



Primary Care Update

PRIMARY CARE UPDATE

Hambleton, Richmondshire and Whitby CCG

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NHS ENGLAND – North (Yorkshire & The Humber)

Report for: Primary Care Commissioning Committee – Hambleton, Richmondshire and Whitby CCG

Report from: NHS England

Report Title: Primary Care Update

Practice (PMS or GMS)	Update	Action
1. Resilience Funding	<p>GP Practices were asked to submit applications for this year's resilience funding to support vulnerable practices by 20th July 2017. Hambleton, Richmondshire and Whitby CCG received 9 bids all of which were supported by the CCG. All bids then went to a local NHS England panel for approval and consistency across the area. The following scheme was approved</p> <ul style="list-style-type: none">Harewood Medical Practice- £6,000 – Funding for specialist advice and guidance through a change management consultant. <p>Funding in support of bids for nurse prescribing back fill or course fees is still being considered by NHS England.</p>	To Note
2. Clinical Pharmacist	<p>The first waves of applications for the clinical pharmacy programme have been assessed and over 730 sites, covering nearly 6 million patients, will benefit from the skill mix and knowledge that clinical pharmacists bring to general practice.</p> <p>Applications through Wave 2 of the scheme have now been assessed by a local panel. 5 applications were received from the North Yorkshire and Humber locality, 3 of which were approved at a local level and were passed forward for further assessment by a regional and national panel. One of the 3 forwarded for further approval was an application from Whitby Group Practice on behalf of the 5 Whitby based practices (Whitby Group Practice, Egton Surgery, Danby Surgery, Sleights and Sandsend Medical Practice and Staithes Surgery). The scheme which will cover a total population of 26,000 patients has now been approved by the regional and national panels.</p> <p>Whitby Medical Group have been informed their application is successful and are looking to recruit one whole time equivalent Senior Clinical Pharmacist before the end of the year.</p>	To Note
3. Extended Access Directed Enhanced Service (DES)	<p>The Primary Medical Services (Directed Enhanced Services) Directions 2017 have been amended as part of the 2017/2018 contract negotiations. As a result of this the new Extended Access Directed Enhanced Service (DES) came into force on 1st</p>	To Note

	<p>October 2017. The new arrangements disqualify any practices operating half-day closures (half-day defined as 3 hours or more) on a regular basis (regular being half-day every week or any other regular pattern) from receiving any additional funding for delivering the Extended Access DES.</p> <p>NHS England contacted all GP Practices whose e-declaration submission indicated the practice closed for at least half a day a week to understand how the change in regulation would affect the practice. In Hambleton, Richmondshire and Whitby 4 practices were identified who all had reciprocal arrangements in place with neighbouring practices to ensure their patients could access services during the period of closure.</p> <p>The NHS England national team have since confirmed that this is not considered acceptable and that no flexibility should be allowed in allowing practices to sign up to provide extended hours where practices are operating half day closures. The NHS England local team have made the practices aware.</p> <p>Any further updates will be provided at the meeting</p>	
4. Full Delegation	<p>The CCG deadline for applying for fully delegated commissioning of Primary Care is 1st November 2017. CCGs have been made aware of this deadline and provided with a weblink to the relevant web page and application pro forma.</p> <p>NHS England confirmed to the CCG in a meeting in August that the CCG would not enter fully delegated commissioning with a deficit.</p>	To Note
5. Finance Update	2017/18 month 5 position below	To Note

Co-com mapping	Annual budget (£)	YTD budget (£)	YTD Actual (£)	YTD Variance (£)	Forecast (£)	Forecast Variance (£)
Dispensing/Prescribing Drs	2,168,963	903,690	885,068	-18,622	2,168,963	0
Enhanced Services	504,005	209,865	207,470	-2,395	504,005	0
General Practice - GMS	10,798,590	4,499,325	4,485,769	-13,556	10,798,590	0
General Practice - PMS	2,614,141	1,089,209	1,080,577	-8,632	2,614,141	0
Other GP Services	62,327	25,804	264,466	238,663	62,327	0
Other Premises Cost	3,850	1,595	1,604	9	3,850	0
Premises Cost Reimbursement	2,163,715	901,374	901,519	144	2,163,715	0
QOF	2,020,840	841,915	863,820	21,905	2,020,840	0
Grand Total	20,336,430	8,472,777	8,690,293	217,516	20,336,430	0

Category	Subjective code description	Annual budget (£)	YTD budget (£)	YTD Actual (£)	YTD Variance (£)	Forecast (£)	Forecast Variance (£)
Contingency	AI-Non Pay General Reserves	-686,066	-285,861	0	285,861	-686,066	0
Contingency Total		-686,066	-285,861	0	285,861	-686,066	0
Needles & Syringes	Sterile Products	2,773	1,155	989	-167	2,773	0
Needles & Syringes Total		2,773	1,155	989	-167	2,773	0
Occupational Health	Hcare Srv Rec Fdtn Trust-Non Contract	2,300	958	1,926	967	2,300	0
Occupational Health Total		2,300	958	1,926	967	2,300	0
PCO Admin	C&M-PMS PCO Locum Adop/Pat/Mat	12,133	5,055	0	-5,055	12,133	0
	C&M-PMS PCO Locum Sickness	34,144	14,225	0	-14,225	34,144	0
	C&M-GMS PCO Doctors Ret Scheme	14,361	5,975	13,207	7,232	14,361	0
	C&M-GMS PCO Locum Adop/Pat/Mat	116,917	48,700	6,804	-41,896	116,917	0
	C&M-GMS PCO Locum Sickness	0	0	33,741	33,741	0	0
	C&M-GMS PCO Seniority	227,843	94,885	110,420	15,535	227,843	0
	C&M-PMS PCO Seniority	38,267	15,940	15,127	-813	38,267	0
	C&M-PMS PCO Other	21,268	8,855	8,862	7	21,268	0
	C&M-GMS PCO Other	102,868	42,830	42,862	32	102,868	0
PCO Admin Total		567,801	236,465	231,022	-5,443	567,801	0
Indemnity Costs	Clinical&Medical- Clinical Other	73,384	30,530	30,530	0	73,384	0
Indemnity Costs Total		73,384	30,530	30,530	0	73,384	0
PH / CCG Funding Support	AI-Non Pay Flexibility Reserve	102,135	42,556	0	-42,556	102,135	0
PH / CCG Funding Support Total		102,135	42,556	0	-42,556	102,135	0
Grand Total		62,327	25,804	264,466	238,663	62,327	0

Narrative

Dispensing Doctors

This data is 2 months in arrears and as such the accruals for July & August are based on 16.17 costs at current 17.18 prices and volume increase assumption based on national increases, however this spend is volatile.

The budget in the ledger is phased in 12ths, however this spend is seasonal.

Enhanced Services & DSQS:

These have been accrued based on the following:

Minor Surgery / Violent Patients / Learning Disabilities = Accrued based on current expected sign up / spend expectation based on 16.17 accounts + tariff increase for LD, finalisation of 16.17 actual costs still ongoing.

Extended Hours = Accrued based on sign up. The practices that we were expecting to sign up have done. 1.1K overspend YTD.

Unplanned Admissions – This scheme ceased on 31 March 2017, however finalisation of 16.17 payments is ongoing.

DSQS – Accrual based on expected 17.18 sign up at present pending confirmation.

GMS:

Global Sum is per current actual list sizes to date. The variance on GMS relates to: --23K = Global Sum per list size.

MPIG is per actual costs for current contracts. £9.5K overspend YTD.

PMS:

The variance on PMS relates to :- -9.1k=List Size adjustment slippage. 0.4K overspend YTD on out of hours.

Other GP Services:

Contingency

There is a Contingency budget of £102K and a QIPP target of -686K.

For Information: budgets included for Needle & Syringes and Clinical Waste which had been omitted during the budget upload in period 3.

Needle & Syringes	Clinical Waste	Total	Contingency Budget before BV	Contingency Budget after BV
£2,772.50	£48,094.50	£50,867.00	£-635,199.00	£-686,066.00

PCO Administered

Seniority – Per actual Q1 payment made and calculated by Capita. Budget assumes a 25% reduction on 16.17 per national phasing out of this scheme, however this is dependent on practice structure, £14.7K overspend YTD.

Maternity, Sickness and Retainers – Based on claims submitted. 21K underspend YTD.

Indemnity Fees

These have been accrued to budget based on expected costs. Additional Funding may be available for this from NHS England central team, but this is TBC at this stage.

Premises:

Based on current expected costs, rates are accrued based on bills received checked by GL Hearn.

QOF:

The accrual for QOF achievement is based on 16.17 points and prevalence at 17.18 price with a 0.7% demographic growth assumption. This is £21.9K adverse variance YTD.

Budget Movement:

	£
Original Budget	20,427,000
CCG PMS Premium Vired	-90,570
Revised Budget	20,336,430

Legacy Costs:

Legacy costs relating to 16/17 are transferred to a different cost centre on a monthly basis.