

Title of meeting:				Primary Care Joint Commissioning Committee (JCC) Committees in Common (CIC)			
Date of Meeting		April 2016		Paper Number		12	
Title				Primary care Joint Co Commissioning Finance Reports for the 2016/17 Budget for: <ul style="list-style-type: none"> • NHS Slough CCG • NHS Bracknell & Ascot CCG • NHS Windsor, Ascot and Maidenhead CCG 			
Sponsoring Director (name and job title)				James Drury, Director of Finance, NHS England, South, South Central			
Sponsoring Clinical / Lay Lead (name and job title)							
Author(s)				Colin Hobbs, Assistant Head of Finance, NHS England, South, South Central			
Purpose				This report is prepared to provide an overview, prior to submission of the third and final version of the 2016/17 GP Primary Care Budget.			
The Primary Care Joint Commissioning Committee is required to (please tick)							
Approve	<input type="checkbox"/>	Receive	<input type="checkbox"/>	Discuss	<input type="checkbox"/>	Note	<input checked="" type="checkbox"/>
Risk and Assurance <i>(outline the key risks / where to find mitigation plan in the attached paper and any assurances obtained)</i>				Risks are highlighted in the paper.			
Legal implications/regulatory requirements				Prepared in accordance with NHS England Planning Guidance			
Public Sector Equality Duty				None for this report			
Links to the NHS Constitution (relevant patient/staff rights)				The NHS is accountable to public committees and patients that it serves. The NHS is committed to providing best value for taxpayer's money.			
Strategic Fit <i>Primary Care strategy? and Other relevant strategies</i>				Enables integration of Primary Care resources to facilitate delivery of the CC primary care strategy and the NHS 5 year forward view.			
Commercial and Financial Implications <i>(Identify how the proposal impacts on</i>				The budget incorporates all existing contract arrangements and the impact of the 2016/17 GP			

<p>existing contract arrangements and have these been incorporated?</p> <p>Include date Deputy CFO has signed off the affordability and has this been incorporated within the financial plan. Include details of funding source(s)</p>	<p>contract changes.</p> <p>Date Director of Finance sign off.....</p>
<p>Quality Focus (Identify how this proposal impacts on the quality of services received by patients and/or the achievement of key performance targets Include date the Director of Nursing has signed off the quality implications)</p>	<p>Date Director of Nursing sign off.....</p>
<p>Clinical Engagement Outline the clinical engagement that has been undertaken</p>	<p>None for this report</p>
<p>Consultation, public engagement & partnership working implications/impact</p>	<p>None for this report</p>
<p>NHS Outcomes Please indicate (highlight) which Domain this paper sits within by highlighting or ticking below: Please note there may be more than one Domain.</p>	<p>Domain 1 Preventing people from dying prematurely;</p> <p>Domain 2 Enhancing quality of life for people with long-term conditions;</p> <p>Domain 3 Helping people to recover from episodes of ill health or following injury;</p> <p>Domain 4 Ensuring that people have a positive experience of care; and</p> <p>Domain 5 Treating and caring for people in a safe environment; and protecting them from avoidable harm.</p>
Co-Commissioning governance	
<p>Which CCG does this Paper relate to or potentially effect?</p>	<p>Slough <input checked="" type="checkbox"/> WAM <input checked="" type="checkbox"/> Bracknell & Ascot <input checked="" type="checkbox"/></p>
<p>Is this paper related to a CCG statutory function?</p>	<p>YES Delegated through Co-commissioning</p>
<p>Is this paper related to a NHS England statutory function?</p>	<p>YES Primary Care Commissioning</p>
<p>Potential conflicts of interest (who for?) GP's, Practice Managers, Federations, Councils,</p>	<p>None</p>
<p>Are all voting members eligible to vote?</p>	<p>No vote required</p>
<p><u>Executive Summary</u></p> <p>This report provides an overview, prior to submission, of the third and final version of the 2016/17 GP primary care budget. The budget will be submitted on the 11th April in accordance with the national guidance.</p> <p>The overall South Central allocation includes 3.6% growth; however, this varies at individual CCG</p>	

level.

Total Allocation for Bracknell & Ascot CCG - £15,969,000

Total Allocation for Slough CCG - £19,561,000

Total Allocation for WAM CCG - £17,298,000

Recommendation(s)

The Committee is asked to note the 2016/17 GP Primary Care Budget

<u>Chairs Use Only</u>	
Any known conflicted committee members from Declarations of Interest register?	No

CCV1

Commissioning Primary Medical Services – Berkshire East CCG's



Prepared by: Colin Hobbs/Dean Walton, NHS England, South Central, Assistant Head of Finance

Classification: OFFICIAL

The National Health Service Commissioning Board was established on 1 October 2012 as an executive non-departmental public body. Since 1 April 2013, the National Health Service Commissioning Board has used the name NHS England for operational purposes.

2016/17 GP Direct Commissioning Plans

Overview

The purpose of this paper is to provide the CCG with an overview, prior to submission, of the third and final version of the 2016/17 GP primary care budget.

The budget will be submitted on the 11 April in accordance with the national guidance.

The local office will work with the CCG to refine the budget detail at practice level for ledger upload during April.

Allocation

The overall South Central Allocation includes 3.6% growth; however, this varies at individual CCG level.

Surplus Position

The CCG Financial Planning Template Macro removed the 1% surplus requirement against Primary Care Co-Commissioning Allocations for the plan submission on 8th February 2016.

The Primary Care Co-Commissioning Plan presents a breakeven position against the baseline allocation.

Assumptions

- Assumptions: GP contract changes are to be implemented through a 6.09% change in the global sum rate per weighted patient (see Table 1 and 2 below).
- Demographic growth of 0.72% overall
- Medical revalidation sits with NHS England outside of Co-commissioning
- Premises included at FOT level with 5% growth.
- NHSP/CHP premises impact of the change to market rate charging not factored into position.
- Benefit from reduction in rateable values not factored into position.
- QOF Assumption [based 98% achievement]
- Detailed practice level budgets with updated FOTs based upon M11 YTD.
- CQC fees included within overall GP contract changes above.

Calculation of increase to Global Sum from 01/04/2016

Table 1: Calculation of increase to Global Sum from 01/04/2016

Increase due to:	Per weighted patient
	£
Inflationary uplift	£0.85
MPIG reinvested	£0.50
Seniority reinvested	£0.30
Elements of the deal paid through global sum	£2.07
Enhanced Services reinvested	£0.73
Total increase to Global Sum	£4.45

Table 2 Planning Assumption	£ per patient	OOH deduction %	£ per patient deduction	Average £ per patient to take account of half year seniority increase 15/16	Average less OOH
15/16	£76.51	-(5.34)%	(£4.09)	£76.14	£72.05
16/17 Proposed	£80.59	-(5.15)%	(£4.15)	£80.59	£76.44
Difference					£4.39
% increase					6.09%

2015/16 FOT to 2016/17 Budget Bridge Analysis

The tables below provide a bridge analysis of the movement from 2015/16 forecast outturn (based upon M11 YTD expenditure) to the 2016/17 delegated budget.

The explanatory narrative below is generic rather than specific to your CCG; however, further specific information is available upon request.

Non Recurrent Adjustments

Expenditure covered by a non-recurrent allocation received in 2015/16 e.g. "Support to Vulnerable Practices" has been removed.

GMS/PMS/APMS contract payments - Section 96 support and other set-up/mobilisation costs.

MPIG and Seniority phased reduction as per national guidance.

Enhanced Services – Year end provisions for late claims

Other Full Year Effect (FYE) Adjustments

GMS/PMS/APMS contract payments – change in contract type following PMS Contract Reviews.

Inflation

As per assumptions above.

Activity Growth

As per assumptions above

Other Adjustments

Removal of Medical Revalidation expenditure as budget not part of delegated allocation.

Addition of NHS Property Services budget as not part of Co-Commissioning budget in 2015/16 but included within delegated allocation.

Reserves required as per national guidance.

2015/16 FOT to 2016/17 Budget Bridge Analysis

[Cont.]

16/17 Primary Care Budget. April Submission for NHS England, South (South Central) Thames Valley.

	FOT Analysis		Allocation Build						
	M11 YTD	FOT	FOT	NR Adjustments	Other FYE Adj	Inflation (£)	Activity Growth	Other Adjustments	Total
<i>All figures in £'000s</i>									
General Practice - GMS	107,314	117,155	117,155	(2,795)	16,973	7,682	946	0	139,962
General Practice - PMS	44,040	48,076	48,076	(348)	(17,736)	1,635	216	0	31,844
Other List-Based Services (APMS)	6,404	9,148	9,148	(695)	1,872	628	74	0	11,028
Premises cost reimbursements	25,175	27,297	27,297	0	0	1,365	197	0	28,859
Other premises costs	135	1,609	1,609	(1,309)	0	11	2	0	313
Enhanced services	13,476	16,083	16,083	(1,923)	0	(1,337)	92	0	12,914
QOF	20,630	22,930	22,930	0	0	0	165	0	23,095
Other - GP Services	15,252	15,335	15,335	(1,238)	0	0	101	0	14,198
Revalidation and assurance	13	1,079	1,079	0	0	0	8	(1,086)	0
NHSP	0	0	0	0	0	0	0	3,053	3,053
Reserves	4,205	0	0	0	0	0	0	7,729	7,728
Total Expenditure	236,646	258,712	258,712	(8,309)	1,109	9,984	1,801	9,694	272,994

Total Allocation

272,994

Reserves Analysis

Contingency (0.5% of allocation)

1,365

Headroom (1% of allocation)

2,730

Other Reserves

3,634

Total Reserves

7,729

16/17 Primary Care Budget. April Submission for NHS Bracknell and Ascot CCG

CCG Code: 10G

FOT Analysis

Allocation Build

All figures in £'000s

	M11 YTD	FOT	FOT	NR Adjustments	Other FYE Adj	Inflation (£)	Activity Growth	Other Adjustments	Total
General Practice - GMS	8,490	9,268	9,268	(92)	700	579	71	0	10,525
General Practice - PMS	859	938	938	(11)	(714)	(0)	2	0	215
Other List-Based Services (APMS)	0	0	0	0	0	0	0	0	0
Premises cost reimbursements	1,192	1,421	1,421	0	0	71	10	0	1,503
Other premises costs	14	93	93	(79)	0	1	0	0	15
Enhanced services	962	1,541	1,541	(614)	0	(79)	6	0	854
QOF	1,220	1,354	1,354	0	0	0	10	0	1,364
Other - GP Services	458	463	463	1	0	0	3	0	467
Revalidation and assurance	0	68	68	0	0	0	0	(68)	0
NHSP	0	0	0	0	0	0	0	223	223
Reserves	0	0	0	0	0	0	0	802	802
Total Expenditure	13,194	15,147	15,147	(795)	(13)	571	103	957	15,969

Total Allocation

15,969

Reserves Analysis

Contingency (0.5% of allocation)

80

Headroom (1% of allocation)

160

Other Reserves

563

Total Reserves

802

16/17 Primary Care Budget. April Submission for NHS Slough CCG

CCG Code: 10T

FOT Analysis

Allocation Build

All figures in £'000s

	M11 YTD	FOT	FOT	NR Adjustments	Other FYE Adj	Inflation (£)	Activity Growth	Other Adjustments	Total
General Practice - GMS	2,130	2,327	2,327	(14)	1,960	257	31	0	4,560
General Practice - PMS	9,192	10,030	10,030	(60)	(2,095)	450	57	0	8,382
Other List-Based Services (APMS)	869	1,752	1,752	0	209	119	14	0	2,094
Premises cost reimbursements	1,397	1,596	1,596	0	0	80	11	0	1,687
Other premises costs	1	101	101	(89)	0	1	0	0	13
Enhanced services	818	980	980	(83)	0	(111)	6	0	792
QOF	1,337	1,491	1,491	0	0	0	11	0	1,502
Other - GP Services	552	950	950	(572)	0	0	3	0	381
Revalidation and assurance	0	74	74	0	0	0	1	(74)	0
NHSP	0	0	0	0	0	0	0	76	76
Reserves	0	0	0	0	0	0	0	74	74
Total Expenditure	16,296	19,300	19,300	(817)	74	795	133	76	19,561

Total Allocation

19,561

Reserves Analysis

Contingency (0.5% of allocation)

98

Headroom (1% of allocation)

196

Other Reserves

(219)

Total Reserves

74

16/17 Primary Care Budget. April Submission for NHS Windsor, Ascot and Maidenhead CCG

CCG Code: 11C

FOT Analysis

Allocation Build

All figures in £'000s

	M11 YTD	FOT	FOT	NR Adjustments	Other FYE Adj	Inflation (£)	Activity Growth	Other Adjustments	Total
General Practice - GMS	8,681	9,477	9,477	(96)	1,425	635	78	0	11,517
General Practice - PMS	1,491	1,627	1,627	(17)	(1,471)	0	1	0	140
Other List-Based Services (APMS)	0	0	0	0	0	0	0	0	0
Premises cost reimbursements	1,586	1,885	1,885	0	0	94	14	0	1,993
Other premises costs	4	155	155	(140)	0	1	0	0	16
Enhanced services	869	1,049	1,049	(116)	0	(89)	6	0	850
QOF	1,271	1,410	1,410	0	0	0	10	0	1,420
Other - GP Services	654	454	454	3	0	0	3	0	460
Revalidation and assurance	1	74	74	0	0	0	1	(75)	0
NHSP	0	0	0	0	0	0	0	3	3
Reserves	0	0	0	0	0	0	0	899	899
Total Expenditure	14,558	16,131	16,131	(367)	(46)	641	113	827	17,298

Total Allocation

17,298

Reserves Analysis

Contingency (0.5% of allocation)

86

Headroom (1% of allocation)

173

Other Reserves

639

Total Reserves

899

16/17 Primary Care Budget. April Submission for NHS Berkshire East CCGs

CCG Code: 10H

FOT Analysis

Allocation Build

All figures in £'000s

	M11 YTD	FOT	FOT	NR Adjustments	Other FYE Adj	Inflation (£)	Activity Growth	Other Adjustments	Total
General Practice - GMS	19,301	21,071	21,071	(203)	4,084	1,470	180	0	26,603
General Practice - PMS	11,542	12,595	12,595	(88)	(4,279)	450	59	0	8,737
Other List-Based Services (APMS)	869	1,752	1,752	0	209	119	14	0	2,094
Premises cost reimbursements	4,174	4,902	4,902	0	0	245	35	0	5,183
Other premises costs	19	349	349	(308)	0	2	0	0	44
Enhanced services	2,650	3,570	3,570	(813)	0	(279)	18	0	2,495
QOF	3,827	4,256	4,256	0	0	0	31	0	4,287
Other - GP Services	1,663	1,867	1,867	(568)	0	0	9	0	1,308
Revalidation and assurance	2	216	216	0	0	0	2	(217)	0
NHSP	0	0	0	0	0	0	0	302	302
Reserves	0	0	0	0	0	0	0	1,775	1,775
Total Expenditure	44,047	50,577	50,577	(1,979)	14	2,007	348	1,860	52,828

Total Allocation

52,828

Reserves Analysis

Contingency (0.5% of allocation)

264

Headroom (1% of allocation)

528

Other Reserves

983

Total Reserves

1,775

Reserves

Reserves include 0.5% contingency and 1% Headroom as per national planning guidance and Other Reserves to balance planned expenditure to the CCG delegated budget allocation.

Where Other Reserves are a negative balance NHS England will work with CCG colleagues to identify where potential adjustments to planned expenditure can be made to reduce or eliminate this.

Key risks

- Pressure to be quantified on potential rent increases following rent reviews.
- Need to factor into the budgets the changes in premises reimbursements from pre-agreed PCIF/PCTF investments.

Key Mitigations

- Benefit from GP premises rate reviews
- Prior year cost pressures absorbed by NHS England
- Reserves