

Date:	28 February 2019				
Meeting:	Joint Primary Care Commissioning Committee				
Item Number:	10.0				
Public/Private:	Public ⊠ Private □				

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)	Carpo dy				

Report Title:
NHS England Update
Decisions to be made:
The Committee are requested to approve the request for a GP 24 Hour Retirement.
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Link to a Strategic Objective?	$\boxtimes$	Prevention, Out of Hospital, Primary Care Transformation, Delivery of Statutory Objectives
Link to a Strategic Risk	$\boxtimes$	Links to strategic risks 1,3,4 and 7

Continue to improve the quality of services	$\boxtimes$	Impr	$\boxtimes$				
Reduced unwarranted variations in services	$\boxtimes$	Redu	$\boxtimes$				
Deliver the best outcomes for every patient	$\boxtimes$	Stati	$\boxtimes$				
Purpose (tick one only)	Approval 🖂		Information	To note □	Decision	As	ssurance

# **Executive Summary (Question, Options, Recommendations):**

This report is to update the Committee on matters pertaining to primary medical care within NHS England.

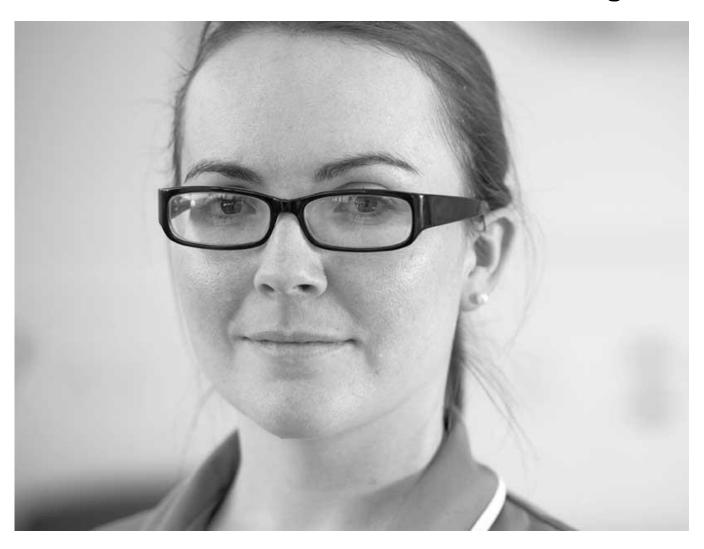
# These being:-

- 1. Contract Changes
- 2. Online Consulting
- 3. Apex Insight Tool
- 4. International Recruitment
- 5. Primary Care Finance

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

Patient, Public, Clinical and Stakeholder Engagement to date										
	N/A	Υ	N	Date	Date			N	Date	
Patient:	$\boxtimes$				Clinical:	$\boxtimes$				
Public:	$\boxtimes$				Other:	$\boxtimes$				





# **North Lincolnshire Update**

## 1. Contract Changes

The following contract changes have occurred since December 2018;

- Retirement of Dr Dwyer, Cedar Medical Practice
- Partner changes at Central Surgery, Dr Rauf (departure), Dr Hector and Dr Gregory (commencement)
- Retirement of Dr M Sarvesvaran (Dr Websters & Partners, Winterton)

The following contract change requires approval by the Committee;

20 Hours retirement for Dr Lee, West Common Lane on 15<sup>th</sup> July 2019.

#### Action for the committee:

The Committee are requested to approve the request for a GP 24 hour retirement.

## 2. 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, and 2 practices awaiting deployment dates to be confirmed.

1 further practice has shown interest and is currently working wth the Project Manager to determine roll out.

This has potential patient population coverage of 109,661.

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.

# 3. Apex Insight Tool

All 19 practices have signed up to have the workforce tool installed. The project officer supporting the programme is now working with practices and Apex Insights to make arrangements for the tool to be installed. Going forward the project officer will work across the networks to identify how best to use to tool to get the best from it.

#### **Action for the Committee**

The Committee is asked to note this update.

## 4. International Recruitment Update

A second taster weekend is planned for 7<sup>th</sup>, 8<sup>th</sup>, 9<sup>th</sup> and 10<sup>th</sup> March. There are 8 doctors booked to visit the North and North East Lincolnshire CCG areas. They will fly into Humberside Airport and are staying at Forest Pines Hotel. The doctors will spend a full day in practice on the Friday and a variety of working meals and meetings have been set up to promote the area as a good place to live and work.

# 5. Primary Care Finance

In Summary 9 is now showing a YTD overspend of £331.5K against an overspend of £297K last month. Movement in Enhanced services due to recoveries on Extended hours & APMS Quarter 4 list size adjust accrued out, offset against spend in relation to Maternity & Sickness claims.

<u>APMS</u> – YTD underspend -£47.4K 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 Q3 list size adjustment of £8,809 based on Q2 values.

<u>Dispensing Doctors</u> - This data is 2 months in arrears, therefore the accruals are for Nov & Dec. 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. Accruals for Nov & Dec include tariff increase. YTD overspend of £110k.

# Enhanced Services - overall £24.4K 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 13.9K overspend due to Central Surgery undertaking the ES in 18/19 & not in 17/18 therefore not budgeted for. Recoveries made this month for B81005 for Q1 and some of Q2 as they were late providing the service.

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 £13.1k

Minor Surgery - Accrued as per actual April-Nov pro rata for Dec, YTD variance -2.7K

<u>GMS</u> - 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 £139.4K

MPIG is per actual costs for current contracts.

<u>PMS</u> – Accrued out PMS Premium. CCG have received request to raise invoice. The YTD variance relates to budget setting error and additional uplift, overspend of £18.5K not budgeted as not known during budget setting exercise (£1.04 per weighted head less an additional £0.05 Out of hours deduction), -£8.1K list size adjustment and £424 Out of Hours Adjustment.

# Other GP Services - overall £72.3k overspend

Maternity/sickness claims – currently overspending £22.4K 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 £9.3K overspend.

Seniority – YTD variance -£16k 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 £2k.

Retainers - overspending by £13.5 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 £41K variance.

# Premises – overall £8.4K overspend

Rent is accrued taking into account an estimate for practices due revaluation in 18/19. £11.7K overspend YTD.

Rates are accrued as per actual or to budget where the rates bills are yet to arrive. -£10.2K underspend YTD.

Water and Clinical Waste are accrued to forecast. 6.9K overspend YTD

Other Premises Costs – relates to the DV budget which is based on invoices received. £4.3K 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 £9.6k.

#### **Action for the Committee**

The Committee is asked to note this update.