

# **GOVERNING BODY MEETING**

Wednesday 25 September 2013

Agenda Item 3.2

Name of Paper / Report		Finance & Performance Report,  Month 5					
Lead Author	a	as at 31 August 2013  Alex Mitchell  Chief Finance Officer					
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Governing Body Sponsor		Alex Mir Chief Financ					
Supporting healthy lifestyles and reducing health inequalities	Reducing premature mortality	premature local needs our de					
Purpose of Paper / Report	For information For decision	n ☑ ☑					
Exec Summary	Clinical Comperformance to 31 August 20 forecast outtur £200k.	report outlines missioning Gro o date and estima 13, ECCCG is u rn underspend re	up's (ECCC ated year end inderspent by emaining in li	CG's) financial doutturn. As at y £120k with a ne with plan of			
	The annual ta expenditure/co reduced existi	ation Productiving arget for the organisments by £ and or planned expenses £0.9m to deliver.	anisation was 5.9m. Actior expenditure b	s to reduce its as to date have			
	ECCCG is ass are consistent	Cash Management ECCCG is assuming that the cash management principles are consistent with those of previous Primary Care Trusts and are on target to manage its cash within its notified limits.					
		) me risks that are pact on ECCCG	•	•			

	are detailed within section 9.
Recommendations	<ul> <li>The Governing Body is requested to note:</li> <li>the cumulative underspend as at August 2013 of £120k</li> <li>the forecast year end underspend of £200k</li> <li>the progress against QIPP target</li> <li>the issues currently being managed</li> </ul>
Next Steps	To report back to the governing body on the issues currently affecting the CCG.

# Finance & Performance Report Month 5 as at 31 August 2013

#### 1. Overview

1.1 **Financial Position.** As at 31 August 2013, the cumulative position is an underspend of £120k against a cumulative budget of £92.9m. The forecast outturn remains in line with the initial plan to deliver a £200k surplus. **Table One** below outlines the financial position in further detail:

Table One: Financial Position for NHS Eastern Cheshire Clinical Commissioning Group (ECCCG) as at 31 August 2013									
Prospectus 'Plan'		Cumulative Position Forecast Outturn							
		Plan	Actual	Variance Over/ (Under)		Actual	Variance Over/ (Under)		
£'000s		£'000s	£'000s	£'000s		£'000s	£'000s		
222,512		92,859	92,738	(120)		222,312	(200)		

- 1.2 Quality Innovation Productivity & Prevention (QIPP). The annual target for the organisation was to reduce its expenditure/commitments by £5.9m. Actions to date have reduced existing or planned expenditure by £5.04m with the remaining £0.9m to deliver.
- 1.3. **Forecast Outturn.** The forecast remains at a £200k underspend which remains consistent with the Financial Plan. This includes an analysis of the commitments against the following budgets: Growth, Local Delivery Improvement Plan (LDIP) and Investments.
- 1.4. **Cash Management.** ECCCG is assuming that the cash management principles are consistent with those of previous Primary Care Trusts and are on target to manage its cash within its notified limits.
- 1.5. **Issues (Risks).** There are some risks that are currently being monitored which may impact on ECCCG's financial position. These are detailed within section 9.

#### 2. Financial Position

2.1 As at 31 August 2013, the cumulative position is an underspend of £120k against a planned level of expenditure of £92.9m. **Table Two** below shows the current financial position by service area.

Table Two: Financial Position for NHS Eastern Cheshire Clinical Commissioning Group (ECCCG) by Service Area										
		Cun	nulative Pos	sition						
Service Area	Annual Budget	Budget								
	£000s	£000s	£000s	£000s						
Acute Contracts	119,400	49,750	50,492	742						
Community Services	18,541	7,725	7,781	55						
Mental Health	12,896	5,342	5,342	(1)						
Non Contract Activity	2,019	841	832	(9)						
Continuing Healthcare	20,237	8,432	8,793	361						
Prescribing	30,015	12,506	12,529	23						
Primary Care Other (LES)	1,586	661	711	50						
Grants/Voluntary Sector	1,017	424	520	96						
Other Healthcare Spend	430	210	214	3						
Investments/LDIP/Growth	11,483	4,960	3,459	(1,501)						
Planned Surplus	200	83	0	(83)						
Running Costs	4,688	1,924	2,066	142						
Total Budget	222,512	92,859	92,738	(120)						

#### 3. Year to Date Performance

- 3.1 The year to date position reflects all costs received to date and a number of estimates around costs waiting to be invoiced. Whilst this is normal practice there are a number of key issues worth highlighting:
  - Acute Contracts: The timely flow of data from the Commissioning Support Unit (CSU) continues to be a challenge resulting in a number of alternative processes being implemented by ECCCG's contracting team.

The interim solution does provide a degree of information although some assumptions are still being made. It is considered that this position will reduce as queries continue to be resolved.

This position has been escalated with the CSU and is being closely monitored. A further update will be discussed at a future meeting.

- **Community Services:** This is a block contract and should reflect the agreed Annual Plan. The cumulative positions require realignment in the future.
- Continuing Healthcare: Further analysis is being undertaken to identify the
  cause for increased costs within this area. Predominantly it is linked to increased
  activity which may include historical restitution cases for which additional funding
  is available.
- Grants/Voluntary Sector: Similar to Community Services ECCCG has agreed to maintain costs at previous years' levels. Therefore, the phasing of the budget is not in alignment with the actual payments. The cumulative position requires realignment in the future.
- Investments/LDIP/Growth: This is the release of funding which was set aside in the Financial Plan to offset overperformance in contracts and any emerging pressures.
- 3.2 **Table Three** below provides a different analysis of how the acute providers are performing against four main groups. Further analysis is required to understand the variances outlined within the position.

Table Three: Analysis of Acute Contract Spend for NHS Eastern Cheshire Clinical Commissioning Group (ECCCG) by Main Group									
Acute Main Group Cumulative Position									
	Annual Budget	Budget	Actual	Variance Over/Under					
	£000s	£000s	£000s	£000s					
Planned Care	47,350	19,729	20,289	560					
Urgent Care	57,021	23,759	23,293	(466)					
High Cost Drugs	4,177	1,740	2,248	508					
Other (inc CQUIN)	10,852	4,522	4,662	140					
Total Budget	119,400	49,750	50,492	742					

#### 3.3 **Key:**

- Planned Care: Planned hospital attendance by member of public, normally following a referral from a GP or Consultant.
- Urgent Care: Opposite of planned and is normally following an emergency, ie, attendance at Accident & Emergency or direct admission to hospital via a GP.
- High Cost Drugs: Drugs that are nationally determined as being too high cost or specialist and as such are not included within the normal tariffs payable to providers, ie, rheumatology drugs
- Other: This is a catch all for all other services, ie, radiology, pathology, quality indicators.

# 4. Forecast Outturn

4.1 The financial forecast remains at a planned surplus of £200k, although **Table Four** below highlights the potential range in projects that are possible, mainly as a result of increased contract overperformance and prescribing costs.

Table Four: NHS Eastern Cheshire Clinical Commissioning Group's (ECCCG's) Potential Financial Forecast Range in Projects										
Service Area	Current Forecast £000s	Forecast Variance £000s		Most Likely £000s	Forecast Variance £000s		Worst Case £000s	Forecast Variance £000s		
Acute Contracts	121,303	1,902		121,222	1,821		121,803	2,402		
Community Services	18,674	133		18,674	133		18,674	133		
Mental Health	12,845	(52)		12,845	(52)		12,845	(52)		
NCA	1,998	(21)		1,998	(21)		2,198	178		
Continuing Healthcare	21,104	867		21,104	867		22,054	1,817		
Prescribing	30,070	55		30,415	400		30,850	835		
Primary Care Other (LES)	1,706	120		1,586	0		1,706	120		
Grants/Voluntary Sector	1,247	230		1,017	(0)		1,247	230		
Other Healthcare Spend	624	194		574	144		574	144		
Investments/LDIP/ Growth	8,190	(3,293)		8,190	(3,293)		8,190	(3,293)		
Planned Surplus	0	(200)		0	(200)		200	0		
Running Costs	4,958	271		4,688	0		4,688	0		
Total Budget	222,718	206		222,312	(200)		225,028	2,516		

## 5. Contract Performance

5.1 **Table Five** below identifies the forecast position of ECCCG's key providers as at financial year month five. It is worth noting that a significant number of these are an early indication of outturn given the limitation around availability of robust data.

Provider Name	Year to	Year to	Year to	Annual	Forecast	Forecast	Flag
Trovidor Hamo	Date	Date	Date	Budget	Outturn	Over/	9
	Budget	Spend	Var	Daagot	Juliani	Under-	
	Buaget	Opena	Vai			spend	
	£'s	£'s	£'s	£'s	£'s	£'s	
Aintres Hespital NIIIC ET							Dod
Aintree Hospital NHS FT	37,947	50,112	12,166	91,072	122,514	31,442	Red
Alder Hey NHS FT	122,131		0	293,114		162,240	
Assura Urology BC	49,315			118,356	118,356	00.700	
BMI Royal Alexandra	264,768		10,352	635,444	734,204	98,760	
BMI South Cheshire	47,043	,	-33,143	112,903	42,213	-70,690	
British Pregnancy Advisory Service	0 500 507	-,	16,268	0	-,	25,709	
Central Manchester Uni Hospitals NHS FT	2,500,527	2,526,727	26,200	6,001,265		467,814	
Cheshire & Wirral MH Partnership FT	5,325,711		0	12,781,705		0	
Cheshire Hospices Education	2,054		00.045	4,929		0	
Countess of Chester NHS FT	34,652		39,045	83,166			
Derby Community Health Service NHST	41,671		13,464	100,010		31,244	
Epilepsy Service - David Lewis Centre	16,367		0 450	39,280		0	
EyeCare Medical Ltd	690,000			1,656,000		959,028	
East Cheshire NHS Trust - Acute & Community		37,113,334	-91	89,072,218		306,934	
Hospice - East Cheshire	180,417	180,417	0	433,000		0	
Hospice - St Ann's	12,917		0	31,000		00.740	
Liverpool Womens Hospital FT	0	, -		0	, -	96,716	
Manchester Surgical Servs	0	,	33,962	0	,	65,673	
Mid Cheshire Hospital NHS FT	1,689,618		-20,399	4,055,084	3,994,701	-60,383	
North Staffs Combined Healthcare NHS Trust	16,286		0	39,087	64,404	25,317	Red
North West Ambulance Service	2,567,906			6,162,974		0	
Ophthalmology BC	47,436 190,666	,		113,846 457,599	113,846	0	
Pennine Acute Hospitals NHS Trust (AIDS / HIV)	<u> </u>				334,208	-123,391	Green
Robert Jones & Agnes Hunt Orthopaedic Hosp	87,817		43,365	210,761	286,947	76,186	
Royal Liverpool Broadgreen Hosps NHS Trust	120,603		155	289,446		17,143	
Salford Royal NHS FT	278,336			668,007	1,038,695	370,687	
South Manchester Clinic	85,618		1,237 3,708	205,482	212,291	6,809 9,711	Red Red
Spa Medica Spire Cheshire	13,230 41,353			31,752 99,247	41,463 94,453	-4,794	
Spire Manchester	41,333			99,247		9,387	Red
Spire Regency	510,140		-129,374	1,224,335		-310,499	
St Helens & Knowsley Hospital NHS Trust	46,962			112,709		-46,700	
Staffs & SOT Partners NHST	96,234			230,962	355,448	124,486	
	3,899,076			9,357,782	9,853,717	495,935	
Stockport NHS FT Ultrasound Service Care UK	121,331			291,195		33,158	
Uni Hospital of North Staffs NHS Trust	393,597			944,633		702,176	
Uni Hospital of South Manchester NHS FT	4,473,538			10,736,490		-790,958	
Vernova Carpal Tunnel BC	43,044		-331,160	103,305	9,945,552	-103,305	
Warrington & Halton Hospital NHS FT	133,618			320,684		-40,104	
Wigan, Wrightington & Leigh NHS FT	234,153			561,966	615,882	53,916	
Wirral Uni Teaching Hospital NHS FT	91,996			220,791	70,266		
	. 31.330	. 31.0/3	-00.374	ZZU./911	/ U.ZODI	- 1.00.070	GIEEII

## 6. Cash Management

- 6.1 In addition to ECCCG having to deliver a surplus of £200,000 for the financial year it also has to manage all of its payments to suppliers and staff within its available cash.
- 6.2 Previously, national guidance was available for Primary Care Trusts which outlined the monthly and year end cash targets. The principal of which was to have a minimum balance left within the bank account at the end of each calendar month. Currently, no such guidance is available for ECCCG although it is our intention to work to the same principals as we progress to the end of the financial year.
- 6.3 As at 31 August 13 ECCCG had a cash balance of £1,514,000 held within its bank account. It is forecasting a year end balance of circa £14,000.
- 6.4 It is worth noting that the increase in September of cash being drawn down from NHS England is related to the clearing of balances from the previous PCT and anticipated adjustments relating to Prescribing.

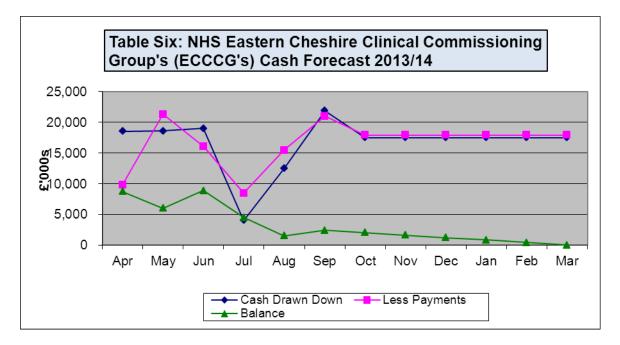


Table Seven: NHS Eastern Cheshire Clinical Commissioning Group's (ECCCG's) Cash Forecast 2013/14												
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
	£'000s											
Cash Drawn Down	18,522	18,599	19,000	4,000	12,500	21,900	17,500	17,500	17,500	17,500	17,500	17,500
Less Payments	9,824	21,306	16,101	8,427	15,449	21,000	17,900	17,900	17,900	17,900	17,900	17,900
Balance	8,698	5,991	8,890	4,463	1,514	2,414	2,014	1,614	1,214	814	414	14

#### 7. Quality, Innovation, Productivity and Prevention (QIPP)

7.1 As at 31 August 13, significant progress has been made in delivering against ECCCG's £5.9m QIPP target. **Table Eight** below highlights the status of the various initiatives including an assessment of what is currently being delivered. To date circa £5.05m is on target to deliver with a remaining £0.9m to be validated.

Table Eight: NHS Eastern Cheshire Clinical Commissioning Group's (ECCCG's) QIPP Delivery as at 31 August 2013										
QIPP Target	Target £'000s	Monitoring	Cumulative Variance	0	n Target to Deliver					
Prescribing	1,000	Performance Against Budget	£55k overspent	<b>✓</b>	Savings profiled of last 6 months					
Local Delivery Plan	500	Reduce Available Funding		✓						
LD Pool Growth	243	Performance Against Budget	£53k underspent	✓						
Running Costs	237	Performance Against Budget	£142k overspent		Profile of costs v budget - to be reviewed					
Reablement	300	Reduce Available Funding		✓						
Demand Management	558	Performance Against Budget	£742k overspent	<b>✓</b>	Monitoring of Schemes to be refined					
Reduce Growth Funding	3,062	Reduce Available Funding								
Total	5,900									

- 7.2 Prescribing £1m QIPP Target: Currently only £55k overspent as at Mth 5 which includes the forecast as per the Prescription Pricing Authorities. A significant number of plans would materialise savings towards the second half of the year and is therefore expected to remain within budget.
- 7.3 Running Costs £0.237m QIPP Target: Required to underspend by £237k against its budgets. Further work is required to ensure the actual expenditure has been phased in line with the budget and vice versa. It is forecast that this target will be delivered, although further supporting analysis is required.
- 7.4 Demand Management £0.558m QIPP Target: Work continues along the various initiatives as detailed within the plan submitted to the Governing Body previously. A challenge remains to quantify the impact of the initiatives whilst activity overall increases. Whilst it will not deliver overall a balanced position on acute activity, it is assisting in limiting this growth.

## 8. Analysis of Investments / LDIP / Growth

- 8.1 The following analysis identifies for the Governing Body what expenditure is projected during the remainder of the year against these budgets.
- 8.2 When setting the growth pot, it was recognised that this would be used to offset overperformance on budgets, and in particular hospital based activity.
- 8.3 **Table Nine** below outlines the areas of expenditure anticipated for the remaining year, resulting in a balance which has been incorporated into the position to offset any overperforming budgets.

Table Nine: NHS Eastern Cheshire Clinical Commissioning Group's (ECCCG's) Analysis of Investments/LDIP/Growth								
Analysis	Balance as at August	Anticipated Expenditure (Sept 13 - Mar 14)	Total					
	£'s	£'s ´	£'s					
Investments / LDIP / Growth	15,825		15,825					
Less: Offset Growth Offset LD Growth LDIP Investments Reablement	(3,062) (243) (500) (300)		(3,062) (243) (500) (300)					
Running Costs Styal Prison Specialist Commissioning Rebasing	(237)	(200) (988)	(237) (200) (988)					
LDIP Investments Baseline Adjustment for Primary Care		(200) (775)	(200) (775)					
CHC Assessment from LD Pool Audiology AQP Caring Together Reablement Readmissions		(600) (500) (1,000) (1,624) (2,303)	(600) (500) (1,000) (1,624) (2,303)					
Total	11,483	(8,190)	3,293					

# 9. Issues (Risks)

There are a number of issues as detailed in **Table Ten** below that ECCCG is working on within the current environment which may impact on the CCG delivering its financial duties.

Issue	Mitigation	Value	Level
Specialised Commissioning Baseline:			
In accordance with the process of rebasing the above service, a reconciliation of actuals was undertaken as at Mth 4. This identified a further pressure for ECCCG of circa ££0.2m.	Incorporated into financial position. No further reconciliations as alterations to ECCCG's baselines are being frozen as at Mth 6	£0.2m	Medium
Aintree – Bariatric and Major Trauma Baseline Revisions:			
Information has been shared with ECCCG outlining issues used in setting baselines for Aintree for the above services. Currently, the information is aggregated at a PCT level and not at a CCG level although this is being gathered.	No agreement has been reached with the lead CCG on rebasing the contracts. Current information highlights the former PCT has gained from the rebasing.	£(0.2m) - £0.m	Low
It is expected that the baselines will be revised subject to agreement £-0.2m - £0.m			
Continual Health Care Assessments (LD Pool)			
Cheshire East Council has written to ECCCG outlining its intentions around clients previously being part of the LD Pool now being submitted for CHC assessment. The indicated value is £1m should the people referred meet the CHC assessment criteria.  A response is being formalised although such action is likely to instigate a wider review of services across the economy.	The LD Recovery Group is working through an action plan on the range of options associated with the pool. As an estimate, approximately £0.6m has been built into the forecast.	£1m	Medium

Commission Support Unit – Business Intelligence			
As referred to earlier, the CSU is not delivering a Business Intelligence service in line with the service level agreement (SLA).  Key issues include the availability of monthly data, information not covering all of the CCG contracts, continually reconciling differences.	Issues have been escalated and weekly meetings held to monitor progress. ECCCG to consider future options if service does not improve.	£0 unknown	Medium
Consequence of above position has resulted in CCG staff undertaking the work to deliver a service. Quality of service still not complete which limits assumptions on contractual management and forecasting.			

## 10. Recommendations

## 10.1 The Governing Body is requested to:

- note the cumulative underspend as at 31August 2013 of £120k
- note the forecast year end underspend of £200k
- note the progress against QIPP target
- note the issues currently being managed

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