,353	2,096,071	
PMS Total	10,403,271	10,417,990	14,719	10,403,271	
GMS					
D82070 - GREAT MASSINGHAM SURGERY	1,216,900	1,231,522	14,622	1,216,900	
D82010 - GRIMSTON MEDICAL CENTRE	884,450	890,238	5,788	884,450	
D82043 - WATLINGTON MEDICAL CENTRE	1,052,200	1,010,013	(42,187)	1,052,200	
D82049 - LITCHAM HEALTH CENTRE	732,400	773,274	40,874	732,400	
D82057 - CAMPINGLAND SURGERY	1,168,100	1,182,715	14,615	1,168,100	
D82065 - MANOR FARM MEDICAL CENTRE	1,300,300	1,310,055	9,755	1,300,300	
D82072 - BURNHAM SURGERY PE31 8DH	849,600	853,137	3,537	849,600	
D82079 - FELTWELL SURGERY	887,650	907,110	19,460	887,650	
D82621 - PLOWRIGHT MEDICAL CENTRE	1,304,000	1,321,376	17,376	1,304,000	
D82015 - BRIDGE STREET SURGERY PE38 9DH	1,210,400	1,201,299	(9,101)	1,210,400	
D82027 - HEACHAM GROUP PRACTICE	1,214,600	1,244,592	29,992	1,214,600	
D82068 - HOWDALE SURGERY	1,061,800	1,088,515	26,715	1,061,800	
D82105 - ST CLEMENTS SURGERY PE34 4LZ	1,037,900	1,042,115	4,215	1,037,900	
D82604 - BOUGHTON SURGERY	536,350	515,156	(21,194)	536,350	
D82618 - WOOTTON SURGERY	634,200	634,391	191	634,200	
GMS Total	15,090,850	15,205,508	114,658	15,090,850	
APMS					
Y00297 - THE HOLLIES SURGERY PE38 9JE	600,600	606,874	6,274	600,600	
Y03222 - ST JOHNS SURGERY PE14 7RR	835,000	1,001,456	166,456	835,000	
APMS Total	1,435,600	1,608,330	172,730	1,435,600	
#N/A					
-					
#N/A Total					
Grand Total	26,929,721	27,231,828	302,107	26,929,721	

