

Wolverhampton CCG GP Services Budget

Month 7 2016/17

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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.

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1 2016/17 GP Services

The allocation to fund GP Services relating to Wolverhampton CCG for 2016/17 as at month 7 is £33.1m. The forecast outturn is £33.1m delivering a breakeven position.

The planning metrics for 2016/17 are as follows;

- Contingency delivered across all expenditure areas of 0.5%
- Non Recurrent Transformation Fund of 1%

The CCG is not required to deliver a surplus of 1% on their GP Services Allocations, this remains with NHS England West Midlands.

There table below shows the revised forecast for month 7;

	Month 6 FOT	Month 7 FOT	Variance
	£'000s	£'000s	£'000s
General Practice - APMS	2,248	2,275	(27)
General Practice - GMS	19,653	19,653	0
General Practice - PMS	1,798	1,798	0
QOF	3,485	3,472	13
Enhanced Services	1,555	1,562	(7)
Dispensing/Prescribing Fees	222	222	0
Premises Cost Reimbursements	2,771	2,753	18
Other Premises	106	105	1
Other GP Services	577	666	(89)
PMS Premium	311	311	0
1% Non Recurrent Transformation Fund	341	341	0
0.5% Contingency	125	34	91
TOTAL	33,192	33,192	0

A full forecast review has been carried out in month 7 which includes the following updates:

- Recalculation of Global Sum Payments, PMS and APMS Contract payments based on the October 2016 updated list sizes.
- Review of DES Forecasts based on activity to date.
- Review of Premises Forecasts based on payments to date.
- Review of Locum reimbursements (maternity/paternity etc.) based on approved applications.
- Review of Seniority actual payments for quarters one and two.

This has resulted on a drawdown on contingency of £91k, leaving £34k available for further in year cost pressures.

2 Access to 2016/17 Primary Care Reserves

The forecast outturn includes a 1% Non-Recurrent Transformation Fund, and a 0.5% contingency in line with the 2016/17 planning metrics.

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In line with national guidance the 1% Non-Recurrent Transformation Fund must remain uncommitted to support cost pressures within the wider health economy.

The 0.5% contingency is currently being held to support in year cost pressures within the CCG's GP Services position and will be reviewed quarterly, at month 7 £34k of the contingency remains available. The CCG should now develop plans for contingency utilisation should it become available.

The forecast outturn includes the assumption that all of the PMS Premium available will be fully utilised. The CCG's PMS Premium investment plan has been approved by the Locality Director. An MOU template has been sent to the CCG CFO for signing to enable a Purchase Order to be generated. The CCG is asked to ensure that this is returned to NHS E West Midlands as soon as possible.

The CCG is also asked to ensure that costs are incurred and recharged to NHS E West Midlands before 31st March 2017, as any year end accrual for reserves spend is not expected to be material.

3 Conclusion

NHS England West Midlands will be monitoring the financial position of the GP Services budget allocated the CCG and will report any adverse variance accordingly on a quarterly basis; including the use of reserves and contingency funding.

4 Recommendations

The Committee is asked to:

- Note the contents of this report.
- Return the signed PMS Premium MOU to NHS E West Midlands.
- Mobilise plans for the PMS Premium investment to ensure expenditure is incurred by the 31st March 2017.
- Develop plans for contingency usage should it become available.

Charmaine Hawker
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