

**Joint Primary Care Co-Commissioning Committee Operational Group –  
Oxfordshire CCG**

<b>Date of Meeting:</b> 16 <sup>th</sup> June 2022	<b>Paper No:</b> 22.06.06a
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<b>Title of Presentation:</b> Primary Care Finance Report - Month 12 (March 2022)
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<b>Is this paper for</b>	<b>Discussion</b>	<input checked="" type="checkbox"/>	<b>Decision</b>	<input type="checkbox"/>	<b>Information</b>	<input checked="" type="checkbox"/>
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<p><b>Purpose and Executive Summary (if paper longer than 3 pages):</b></p> <p>To brief OPCCOG on the financial performance against Primary care budgets for 2021-22 to Month 12 (March).</p>
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<p><b>Financial Implications of Paper:</b> There are no direct financial implications as a result of this paper.</p>
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<p><b>Action Required:</b> OPCCOG is asked to review the reported position (M1-12) and to consider whether risks were managed effectively during 2021-22.</p>
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<b>NHS Outcomes Framework Domains Supported (please tick ✓)</b>	
<input type="checkbox"/>	Preventing People from Dying Prematurely
<input type="checkbox"/>	Enhancing Quality of Life for People with Long Term Conditions
<input type="checkbox"/>	Helping People to Recover from Episodes of Ill Health or Following Injury
<input type="checkbox"/>	Ensuring that People have a Positive Experience of Care
<input type="checkbox"/>	Treating and Caring for People in a Safe Environment and Protecting them from Avoidable harm

<b>Equality Analysis completed</b> (please tick and attach)	Yes	No	Not applicable ✓
<b>Outcome of Equality Analysis</b>			

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# CCG Finance Report for OPCCOG At 31st March 2022

## 1 Executive Summary and Dashboard

This report sets out the financial performance of the CCG to 31 March 2022. The CCG achieved a small surplus of £91k compared to a target breakeven position. All financial business rules were complied with i.e. running cost allocation not exceeded, cash targets met and Better payment and MHIS targets were also met.

The budgets shown in this paper are in line with the revised plans submitted for the BOB ICS in November 2021 and include any further allocations from NHS E since that time. The CCG continued to operate under an extension of the revised financial regime due to the Covid-19 pandemic.

The main variances to the M11 forecast relate to release of ICS funds from Other Programme to cover the additional contributions to the BCF Pool, an increase to the Prescribing overspend based on the BSA figures and an increased underspend on Running costs. The treatment of the costs of the medicines management team was brought into line with the other BOB CCGs i.e. shown as a programme cost which resulted in a reduction to running cost expenditure.

**Table 1: In Year key financial targets**

Indicator	Target	Actual	RAG
Actual Outturn M12	Breakeven	Underspent £91k	✓
Running Cost Outturn	Breakeven	Underspent £239k	✓
Savings Forecast Outturn	£4.3m	£2.3m	✗
Mental Health Investment Standard achieved	4.33%	5.48%	✓
Better payment Practice code NHS by value	95%	100%	✓
Better payment Practice code Non NHS by value	95%	96%	✓
Note: Cash drawn down to date as % of Maximum Cash Drawdown	100.00%	99.50%	✓

NB. The YTD and FOT figures included in the dashboard above are the final reported figures to NHS E and include further reimbursement for Hospital Discharge Programme £628k, Virtual Wards £543k, Additional Roles Reimbursement Scheme (ARRS) £62k, and Vaccine Programme £10k. The closed ledger position does not show this income.

**Please note:** Throughout this report over spend variances are shown as positive figures, under spend variances are shown as negative figures.

## 2 Financial Performance – Primary Care Delegated Co-Commissioning

Table 2

	Budget Month 12 £'000	Actual Month 12 £'000	Variance Month 12 £'000
GP GMS Contract payment	66,508	68,098	1,590
GP PMS Contract payment	1,291	1,304	13
GP APMS Contract payment	822	799	(23)
GP QOF payments	9,571	9,571	0
GP Seniority and Locums	1,816	1,917	101
GP Drug payments	4,732	4,351	(381)
GP Premises	11,695	11,695	0
GP Enhanced Services	1,151	1,151	0
PCN Additional Roles	6,234	6,234	0
PCN Enhanced Services	5,400	5,432	32
GP Other Items	272	65	(207)
Collaborative Fees	155	99	(56)
GP Premises other	77	177	100
GP Winter Access Fund (WAF)	3,758	3,758	0
WAF-GP Capacity Expansion Fund	296	296	0
<b>Total Delegated Co-Commissioning</b>	<b>113,777</b>	<b>114,947</b>	<b>1,170</b>

### Key Points:

Table 2 summarises the budget and financial performance of Primary Care Delegated Co-Commissioning. The budget is based on the CCG notified funding Allocation for the delegated functions.

The funding envelope available for H1 and H2 is detailed in the table below:

Notified Envelope	H1	H2	Annual
	£'000's	£'000's	£'000's
Notified Allocation	50,212	50,212	100,424
Notified Growth	1,976	1,976	3,952
PCN Investment & Income Fund	302	302	604
PCN Care Home Premium	315	315	630
National contract changes	144	144	288
National QOF Changes	488	488	976
Long Covid Des funding - M5	386	0	386
WAF-GP Capacity Expansion Fund M7	0	296	296
PCN Investment & Income Fund M8	0	1,184	1,184
Cervical Screening Audit	0	2	2
Covid Exemption-Medical Assessment Reviews	0	6	6
Weight Management Enhanced Service	0	46	46
PCN ARRS M12	0	1,225	1,225
GP Winter Access Funding M8/M10/M12	0	3758	3,758
<b>Totals</b>	<b>53,823</b>	<b>59,954</b>	<b>113,777</b>

The total funding for the year 2021/2022 is £113,777k.

Overall, the position at month 12 is £1,170k above plan for Delegated co-commissioning. This is mitigated by an underspend in the CCG Primary care investment budget.

- GP contracts £1,580k above plan – this is driven by actual population growth in excess of ONS population growth estimates used in the Primary Care funding allocation formula.
- Seniority and Locums £101k above plan – this is driven by Section 96 claims received for financial assistance. A practice in the North of the county was supported while the CCG worked with them to find a sustainable solution to recruitment and premises challenges. Two Oxford City practices were supported while the CCG worked with them to work through the challenges of a GP bereavement and CQC inspection recommendations respectively.
- GP Premises other £100k above plan driven by one off premises development costs
- PCN Enhanced Services £32k above plan due to population growth.
- GP Drugs Professional Fees £381k below plan due to a reduction in the dispensing fee rate from October 2021.
- Collaborative Fees £56k below plan due to the impact of Covid on claim activity.
- GP Other Items - £207k below plan. Unutilised prior Year balances released into the M12 position to mitigate expenditure above plan in other areas.

### 3.1 Adjustments

Additional funding was received in M12 from NHSE for PCN ARRS and WAF to match the reported annual forecast at M11.

#### PCN ARRS 2021/22

Resource	Funding Allocated	Centrally Held Funding	Total Funding Available
	£'000's	£'000's	£'000's
<b>Annual</b>	4,947	3,943	8,890

Expenditure	Plan	Actual	Variance
	£'000's	£'000's	£'000's
<b>Annual</b>	5,009	6,233	-1,224
<b>YTD M11</b>	5,009	5,670	-661

### 3 Financial Performance – CCG Primary Care

Table 3

	Budget	Actual	Variance
	Month 12 £'000	Month 12 £'000	Month 12 £'000
Locally Commissioned Schemes (LCS)	3,230	3,309	79
Covid Reimbursements	1,441	1,441	(0)
Local Investment Schemes (LIS)	468	449	(19)
Primary Care Investment	4,066	2,781	(1,285)
Primary Care Networks	1,598	1,273	(325)
Primary Care Transformation (GPFV)	5,401	5,621	220
Out of Hours	7,227	7,166	(61)
GP IT	1,751	2,022	271
Health Informatics	2,422	2,662	240
<b>Sub Total Primary Care</b>	<b>27,605</b>	<b>26,725</b>	<b>(880)</b>
Oxygen	689	725	36
Centrally Funded Drugs	2,588	2,764	177
Medicine Management Clinical Prescribing	0	411	411
Prescribing	93,681	95,811	2,130
<b>Sub Total Prescribing</b>	<b>96,957</b>	<b>99,711</b>	<b>2,754</b>
<b>Total</b>	<b>124,562</b>	<b>126,436</b>	<b>1,874</b>

#### Key Points:

Table 3 summarises the financial performance of those areas of expenditure that are incurred in primary care settings and are the commissioning responsibility of the CCG.

- Overall core CCG primary care budgets (excluding prescribing) were underspent by £880k at Month 12.
- The Primary care investment budget was more underspent than previously forecast but this mitigates overspends elsewhere in primary care.
- GPIT/Health Informatics is overspent mainly due to additional charges of £663k from Frimley ICS for LHCR services.
- The Primary Care Prescribing position reflects data received from the Business Services Authority (BSA) but with a two-month time lag. The CCG had received Month 10 actual data for 2021-22 which shows a deterioration in the overspend to £2,130k (M11 FOT £1,411k).
- The Medicines Management team has been recoded from running costs to programme costs to align with the treatment by the other BOB CCGs.