

M12 (March) Position Buckinghamshire CCG

















Month 12- End of Year Overview

- Reported an in year surplus of £139k and a carried forward deficit of £(3,028)k (subject to audit)
- Cash target of 1.25% based on M11 cash drawn down (£63m x 1.25% = £788k) met with a closing bank balance of £114k
- Better Payment Practice Code The Better Payment Practice Code requires the Clinical Commissioning Group to aim to pay 95% of all valid invoices by the due date or within 30 days of receipt of an invoice, whichever is later.

	Number	Value
Non NHS	96.24%	99.15%
NHS	98.42%	99.89%

Similar to 19/20 performance at 99%

- All Covid expenditure of £31.5m fully funded of which the main elements:
 - Hospital Discharge Programme £23.0m
 - Hot hubs/visiting services etc £3.5m
 - GP support including infection control, backfill, additional hrs, digital services, text messaging etc £5m

Month 12 - Overview

- No Change to Phase 3 Finance Regime as previously reported. The current allocation is £843.2m.
- Reported position to NHSE and forecast are:

	YTD £000's
Planned Deficit	(4,989)
In Year Surplus	5,128
Reported BAU In year surplus	139
Historic Deficit B/fwd	(3,167)
Reported Position	(3,028)

- Hospital Discharge Programme is fully covered with allocations from NHSE.
- For M11 the historic deficit has been included in the allocations but there is no requirement for the CCG to repay in 20/21.

Summary

• The following table shows the overspend position by area:

	Annual Plan £'000	Plan to Date £'000	Actual £'000	Varianc e £'000
Allocation	843,178	843,178	846,345	(3,167)
Commissioning				
Planned and Unscheduled Care	420,197	420,197	418,824	1,373
Prescribing	74,874	74,874	74,526	348
Mental Health & Joint Care	73,971	73,971	73,489	482
Community	63,195	63,195	63,404	(209)
Continuing Healthcare	67,110	67,110	66,152	958
Delegated Co-Commissioning	75,963	75,963	75,963	0
Primary Care IT	2,326	2,326	3,322	(996)
Other / Reserves	63,687	63,687	60,542	3,145
Commissioning sub-total	841,323	841,323	836,222	5,101
Running Costs	10,011	10,011	9,984	27
Total CCG Expenditure	851,334	851,334	846,206	5,128
Planned deficit in year	(4,989)	(4,989)	0	(4,989)
Historic Deficit c/fwd	(3,167)	(3,167)	139	(3,028)



COVID

	M7-12 Plan <u>£</u>	YTD (Actual) <u>£</u>	Variance <u>£</u>
- BOB PPE cell - Practice Claims - Easter Opening - Text Messages	620,000 - 75,000	638 103,927 - 35,679	638 (516,073) 0 (39,322) 0
 Remote digital services/service changes Timing Differentials CHC assessment costs 	504,431	397,735 1,117,535 416,000	(106,696) 1,117,535 0
Covid Line/Triage Swabbing Services Hot Hubs Visiting Service Clinical and Operation On - Call Other	1,995,727	1,539,644	(456,083)
CCG covid	3,611,158	3,611,158	0
- HDP (CCG) - HDP (BC)	_	7,528,974 1,834,993	
HDP claim YTD 6-12		9,363,968	

- M1 to M6 costs have been fully funded retrospectively at £17.2m
- M7 to 12 is funded in the CCG baseline (by separate allocation of £3.6m
- HDP total claim funded retrospectively of £9.4m
- In addition to the funding shown in the table the CCG received a Primary Care allocation badged as COVID for GP capacity £1.3m
- All expenditure fully funded





Appendix



Explanation of Overspends

Out turns M12

Area	Comment	M12 Forecast Variance
Acute Services	Release of credit note for London Providers £723k, under activity £483k for BPAS, TV Vasectomy and EoL re Thames Valley Hospice off set with pressure in NCA partly relating to Diabetic pumps £(455)k. Accruals from 19/20 not utilised and released into the position £621k.	1,373
Mental Health	The forecast underspend of £482k includes an overspend due to increase in S117 activity of £(504)k offset with and underspend in MHNCA activity of £273k - being lower than previous year. LD NCA/OATS is seeing lower activity than previous year with an underspend of £736k for the Spec combudget now not required. Other pressures - prior year allocation adjustment £(23)k.	482
Community Services	Community Equipment showing a small underspend of £144k due to cost of wheelchairs falling due to a higher % of returns that is now offsetting pressures seen in Continence products although Health equipment is overspending due to increased activity. The community stock in the balance sheet has been reduced by £(1,113)k to reflect issues that COVID has brought regarding return and recycling of stock and thus written off. The remainder of the underspend is relating to other \$75 £11k, the audiology service which has been impacted by COVID with lower activity £692k and release of MSK performance budget not required of £475k.	(209)
Continuing Healthcare	Underspend relates to the impact of increase RIP and a reduction in activity. Any in year pressures relate to COVID (HDP) that is funded following assessment that conversion rate is lower than expected so therefore the anticipated growth originally thought would occur in the plan is now bot required. We suspect there will be a risk that this growth may materialise in 21/22. The forecast includes an accrual to cover expected appeals generated by the deferred assessments etc.	958
Prescribing	The PPA for January (being 2 months behind) has seen growth reduced from 13.1% to 2.8% making a ytd average growth of 6.2%. The CCG is expecting the growth percentage to return back to 8.6% (if not higher) in future months relating to activity/price/NCSO/COVID/Brexit pressure. The	348
GPIT	forecast includes the additional £2.8m included in planned deficit. Pressure identified in GPIT relates to project costs covering LCHRE, HSCN, GP migrations and mergers not reflected in budget due to the financial regime.	(996)
Other Primary Care	The majority of the underspend overspend relates to the capital charges, release of allocations not required covering budget adjustments from planning, increased revenue for Milton Keynes Council and a reduction in Exceptions activity off set by accruing in some provision for recharges	3,145
Delegated Co Commissioning	Expected to breakeven	О
Running Costs	Underspend net result of vacancies and re investment.	27
Total	In year deficit	5,127
Plan	Planned deficit	(4,989)
Total Position		139



