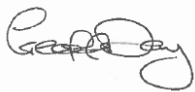


Date:	3 January 2019
Meeting:	Joint Primary Care Commissioning Committee
Item Number:	12.0
Public/Private:	Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>

Author: (Name, Title)	Erica Ellerington, Primary Care Contract Manager
GB Lead: (Name, Title)	Geoff Day Interim Director of Primary Care
Director approval (Name)	Geoff Day
Director Signature (MUST BE SIGNED)	

Report Title:
NHS England Update
Decisions to be made:
To note

Link to a Strategic Objective?	<input checked="" type="checkbox"/>	Prevention, Out of Hospital, Primary Care Transformation, Delivery of Statutory Objectives
Link to a Strategic Risk	<input checked="" type="checkbox"/>	Links to strategic risks 1,3,4 and 7

Continue to improve the quality of services	<input checked="" type="checkbox"/>	Improve patient experience	<input checked="" type="checkbox"/>		
Reduced unwarranted variations in services	<input checked="" type="checkbox"/>	Reduce the inequalities gap in North Lincolnshire	<input checked="" type="checkbox"/>		
Deliver the best outcomes for every patient	<input checked="" type="checkbox"/>	Statutory/Regulatory	<input checked="" type="checkbox"/>		
Purpose (tick one only)	Approval <input type="checkbox"/>	Information <input type="checkbox"/>	To note <input type="checkbox"/>	Decision <input checked="" type="checkbox"/>	Assurance <input type="checkbox"/>

Executive Summary (Question, Options, Recommendations):
<p>This report is to update the Committee on matters pertaining to primary medical care within NHS England.</p> <p>These being:-</p> <ol style="list-style-type: none"> 1. Contract Changes 2. Primary Care Finance 3. Online Consulting 4. Apex Insight Tool

Recommendations	Note the contents of this report	
Report history	NHSE Update reports are provided to each JPCCC	
Equality Impact	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	An equality impact assessment is not required for this report
Sustainability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	The areas detailed in this update relate to primary care contracting and GFV initiatives to promote sustainability of services
Risk	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Risk associated with areas detailed on this report have been linked to organisational strategic risks
Legal	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Legal responsibilities for primary care contracting remain with NHSE
Finance	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	A full financial update pertaining to primary care is included within the report

<i>Patient, Public, Clinical and Stakeholder Engagement to date</i>									
	<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>		<i>N/A</i>	<i>Y</i>	<i>N</i>	<i>Date</i>
Patient:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Clinical:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Public:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Other:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



North Lincolnshire Update

Prepared by Erica Ellerington
Primary Care Contract Manager
NHS ENGLAND – North (Yorkshire & the Humber)

19th December 2018

1. Contract Changes

There have been no contract change requests received by NHS England for this period.

Action for the committee:

No action required.

2. Primary Care Finance

In summary, month 8 is showing a YTD overspend of £297K against an overspend of £234K last month, the main reasons for the movement relates to dispensing doctors variance due to increase in tariff from Oct.

- APMS – YTD underspend -£27.8K due to budget set on 17/18 contract value rather than revised lower contract value with Core Care Ltd which commenced in 18/19. Accrued estimate for Q2 list size adjustment due to be paid shortly of £8809.44 and accrued pro rata Q2 for Oct & Nov.
- Dispensing Doctors - This data is 2 months in arrears, therefore the accruals are for Oct & Nov. The accruals are based on 17.18 costs with 18.19 prices (6.9% tariff increase from October) and volume increase assumption based on national increases. A couple of practices appear to be overspending compared to last year which we are monitoring - B81007, B81043, B81063. Accruals for October and November include tariff increase. YTD overspend of £92k.
- Enhanced Services – overall £31.4k overspend.
- Extended Hours - accruals have been entered based on forecasts for practices that signed up last year that may be late signing up this year. YTD £20.1K overspend due to Central Surgery undertaking the ES in 18/19 & not in 17/18 therefore not budgeted for.
- Learning Disabilities – Accrued to forecast (either based on pro-rata YTD spend or budget where there has been no spend for 18/19 as yet). YTD variance £12k
- Minor Surgery – Accrued as per actual April-Oct pro rata for Nov, YTD variance -£686
- GMS - Global Sum is per the current list sizes to date, also now includes the additional uplift announced recently which is currently unfunded and paid to practices in October. YTD Overspend £121.1K.
- MPIG is per actual costs for current contracts.
- PMS – YTD variance relates to additional uplift overspend £16.8K not budgeted as not known during budget setting exercise (£1.04 per weighted head less an additional £0.05 Out of hours deduction), -£7.2K list size adjustment and £680 Out of Hours Adjustment.
- Other GP Services – overall £55.7k overspend .
- Maternity/sickness claims – currently overspending £9K YTD. Maternity/Sickness claims are difficult to predict, we are monitoring this closely.
- CQC - accrued as per actual claims and estimated for those due. The calculation has changed for 18/19 and the budget was based on the calculation for 17/18. YTD £8.2 overspend.
- Seniority – YTD variance -£12.4k based on 17/18 actual less phasing reduction.
- Needle & Syringes - minimal overspend based on actual activity spent.
- Occupational Health – accrual based on 17/18 invoices as no invoices for 18/19 have been received yet, showing a YTD overspend of £1.7k.
- Retainers - overspending by £12.4k YTD as per current approved retainers.
- QIPP target – there is a negative annual budget of £55k as budgeted costs are greater than the CCG allocation, therefore YTD £36.5 variance.
- Premises – overall £5.5K overspend.
- Rent is accrued taking into account an estimate for practices due revaluation in 18/19. £10.8K overspend YTD.
- Rates are accrued as per actual or to budget where the rates bills are yet to arrive. -£9K underspend YTD.
- Water and Clinical Waste are accrued to forecast. 5K overspend YTD

- Other Premises Costs – relates to the DV budget which is based on invoices received. 1.6K overspend YTD.
- QOF - The accrual for QOF achievement is based on 17/18 points and prevalence at 18/19 price with a 0.7% demographic growth assumption, YTD variance £8.5k.

Action for the Committee

The Committee is asked to note this update.

3. Online Consulting Update

6 practices have now gone live with online consult; Riverside Surgery, Bridge Street, Barnatby, Ancora, Cambridge Avenue and South Axholme with an additional 2 practices with agreed deployment dates.

A further 2 practices have shown interest and are currently working through the process with the programme project manager.

This has potential patient population coverage of 97,219.

A website has been developed to track progress in North Yorkshire and the Humber

<https://sites.google.com/riperian.co.uk/hcv-online-consultation/home>

Action for the Committee

The Committee is asked to note this update.

4. Apex Insight Tool

The rollout of the Apex Insight tool is currently in the planning phase.

An initial Steering Group meeting was held on 24th October 2018, following which expressions of interests were requested from practices.

A demonstration to the Practice Managers Forum is arranged for 8th January 2018.

Action for the Committee

The Committee is asked to note this update.